

PREA Facility Audit Report: Final

Name of Facility: Sanger B Powers Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/15/2018

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: Rose Beteck, Ph.D, Lgsw	Date of Signature: 06/15/2018

AUDITOR INFORMATION	
Auditor name:	Beteck, Rose
Address:	
Email:	rnekang@yahoo.com
Telephone number:	
Start Date of On-Site Audit:	04/11/2018
End Date of On-Site Audit:	04/12/2018

FACILITY INFORMATION	
Facility name:	Sanger B Powers Correctional Center
Facility physical address:	N8375 County Line Road, Oneida, Wisconsin - 54155
Facility Phone	920-869-1095
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:	Patrick Melman	Title:	Superintendent
Email Address:	Patrick.Melman@wisconsin.gov	Telephone Number:	920-869-1095

Warden/Superintendent			
Name:	Quala Champagne/Patrick Melman	Title:	Warden/Superintendent
Email Address:	Quala.Champagne@wisconsin.gov/Patrick.Melman@wisconsin.gov	Telephone Number:	608-240-5310/920-869

Facility PREA Compliance Manager			
Name:	Patrick Melman	Email Address:	Patrick.Melman@wisconsin.gov

Facility Health Service Administrator			
Name:	Lon Becher	Title:	Bureau of Health Services Nursing Coordinator
Email Address:	Lon.Becher@wisconsin.gov	Telephone Number:	608-240-5144

Facility Characteristics		
Designed facility capacity:	60	
Current population of facility:	119	
Age Range	Adults: 21-77	Youthful Residents: 0
Facility security level/inmate custody levels:	Minimum or Minimum Community	
Number of staff currently employed at the facility who may have contact with inmates:	17	

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

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

Agency-Wide PREA Coordinator Information			
Name:	Leigha Weber	Email Address:	Leigha.Weber@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.

A certified Audit was conducted at the Sanger B. Powers Correctional Center (SPCC) located in Oneida, WI. The audit team consisted of certified auditors Rose Beteck (lead auditor) and Howard Ray; all from Maryland Department of Public Safety and Correctional Services (MDPSCS). The audit began in February 5, 2018 with introductory email exchange between WIDOC PREA Coordinator, facility PCM and lead auditor. The facility provided the Pre-Audit Questionnaire (PAQ) at the end of February 2018 with all information and documents uploaded. The institution is small, auditors did not have to divide the standards, however used the auditor tool and handbook as our guide.

Six weeks prior to onsite visit, (February 26th, 2018) the facility was provided with contact information to post throughout the facility for inmates to write the audit team. Lead auditor emphasized eye catching colors such as bright colors for quick and easy visibility by inmates. No letters were received prior to the visit.

DAY ONE ONSITE AUDIT:

The onsite facility audit and tour began on Wednesday April 11, 2018 with all two auditors at SPCC. There was a facility greeting from the PREA Compliance Manager, Patrick Melman. Once we entered the facility, we completed an entrance introduction with Captain and Superintendent. The audit team introduced themselves, explained the purpose and outline of the audit process and the facility tour was then explained along with the audit team's expectations and requirements for a successful audit.

After the introduction meeting the tour of SPCC began. Auditor Rose Beteck, completed the facility tour while Howard Ray completed staff interviews. Beteck was escorted by Superintendent and Captain. Superintendent, PREA Compliance Manager for the duration of the tour, about 2 hours. Beteck started the tour in the all two wings/inmates living quarters, area, gymnasium, library property room, training room, classification area, holding cells (2), intake area, file room, cafeteria, health services area, laundry room, visit room, loading dock area, library and control center. All the areas visited were staffed and staff were making rounds and monitoring key areas. Doors were locked and off limits areas were maintained. No areas observed presented any sexual safety or security concerns. PREA information throughout the facility was clearly posted, both in English and Spanish. Posters listed steps that could be taken to report sexual abuse or sexual harassment incidents, provided contact information for the inmates to report these incidents and also cited Wisconsin Department of Corrections Zero tolerance policy of related to sexual abuse and sexual harassment. In the housing unit PREA hotline numbers were also posted next to the phones. The numbers were checked from one unit and determined to be working as required.

There is a main door that opens into the showers and toilet areas. There is a divider that covers up to the neck area for privacy while showering or using the restroom with no direct view in the shower/restroom area unless making security rounds. Privacy areas were available where inmates come first in the institution. Log books were reviewed and showed evidence of supervisory rounds on all three shifts at random times. Staff and inmates both stated they were not made aware in advance when supervisors were making rounds. It was also evident that female staff were announcing their presence prior to entering the male living quarters/units. Their presence is not only announced on the housing unit public address system but logged in the log book as well. Announcements were being made at the beginning of the shift and it was logged in the book and also at other times when new female staff were entering the units, and there is a blue light that comes on in the hallway indicating a female on the unit. These instances were logged as well. The cameras noted during the tour were in housing dayrooms, visiting rooms, library, all the hallways and stairwells, and any areas where inmates have access except in the shower and restroom areas. The camera coverage provides excellent coverage of the entire facility. The coverage extends outside of the building as well to cover an open field. In addition, staff perform regular rounds in the living quarters/room, hall ways, stairwells and perimeter. The first floor (the entire institution is on one level) of the building consisting of food service,

gymnasium, visiting room, administration, medical and mental health services, property room, loading dock, noncustody staff offices, control center and two units. The cameras in the hallway, and stairwells all being monitored by the control centers. Beteck completed the tour and began interviewing inmates to complete the audit process.

INTERVIEWS:

Simultaneously as the facility tour was being completed, Howard Ray commenced with staff interviews. The auditors randomly selected and spoke with a combined total of 20 inmates, and 15 staff members. Both inmates and staff were asked specific PREA questions, derived from the PRC interview template for the tour, random and specialized interviews. Everyone interviewed participated willingly and appeared to have a good understanding of the PREA standards or rights provided by them. Of the 20 inmates interviewed, 10 were randomly selected and the other 10 were targeted. Some staff members were interviewed for other specialized area since it is a small institution. The breakdown is as follows:

2 youthful inmates- SPCC does not house youthful inmates; random inmates substituted in the place of youthful inmates;

1 inmate who is older without physical disability. He acknowledged PREA orientation at SPCC within 24 hours of his arrival at the institution. He received the red handbook, watched a video and a social work talked to him and there is information all over the institution about PREA if he needed to use it. He reports feeling safe at SPCC. There were no blind, heard of hearing(deaf) or Limited English Proficiency (LEP). However, the auditor tested the translation line which works and is available 24/7 for staff to utilize.

1 inmate with cognitive disability- there was no inmate identified with cognitive disability at SPCC.

1 inmate identify as Lesbian, Gay or Bisexual- SPCC does not have any inmates who identify as Lesbian Gay or Bisexual.

2 inmate who identify as Transgender or Intersex- DACC does not have any inmates who identify as Transgender or Intersex.

1 Inmate in Segregation Housing for high risk of sexual victimization-SPCC does not have a Restricted Housing Unit. There were no inmates housed in Segregation

3 inmates who reports sexual abuse- SPCC has not had any sexual abuse or sexual harassment reports in the past 12 months. There were no inmates identified.

2 inmates who reported sexual victimization during risk screening- SPCC was not able to identify any inmates who met this criteria,

Since the facility did not have the targeted inmates for interview, the auditor interviewed the same number of inmates as required by PRC but as random inmates. In all the inmates interviewed, all the inmates report feeling safe in the institution and knew to report any sexual abuse or sexual harassment immediately to the sergeant or social worker, or call home and let their families call in the report. All inmates felt they had enough privacy to change and shower without being viewed by the opposite gender. They also indicated that female staff announce their presence before entering the unit. There were 10 random staff members in addition to the 15 specialized staff were interviewed which include correctional officers. Four officers from day shifts (6am -2pm) were interviewed, 6 officers from middle shift (2pm-10pm) and 2 from night shift (10pm-6am). All the staff was knowledgeable about PREA and the agency's zero tolerance policy. They knew how to appropriately respond to a sexual assault and their mandatory requirement to report all allegations, notifications or suspicions of abuse or harassment. All staff indicated they had been trained on PREA which included gender/transgender pat searches. Staff was able to cite specific steps that needed to be taken in the event they were first responders to a sexual abuse incident. Some staff indicated that they would call their supervisor for further direction. Some of the specialized staff were interviewed over the phone. For example, the head of HR, the Security Director were unable to come from Madison for the audit. All the questions were asked over the phone and they were able to answer all the questions pertaining to their areas of expertise.

FILES REVIEWED

There were no new hires for SPCC. According to the HR director, it is standard of practice for the PREA questions and released of information is done correctly. She was able to scan the documents to PREA Analyst, who was around for technical assistant, who then allowed auditor to verify criminal background checks are being conducted prior to employing staff and the agency affirmatively asks applicants about sexual abuse and sexual harassment during their application process. The agency keeps documentation verifying this in each employee's personnel file. Furthermore, background checks are done on employees every five years. Auditor was not able to review any file of SPCC employee who recently had a criminal background checked. There have been no new hire within the last 12 months. All other files

such as employee training records and inmates files are automated, so auditor was able to review them online and sample copies of orientation acknowledgment forms by inmates and list of employees who completed training and type of training completed.

DAY TWO of ONSITE AUDIT

On April 12, 2018, the audit team of two returned to the facility and began collecting and reviewing supporting documentation for each standard. This portion of the audit was not as daunting since most of the documents were already uploaded on the PAQ. It was a matter of one of the administrators logging on and giving us access with supervision to the documentations that we needed. All the staff was very cooperative and helpful.

EXIT INTERVIEW

By the close of business day on April 12, 2018, 2017, audit team was ready to conduct an exit interview. Present during the exit interview was Leigha Weber (PREA Coordinator) and Patrick Melman, (PCM, Superintendent) and other facility staff. The overall audit process was explained and an overview of the auditor's findings was presented. There were no findings of non-compliance for this facility. The audit team stay overnight to go over documentation and wrapped up on April 13, 2017 for Maryland.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, 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 auditor should describe how these details are relevant to PREA implementation and compliance.

The Sanger B. Powers Correctional Center (SPCC) is located in Oneida in Outagamie County. The building consist of one floor with a population capacity of 120 adult male inmates. The facility has two general population housing units; there is a health services unit, food services area, a multipurpose room that is also used as visiting room, a gymnasium, and an administration wing.

Each wing has about 8 six man cell/room and the small room has two people. The cells are more like rooms because every inmate has a key to their room. SPCC accepts only inmates who have qualified for Work Release Program. The Work Release Program is authorized pursuant to 302.05 of Wisconsin State Statutes and all inmates who wish to participate must agree to participate and sign the Work Release memo agreement. There are no razor ribbon covered fence or any other outside buildings. There is one way in and one way out. Staff and visitor entrance into the facility is accomplished through central control area located in the front of the building with security features including x-rays of personal property, a walk through metal detector, followed by a pat search.

The auditors were required to present their IDs and were able to keep them in our person. Staff was found to be diligent and consistent in performing these required duties on all shifts at all times of the day. Supporting SPCC's daily operations and emergency plans are Outagamie Sheriff Department, ambulance services and hospital is, St. Vincent Health Center, a short distance from the Correctional facility.

SPCC has approximately 17 employees who may have contact with inmates; one social worker assigned to the center; one psychologist who comes from Green Bay Correctional Institution on a part-time bases; 2 part-time nurses and one captain. All these individuals have contact with inmates. The staffing levels in all areas appeared appropriate for the amount of inmates, programs activities and physical layout at the facility. Staff is assigned and deployed throughout the facility which allows SPCC to ensure that all areas are effectively monitored and the observation, safety and security of inmates is effective. All areas within inmate access are outfitted with video monitoring, locked and controlled doors, and mirrors. SPCC incorporated 16 individual cameras throughout the facility with the exception of the inmate showers/bathroom or cells.

All areas within inmate access are outfitted with video monitoring, locked and controlled doors, and mirrors. SPCC incorporated 16 individual cameras throughout the facility with the exception of the inmate restroom/showers, central elevator and individual staff work areas. The digital video recorders record all video for a periods of 14--21 days. Cameras are located throughout the common area and monitors are located in central control monitored by sergeants. The camera footage is monitored by male staff. There are no female correctional officers currently working at SPCC. Cameras were checked during the tour and no cameras were in showers, or area where inmates may be in a state of undress and viewed by the opposite gender. The Work Released Program is authorized pursuant to 302.05 Wisconsin State Statutes. The majority of the inmates at this facility are employed by local organizations. They pay for room and board and transportation to and from work.

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.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of standards exceeded:	0
Number of standards met:	45
Number of standards not met:	0

115.11; 115.12; 115.13; 115.14; 115.15; 115.16; 115.17; 115.18; 115.21; 115.22; 115.31; 115.32; 115.33; 115.34; 115.35; 115.41; 115.42; 115.43; 115.51; 115.52; 115.53; 115.54; 115. 61; 115.62; 115. 63; 115.64; 115.65; 115.67; 115.68; 115.71; 115.72; 115.73; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.86; 115.87; 115.88; 115.89;

No Corrective Action

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>(a): The Pre-Audit Questionnaire accompanied by review of documentation during onsite visit indicate the Wisconsin Department of Corrections (WIDOC) does have written policies and operating procedures in place mandating zero tolerance toward all forms of sexual abuse and sexual harassment. Wisconsin Department of Corrections (WIDOC) practices are precise in outlining the agency's approach to preventing, detecting, and responding to sexual abuse and harassment. WIDOC has implemented Executive Directive #72, effective January 8, 2016 which states "Wisconsin Department of Corrections has zero tolerance for sexual abuse, sexual harassment and report -related retaliation in its facilities, including those with which it contracts for the confinement of offenders." Furthermore, the directive continues to explain the Department does not tolerate sexual misconduct by an employee, by either omission or commission, and does not consider alleged or actual consent as a defense to an allegation of sexual misconduct.</p> <p>(b): Sanger B. Powers Correctional facility provided agency's organizational chart identifying Leigha Weber as an interim PREA Coordinator. Ms. Weber answers directly to the Assistant Deputy Secretary of the Agency. Upon interviewing Ms. Weber, she indicated she has sufficient time and authority to make changes and implement policy on the behalf of the agency in order to improve PREA efforts. Ms. Weber also stated she is actively involved in the annual staffing plan reviews for each correctional facility within the WIDOC. In addition to Ms. Weber's compliance duties, she is responsible for gathering aggregate data in order to assess and improve efforts towards sexual abuse and sexual harassment prevention. Ms. Weber oversees 38 PREA Compliance Managers (PCM) within WIDOC. She regularly interacts with PCMs through email and telephone calls, as well as during onsite visits to the facilities.</p> <p>(c): Sanger B. Powers Superintendent, Patrick Melman, is also designated the PREA Compliance Manager for the facility. Superintendent reports to Warden Quala Champagne whose office is located in Madison, Wisconsin. He is involved and contributes to the development and implementation of the Staffing plan. He can act independently of the PREA Coordinator since he is superintendent of the facility.</p> <p>Corrective Action: None</p>

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): The facility does contract with other entities for the confinement of inmates. Tthe agency contracts with eleven (11) local detentions centers/jails for the confinement of inmates. WIDOC provided copies of the contracts and and lastest reviewed copies of the contracts as documentation of meeting the standard. The contracts require all the facilities, detention centers or jails to comply with all Federal, State and local laws, regulations, and ordinances applicable to its activities and obligations under this contract and shall fully comply with standards set forth in the Prison Rape Elimination Act (PREA) of 2003, and with all applicable regulations issued by the United States Department of Justice.</p> <p>(b): Under the inspections and evaluations portion of the contract, (secion Q-3), the contractor shall permit the contract monitor or authorized representatives to conduct physical inspections and evaluations of the Center at any time during the contract period. The WIDOC's contract monitor or authorized representatives may enter the Center at any time without prior notice to the contractor. In addition, WIDOC provided a copy of most recent PREA audit completed. The audit report, dated March 2018, shows the contracts are in full compliance with PREA.</p> <p>The contract Administrator, Leigha Weber, interview revealed that each County Detention Center or Jail assigns a PREA Compliance Manager ensure continued compliance with the contract and PREA. Ms. L. Weber has intermittent conversations with the contractors regarding the facility's continued compliance.</p> <p>Corrective Action: None</p>

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>(a): WIDOC Sexual Abuse in Confinement Staffing Plan establishes a staffing plan for the facilities to comply with on a regular basis and states that all facility staffing plans are reviewed annually. Executive Directive 72, effective January 11, 2016, is a procedure manual for the WIDOC to manage security staffing and overtime at a correctional and detention facility. The agency policy addresses all subsections of this standard including. Sanger B. Powers Correctional Center (SPCC) staffing plan provides for adequate levels of staffing and video monitoring to protect inmates against abuse. Sanger B. Powers Correctional Center did provide their April 2017 completed facility staffing plan and annual review, which was done in April 2018, and it incorporates all the factors from this section. Documentation was provided outlining their video monitoring throughout the institution. The superintendent indicated during interview that the facility has 16 cameras located all over the facility.</p> <p>(b): During an interview with the superintendent, he reported that the entire institution has 14 sergeants on all three shifts. There is no deviation from the staffing plan and when there is one, it is documented. He provided a detailed explanation from the facility staffing plan summary outlining the information that is considered and steps which are followed to ensure enough staff are assigned to cover essential areas where inmates are housed and active, ensuring the sexual safety of the inmate population. There is no need to collapse posts at this Center because it is a work release facility. The majority of the inmates must be working outside of the facility or waiting for work opportunity. There are adequate video monitoring cameras in the facility</p> <p>(c): The agency did provide sufficient documentation to show that WIDOC along with Sanger B. Powers does review staffing plans at least on an annual basis. During interview with the Superintendent, he indicated that there is communication with the Agency PREA Coordinator on an annual basis to determine whether any adjustments are needed to the staffing plan and any other technologies that ensures Sanger B. Powers inmate safety. As evidence to support the standards WIDOC provided their Staffing Analysis manual which echoed the requirements set forth in the executive directive. The staffing plan approved by the deputy Secretary or management designee of WIDOC shall ensure that the staffing plan reflects the most efficient use of officers to accomplish the mission of the facility by annually performing a review of the staffing plan. The agency policy requires a review of the facility Staffing Plan be conducted with the agency PREA Coordinator but the Superintendent, PCM, also has the opportunity to contribute his views in developing the Staffing Plan.</p> <p>(d): During the onsite visit, log books were reviewed and clearly showed a heavy presence of multiple first line intermediate (in case this case, Sergeants) and higher level supervisory (a Captain) log entries. These log entries were made at different times throughout each day, showing that supervisory rounds are being done at random times. There were no negative patterns found in the supervisory log entries. Multiple supervisory signatures were present in the site log book, on all three shifts, and were signed in a different color ink which made it easy to review supervisory presence. Also during the onsite visit, random interviews with supervisors, confirmed that unannounced rounds are being conducted and line staff were aware that they are prohibited from announcing to other staff that a supervisor is entering their area. The Executive Directive 72, section IX, continues on to state that except when necessary to prevent cross-gender viewing of an inmate or as part of a legitimate facility operation, rounds shall be unannounced in order to prohibit staff alerting other staff that the rounds are being conducted and shall be conducted at frequency established by the managing official.</p> <p>Corrective Action: None</p>

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Sanger B. Powers Correctional facility (SPCC) houses inmates ranging in age from 18-80; no youthful inmates are housed at SPCC. As per Executive Directive 72, section XIII-youthful inmates, detainees or offenders shall be housed at juvenile institutions designated for juvenile offenders. During the onsite visit by interviewing the Superintendent and PREA Compliance Manager, who stated that no juvenile inmates were housed at SPCC. This was also verified through general observation during the site visit, inmate and staff interviews and inmates file reviews. The agency PREA Coordinator also confirmed that no juvenile inmates were housed at SPCC. There are no youthful inmates being housed at SPCC, nor are there housing units designated for youthful inmates at SPCC.</p> <p>Corrective Action: None</p>

115.15	Limits to cross-gender viewing and searches
	<p data-bbox="245 152 820 185">Auditor Overall Determination: Meets Standard</p> <p data-bbox="245 226 488 259">Auditor Discussion</p> <p data-bbox="245 297 1481 629">(a): Sanger B. Powers Correctional Center (SPCC) reported in the PAQ that there were no instances in the past 12 months of cross-gender searches, including strip searches, body cavity searches and pat-down searches. During staff interviews, all staff indicated that neither cross-gender strip searches nor cross-gender visual body cavity searches are conducted and these cross-gender searches would not occur unless it was an emergency, and in those cases a supervisor would need to authorize and appropriately document the search. Executive Directive 72, section X, effective January 11, 2016, states that except in exigent circumstances, facilities shall not permit cross-gender pat-down searches of female offenders. If such pat-down is conducted, it shall be documented. The training documents provided regarding strip searches states the officer conducting the search shall be the same sex as the inmate being searched.</p> <p data-bbox="245 674 1238 707">(b): Section of this standard is not applicable as there are no female housed at SPCC.</p> <p data-bbox="245 752 1458 857">(c): The facility PAQ reported zero instances of cross-gender searches occurring in the last 12 months at SPCC. During interviews with random staff and inmates, it was evident that cross-gender strip searches and body cavity searches do not occur at SPCC. In addition, there are no females housed at SPCC.</p> <p data-bbox="245 902 1485 1350">(d): During the onsite visit, it was evident that female staff announce their presence when entering a housing unit or an announcement is made, upon entry of a female staff person into the housing unit, informing inmates that a female staff is in the housing unit. Also, there is a blue light that is turned on in the control center when there is a female in the area. There is a bell ringtone, verbal announcement and the blue light that indicate there is a female in the housing unit. While conducting random and specialized interviews with staff and inmates, they also confirmed that "the blue light, verbal announcement and the bell ringtone" is occurring on all three shifts, each time a female staff enters a housing unit area. During the site tour, it was evident that inmates had sufficient privacy to change clothes, perform bodily functions and shower without direct cross-gender viewing by staff. Showers were located in an area allowing privacy from staff of the opposite gender viewing their breast, buttocks, or genitalia and all inmates interviewed indicated they felt they had enough privacy to change clothes, shower, and perform bodily functions without being viewed by the opposite gender. Further evidence was presented to support that this standard is being followed by Executive Directive 72, section IX, which defines cross-gender viewing, as an employee observing the breasts, buttocks, or genitalia of an inmate of the opposite sex while the inmate is showering, performing bodily functions, changing , or similar activity.</p> <p data-bbox="245 1552 1485 1809">(e): During random interviews with staff, it was clear that staff knew they could not conduct a search or examine a transgender inmate for the sole purpose of determining the inmate's genital status. Staff also indicated that this was part of their annual training. During the interview with PREA Compliance Manager, it was stated that there has never been a transgender inmate housed at SPCC, however, if they ever do intake a transgender inmate, appropriate PREA standard requirements will be followed by SPCC staff. SPCC shows support of this practice in Executive Directive 72, section X, which states transgender and intersex inmates will not be verified for the sole purpose of determining the offender's genital status.</p> <p data-bbox="245 1854 1465 2112">(f): SPCC Superintendent presented the PREA training module which is given annually to all staff. This module demonstrated that it does train staff on how to conduct cross-gender pat down searches and searches of transgender and intersex inmates professionally and respectfully. The lesson plan covers searches of inmates, including cross gender and transgender inmates. The lesson plan gives clear and detailed instruction on how to conduct these searches and includes a video on transgender searches. Training records were reviewed for all staff. All the staff have had training covering PREA, LGBTI inmates and training covering searches of inmates.</p>

115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>(a)(b): The WIDOC does have directives in place to ensure that inmates with disabilities are treated equally, and are able to benefit from all agency and facility efforts related to PREA. WIDOC Executive Directive 72 states under section XI each facilities shall ensure that newly received inmates are provided information about inmate rights, general institutional schedules procedures and institutional plans. The orientation maybe provided through group sessions or by giving the inmate an orientation package. Also section B of this directive states special assistance shall be provided to inmates with reading or language problems. Furthermore, WIDOC shall take reasonable steps to ensure inmates who have limited English proficiency (LEP) receive meaningful access to programs and services. The facility is required to provide language assistance services in accordance with applicable State and Federal law.</p> <p>WIDOC has a central intake facility before inmates are assigned to various facilities across the state based on their security levels. Once at the facility, each inmate is provided with an orientation to the facility. Inmates are provided a copy of the "red" book (inmate hand book) in English and Spanish (whichever applies) for information and orientation purposes. The handbook includes information on PREA, access to health services, the grievance system, medical co-pays, etc. It also requires that if the inmate declares illiteracy, the handbook will be read to the inmate, or as appropriate, other orientation tools may include the showing of videos (in English and Spanish as required) and the completion of intake forms. In addition, non-English speaking inmates will be provided with interpretive services. An electronic signed acknowledgement form is to be obtained from inmates which states in their record permanently. During an interview with a Social Worker, he provided auditor with PREA auditors with PREA education in both English and Spanish. In addition to interpreter services, there are videos, pamphlets and postings regarding PREA readily available to inmates in both English and Spanish.</p> <p>(c): Sanger B. Powers Correctional Center (SPCC) reported no instances of interpreters being utilized in the last 12 months; however, the PREA Compliance Manager provided a list of interpreters services that will be utilized in the even an interpreter is needed. Statewide language interpretation services are available at each institution. SPCC inmates electornic files were reviewed and there were inmates who had utilized the services but acknowledgment forms indicated that inmates are aware of such services if they needed it.</p> <p>During the tour of the facility, both English and Spanish PREA documents were present and available. Interviews with random facility staff confirmed that inmates would not be used as interpreters and that interpreter services were available. There were no hearing impaired or vision impaired currently at SPCC; however, staff did show that the appropriate tools are available for disabed inmates in order to promote effective communication.</p> <p>To show further support of this standard, SPCC provided Executive Directive 72 which states, section XI, that inmates readers, or other types of inmate assistance are not used to communicate information required under this directive to other inmates, except under limited circumstances where a delay in obtaining an effective non-inmate interpreter would compromise the inmate's safety, their performance of first responder duties, or investigation of an inmate's allegation.</p> <p>Corrective Action: None</p>

115.17	Hiring and promotion decisions
	<p data-bbox="245 152 820 188">Auditor Overall Determination: Meets Standard</p> <p data-bbox="245 226 489 257">Auditor Discussion</p> <p data-bbox="245 295 1461 517">(a): Upon interviewing the Human Resources Personnel, she indicated every new employee, contractor or volunteer undergoes a criminal background check before being allowed to access WIDOC facilities or contact with inmates. Furthermore, the applications for employees, contractors and volunteers ask the applicant directly whether they have been involved with past sexual abuse or sexual harassment. Additionally, a review of applications for newly employed staff from the past 12 months confirms the practice is implemented as indicated during the interview.</p> <p data-bbox="245 524 1477 669">WIDOC does have Executive Directive 72 in place which show support of this standard. The Executive Directive states the Department shall investigate the background of all prospective employees, promotions and contractual service providers who have direct contact with inmates to determine suitability for hire or promotion under the standards established by the Prison Rape Elimination Act (PREA).</p> <p data-bbox="245 714 1477 1010">(b): Again, reviews of employee records show the applications utilized by WIDOC directly ask applicants whether they have been the subject of sexual harassment in the past. During the interview, it was verified that the PREA information is considered when determining whether or not to hire or promote anyone who may have contact with inmates. Executive Directive 72, section VI, states DOC Human Resources shall consider incidents of sexual harassment when determining to hire or promote an employee or contact with a service provider if the individual may have contact with an inmate. The Department affirmatively asks all the appropriate questions necessary to comply with this standard on the Background Check Authorization form.</p> <p data-bbox="245 1055 1485 1391">(c): During the interview it was verified that background checks are performed on every applicant before offering a position, and they do consider pertinent civil or administrative judgments when determining whether or not to hire or promote anyone who may contact with inmates, including contractors. The facility reported they have had no new employees within the last 12 months. The Executive Directive 72, section VI, states prior to hiring a new employee to perform duties involving contact with an inmate, the Human Resources office shall conduct a criminal background records check and consistent with federal, state, and local law, make a best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or a resignation during a pending investigation of an allegation of sexual abuse.</p> <p data-bbox="245 1435 1477 1621">(d): WIDOC and SPCC do require that a criminal background check is completed prior to enlisting the services of any contractors. This was confirmed during the interview with Human Resources Personnel in Madison. Executive Directive 72, section VI (3), states before enlisting the a contractor to perform services that involve contact with an inmate. Personnel shall conduct a criminal background records check of the contractor's employees who may have contact with an inmate.</p> <p data-bbox="245 1666 1485 1812">(e): WIDOC and SPCC do require that background checks are conducted at least every five years for current employees and contractors. During an interview with Human Resource personnel, it was emphasized that HR shall conduct criminal records background checks every five years on employees or a contractor's services provider who may contact with inmate.</p> <p data-bbox="245 1856 1485 2154">(f): WIDOC provided the PREA guidelines for hiring, promoting and transferring employees that requires all applicants who report for an interview must read and complete the PREA Interview Questions. The questionnaire affirmatively asks all the questions outlined in this standard. The applicant must provide the response in writing as well as sign and date the questionnaire. Reviews of employee records show applicants have completed the pre-employment application which directly asks applicants about past sexual abuse and sexual harassment and their records contain the interview questions mentioned above. It was confirmed by Human Resource personnel that the agency does require all employees and applicants to disclose verbally and/or in writing any previous or withstanding misconduct pertaining o sexual abuse or</p>

sexual misconduct, of any kind, that they may have been convicted of, including any civil or administrative judgments.

(g): The interview with the Human Resources Personnel confirmed that employment would be terminated if it was ever discovered an employee falsified an application or gave false information during the application process. Executive Directive 72, section VI (2), states a material omission regarding conduct described in this directive or providing materially false information shall be grounds for termination of employment.

(h): The WIDOC did supply the auditor with documentation showing that personnel files, which includes substantiated allegations of sexual abuse or sexual harassment involving a former employee, would be made available to a requested institution for their review prior to transferring or promoting a WIDOC employee. During the interview with Human Resources personnel, it was indicated that if an employee applies for work at another institution, the departing facility would accommodate any requests for information related to a former employee being investigated for substantiated allegations of abuse or sexual harassment from another institution.

Corrective Action: None

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)-(b): The Agency Head interview was conducted with Deputy Secretary, and he indicated there have been no new facilities or substantial expansions or modifications of existing facilities. SPCC reported there have been no substantial expansions or modifications to building on the premises and it was apparent during the audit tour. During interviews, Superintendent indicated there are currently cameras in place in the facility to increase surveillance throughout the facility as a means to enhance security and sexual safety for inmates.</p> <p>Corrective Action: None</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a): WIDOC utilizes county sheriff's department and local police departments to conduct criminal investigations. SPCC utilizes Outagamie County Sheriff's Department to conduct criminal investigations related to sexual abuse and sexual harassment. Outagamie County Sheriff's department does follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. SPCC has a higher level supervisor who conducts administrative investigation related to sexual abuse or sexual harassment. PREA Compliance provided auditor with documentation verifying that the supervisor has completed the PREA specialized training for investigators.

The follow directive and training modules were provided to support this standard: Division of Adult Institution (DAI) policy 306.00.14, Protection, Gathering and Preservation of Evidence, effective May 4, 2015, states the facility shall promptly, thoroughly, and objectively investigate each allegation of employee or inmate misconduct involving a sex related offense according to a uniform protocol based on recognized investigative practices that maximizes evidence collection to support effective administrative dispositions, and, if appropriate, criminal prosecution of the identified perpetrator. The following information support the PREA sexual abuse and sexual harassment training investigators receive as part of their certification as investigators.

TRAINING FOR INVESTIGATORS:

1. Interview sexual abuse victims;
2. Using Miranda and Garrity warnings;
3. Sexual abuse evidence collections; and
4. Criteria and evidence necessary to substantiate administrative action and, if appropriate, referral for criminal prosecution.

SPCC staff are required to take immediate action once staff has been made aware of an incident of sexual assault, abuse or misconduct to ensure physical evidence is not destroyed. Division of Adult Institutions (DAI) policy # 500.30.19 - Sexual Abuse Health Services Unit procedure in the event of sexual abuse, provides steps that shall be taken to ensure that evidence is preserved and the victim is protected. The PREA in-service training curriculum also trains staff on responding responsibilities, which includes protecting and preserving a crime scene until appropriate steps can be taken to collect any evidence. Formal and random interviews with staff indicate they are aware of evidence preservation and all stated in some manner that the crime scene would be secured, supervisors and medical and mental health staff notified, forensic exams completed by SANE/SAFE staff as necessary, and the incident referred to Outagamie County Sheriff Department for investigation. Staff was also aware that Outagamie County Sheriff Department would be the one to conduct criminal investigations related to sexual abuse and sexual harassment incidents.

(b): WIDOC training module, Specialized Training: Investigations -PREA, was thoroughly reviewed and substantially adheres to the principles published in the most recent version of "A National Commission on Correctional Health Care Response to Sexual Abuse (2014)."

(c): WIDOC/SPCC does offer all victims of sexual abuse access to forensic medical examinations off site at St Vincent Hospital at no cost the inmate. These examinations are performed by SANE/SAFE staff. The charge nurse at St Vincent was contacted for an interview. She stated that all forensic exams are conducted for SPCC. She also indicated that there is SANE/SAFE staff available during all hours. SPCC indicated on the PAQ that there was no forensic medical examination conducted in the past 12 months by SANE/SAFE staff.

As further evidence showing support of this standard the following directives were presented: DAI # 500.30.19 states when the possibility for recovery of physical evidence from a victim exists or otherwise is medically appropriate, coordinate with appropriate Department facility staff to arrange for the victim to undergo a forensic medical examination that is performed by SANE/SAFE or if documented attempts to obtain the services of a SANE/SAFE are unsuccessful, a licensed healthcare professional who has been trained to perform medical forensic examinations of sexual abuse victims.

Additionally, SPCC staff provided auditor with the SANE/SAFE resource for Outagamie County and as stated, inmates would be sent to St. Vincent Hospital. DAI # 500.30.19 requires that forensic medical examinations will be offered to all victims of sexual abuse and that examinations are conducted by a Sexual Assault Forensics Examiner (S.A.F.E.) or a Sexual Assault Nurse Examiner (S.A.N.E.). The Directive also indicates that treatment services are provided to every victim without financial cost and regardless of whether the victim names the perpetrator or cooperates with any investigation arising out of the incident.

(d)(e): WIDOC has contracted with Assist Survivors Treatment Outreach Prevention (ASTOP) to provide these advocacy services. The MOU was recently signed to provide outreach services that create awareness of the impact of sexual abuse, and reduce the incidence through prevention education programs. To further show support of this standard, the Directive DAI #500.30.19 requires the facility to attempt to make available to the victim a victim advocate from a rape crisis center, in person or by other means and these efforts will be documented. If a rape crisis center is unavailable, the facility will provide access to a qualified staff member from a community-based organization. The Directive also indicates if requested, the facility will attempt to make available to the victim a person to accompany and support the victim through the forensic medical examinations process and investigatory interviews.

Phone contact was made to the sexual assault center and it was confirmed they are in fact contracted with SPCC and they do assist in providing advocacy services for SPCC. In addition, SPCC provided documentation with the sexual assault center listed as a center they would contact in order to provide a victim advocate for an inmate. SPCC has also appointed a facility social worker as a victim advocate, if necessary.

(f): SPCC utilizes Outagamie County Sheriff Department to conduct criminal investigation of sexual abuse or sexual assault. SPCC has requested Outagamie County Sheriff Department to utilize and follow the requirements of this standard. There is a trained security staff (Captain) to investigate administrative cases. The referral goes to the Warden or the Security Director who assigns the case to one of the facility PREA trained investigators.

(g): SPCC utilizes Outagamie County Sheriff Department to investigate criminal cases of sexual assault or sexual abuse and trained security staff investigate administrative sexual abuse or sexual assault cases. The PREA Compliance Manager reports no cases within the 12 months period.

(h): The facility has indicated they would utilize the services of St Vincent Hospital which meets the qualifications to serve in this role. The St Vincent hospital Charge Nurse (SANE/SAFE) during interview indicated there is always a victim advocates available. During the interview, the sexual assault center staff indicated they provided victim advocate if one is requested by the inmate victim's advocate who respond within 45 minutes.

Corrective Action: None

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): During the past 12 months, SPCC reported there were no allegations of sexual abuse/sexual harassment received. In an event they had any allegations, all the cases will be documented and investigated. Also, all criminal or administrative investigations will be tracked by the Warden and Security Director who are based in Madison, WI. To further show support for this standard, SPCC provided Executive Directive 72, ssection XVII, requires that an employee with knowledge of an incident of inmate sexual abuse or sexual harassment shall report that knowledge according to Department procedures for reporting employee misconduct or inmate rule violations.</p> <p>(b): WIDOC Executive Directive 72 section XVII (a) requires allegations of sexual abuse or sexual harassment are referred immediately to the investigative unit within the facility. WIDOC website was reviewed and the policy was posted on the website. The one investigative staff at SPCC did indicate during the interview process that all reports of sexual abuse and sexual harassment must be referred immediately to the Superintendent, Warden or Security Director.</p> <p>(c): All WIDOC facilities including SPCC conduct all administrative investigations of sexual abuse and sexual harassment and Outagamie County Sheriff Department investigates criminal cases. This information is posted on the Agency Website.</p> <p>(d): WIDOC Executive Directive 72, Sexual Abuse and Sexual Harassment in Confinement (PREA), effective January 11, 2016 is the policy governing the conduct of PREA investigators.</p> <p>(e): SPCC is not a DOJ component. Therefore, this portion of the standard is not applicable.</p> <p>Corrective Action: None</p>

115.31	Employee training
<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>(a): All staff interviewed during the on-site audit at Sanger B. Powers Correction Center indicated they have received annual PREA training. It was clear during the random and formal interviews that the SPCC staff was educated on PREA and had a good overall understanding of each of the criteria presented in this substandard. Staff knew of the Agency and facility Zero Tolerance Policy and also were confident in being able to recite what steps they would take in the event they were directly involved in a compliant or instance involving sexual abuse or sexual harassment.</p> <p>SPCC provided Executive Directive 72 and training curriculum showing further support of this standard. This Directive establishes procedures to ensure compliance with the established training requirements for the Department. The Directive mandates that documentation of field training is maintained in the individual employee training electronic file.</p> <p>The Executive Directive 72 covers the applicable definitions and elements as covered in standard 115.31 (a) 1-10. The Directive indicates that the head of the unit or a designee is responsible for the custody and security of an inmate, and shall ensure that each employee attends approved training related to preventing, detecting, and responding to acts of sexual misconduct.</p> <p>The agency trains all employees who may have contact with inmates on the requirements of Standard 115.31(a) 1-10:</p> <ol style="list-style-type: none"> 1. its zero tolerance policy for sexual abuse and sexual harassment. 2. How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and responding policies and procedures. 3. Inmates' rights to be free from sexual abuse and sexual harassment. 4. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment. 5. The dynamics of sexual abuse and sexual harassment in confinement. 6. The common reactions of sexual abuse and sexual harassment victims. 7. How to detect and respond to signs of threatened and actual sexual abuse. 8. How to avoid inappropriate relationships with inmates. 9. How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. 10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. <p>(b): WIDOC has approved lesson plan tailored towards staff working at a facility that houses either male or female offenders. SPCC's training is tailored to the gender of inmates that are housed at the facility. Interviews with staff and after reviewing the online training curriculum, it was clear that SPCC staff are receiving the training tailored towards male offenders. However, if SPCC staff were to be reassigned to another facility housing the opposite gender, staff is also given additional training and custody staff will receive training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates. SPCC staff receive training on annual basis.</p> <p>(c): SPCC reported that in the past 12 months all staff who have contact with inmates received the necessary PREA training. The Superintendent present this auditor with training records showing that all SPCC staff were PREA trained. The agency presented Executive Directive 72, section XI -Training and Education, requires each employee to be complete training within a calendar year.</p> <p>(d): SPCC training documentation provided to auditors showed all staff from Sanger B. Powers Correctional Center completed mandatory in-service training for PREA, as indicated by their personal electronic signatures. During the onsite audit, 10 staff members were randomly selected and interviewed. They had</p>	

completed training with the last 12 months. The agency uses a computer based program to track employee training records. The program is maintained only by approved staff and was very detailed and informative.

Corrective Action: None

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): SPCC provided auditors with a copy of the institution's Volunteer and Orientation Guide entitled PREA Information Booklet for volunteers and contractual workers. The booklet outlines the volunteer/contractors' responsibilities as they relate to PREA including how one would report such incidents. Medical staff at SPCC are part-time contractual staff. All medical staff were interviewed formally and stated that they receive annual training related to PREA. The training record of the part-time contractual staff was also provided. An interview with one of volunteer chaplain was conducted and he confirmed that they completed the PREA related training which left them with a clear understanding of what PREA was and their responsibilities as they relate to PREA.</p> <p>(b): SPCC indicated that they do not have many volunteers/contractors that are cleared to provide service inside SPCC. The training records of those who are cleared are maintained electronically. The Executive Directive 72, outlines their requirement and give the necessary PREA education that each volunteer/contractor would need in order to manage PREA issues as they arise.</p> <p>(c): SPCC presented a printout with signatures of volunteers and contractors who have completed PREA training for volunteer/contractors. The signature of these individuals indicate that they have received PREA training and they understand the training they have received.</p>
	Corrective Action: None

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a): SPCC reports 122 inmates who were admitted to SPCC in the past 12 months received PREA information at intake. Inmates who were interviewed randomly and formally indicated they are receiving information on zero tolerance policy and are also receiving PREA education by way of pamphlets (redbook) and PREA video. Upon reviewing the files of 66 random inmates, each file showed signed inmate documentation indicating receipt of the PREA education. During formal interviews of inmates that had arrived at the facility in the last 12 months, each inmate indicated that he had received PREA education upon the day of arrival at SPCC and this education included the facility's zero tolerance policy and how to report sexual abuse and sexual harassment.

SPCC provided an Inmate Orientation Handbook which gives the definition of PREA and how inmates can report these incidents. The orientation may be provided through group sessions, watching videos or by giving the inmate an orientation package. It further mandates that special assistance shall be provided to inmates with language or reading problems. The orientation materials or handbooks shall also be made available to the inmates reference in the library or a designated area.

Executive Directive 72, establishes procedures for the timely provision of information and instruction to newly admitted inmates. The directive establishes responsibility for the orientation of inmates, with reasonable accommodations for person with language, literacy or hearing limitations. This directive mandates that orientation be completed within 72 hours of intake.

Executive Directive 72 ensures that among other requirements, the department and agency policy prohibiting sexual misconduct, procedures for filing a complaint, and inmate rights related to sexual misconduct are effectively communicated to an inmate as part of inmate orientation, orientation paperwork and the facility's handbook. Also, the policy continues to prohibit inmate on inmate sexual conduct and assigns responsibility and procedures for reporting, responding to, investigating, processing, and resolving a complaint of inmate to inmate sexual contact.

The policy indicates that the head of a unit, or designee, responsible for the custody and security of an inmate, in addition to other responsibilities, shall ensure that department and unit policy prohibiting inmate on inmate sexual conduct, procedures for filing a complaint, and inmate rights related to inmate on inmate sexual conduct are effectively communicated to each inmate as part of inmate orientation through inmate orientation paperwork and facilities inmate handbook.

(b): Intake staff were interviewed and reported that upon arrival at SPCC, each inmate received at SPCC is provided with PREA education and shown a video before leaving the intake area. The inmate education covers PREA education as indicated. The video was also viewed and covers PREA, including inmates' rights and process to report instances of abuse very well. Before leaving the intake area, inmates sign an electronic acknowledgement form indicating they have received information on PREA. To further support this standard, the facility presented SPCC directive, which indicate at intake inmates will view the PREA video and sign off on the PREA Acknowledgment form, which will be placed in the inmate's electronic file. The acknowledgment form indicates that an SPCC staff has counseled the inmate about PREA and SPCC zero tolerance policy regarding sexual harassment and explains prevention, reporting and response to sexual abuse and harassment.

(c): Twenty randomly selected inmate electronic files were reviewed. All files contained PREA electronic education/training acknowledgment forms. All inmates interviewed reported they received some sort of PREA information.

(d): All staff interviewed at SPCC were aware that interpreter services were available and provided for

inmates at SPCC, if needed. SPCC reported no instances where these services were utilized in the past 12 months. SPCC Executive Directive 72 requires that if the inmate declares illiteracy, the inmate handbook will be read to the inmate, or as appropriate, other orientation tools may include showing of videos (in English or Spanish). Non-English speaking inmates will be provided with interpretive services. A signed acknowledgment form is to be obtained from the inmate and forwarded to social worker for inclusion in the base file. This auditor was able to call the interpretation services to verify that the number works. Auditor was able to get through.

(e): All inmates' files reviewed while at SPCC did contain signatures sheets of inmates indicating that all inmates received PREA Education. SPCC facility directive requires that PREA education/training acknowledgment forms are placed in the electronic files.

(f): The agency's inmate handbook provides the information as required indicating that all inmates have a right to be free from sexual abuse and harassment as well as the department's zero tolerance policy as it relates to sexual abuse and harassment. Posters and signs in both English and Spanish indicating the agency's zero tolerance policy were displayed throughout the facility, including the visitor and intake area, food service, medical and all housing units.

Corrective Action: None

115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>(a)(b): Upon interview of SPCC trained investigator, it was evident that the investigator assigned to conduct investigations into sexual abuse and sexual harassment allegations have been thoroughly trained to do so.</p> <p>All allegations of sexual abuse and sexual harassment, criminal and administrative, are initiated by the Warden before it is farmed out according to the nature of the investigation. The facility/Department trained investigators investigate administrative cases and local police departments or sheriff departments investigate criminal cases. The agency provided the training module required of all investigators before conducting sexual abuse and sexual harassment investigations. While interview with investigator captain, he indicated he not only received the training as required, he also trains facility staff on how to assist with investigations. He indicated the specialized training he received regarding investigating sexual abuse and sexual harassment was in addition to the general PREA training all staff received.</p> <p>Investigator was able to articulate the definition and appropriate application of Miranda and Garrity and had a clear understanding of how preponderance of the evidence is used to determine the outcome of an investigation. The agency does not use evidentiary standard or "beyond a reasonable doubt" because they don't conduct criminal investigations. However, all investigations conducted by local law enforcement agencies utilize preponderance of the evidence to determine the outcome of their investigations and the "beyond a reasonable doubt" comes into play only if the case goes to trial.</p> <p>Executive Directive 72 indicates that to the extent possible, but in every case where the allegations of alleged sexual misconduct involves sexual abuse, the investigator assigned to investigate the allegation shall have received specialized training related to conducting sexual abuse investigations in confirmment setting that, at a minimum, specifically addresses interviewing sexual abuse victims, using Miranda and Garrity warning, sexual abuse evidence collections and criteria and evidence necessary to substantiate administrative action and, if appropriate, referral for criminal prosecution.</p> <p>Executive Directive 72 establishes policy and procedures for WIDOC investigators conducting an investigation of an allegation of misconduct that involves a sex related offense. This policy defines all the related PREA terms, explains the responsibility of employees who observe or have knowledge of an incident, outlines the requirements for investigating sex related offenses as well as responding to them, including treating the victim as well as the perpetrator.</p> <p>The WIDOC lesson plan titled Specialized Training Investigations for PREA indicates what training is received by the special investigators. This includes the definition, purpose and history of PREA, definitions, first responder duties, medical examinations, comprehensive investigations, evidence collection, interviewing the victim, suspect and witnesses, Miranda rights, Garrity rights, and handling false accusations.</p> <p>(c): WIDOC provided documentation during the site visit that all investigators have completed the agency's mandatory training for sexual abuse investigators.</p> <p>(d): WIDOC provided training plans and documentation for all related training provided to its employees. Documentation for the following training has been reviewed as part of this audit: PREA investigator training, PREA in-service, Security Custody Control, Sexual Harassment Contractor and PREA Training, Communication with LGBTI.</p> <p>Corrective Action: None</p>

115.35	Specialized training: Medical and mental health care
	<p data-bbox="247 159 821 192">Auditor Overall Determination: Meets Standard</p> <p data-bbox="247 230 491 264">Auditor Discussion</p> <p data-bbox="247 302 1485 667">(a)(c)(d): SPCC receives services from the medical contractor from another facility. There are two part-time nurses who provide medical services to inmates at SPCC. The contract requires elements of PREA training and must be given to each employee prior to working with inmates. Medical and Mental Health staff at SPCC are part-time contractual employees. SPCC reports 100% of its Medical and Mental Health staff have received the necessary PREA training. The training documentation provided to auditor was reviewed and showed that all medical and mental health staff did complete PREA training and the training does cover the required elements of how to detect and assess signs of sexual abuse and harassment, how to preserve evidence, how to respond to victims and how and whom to report allegations or suspected abuse and/or harassment. Medical and Mental Health staff interviewed all indicated they complete PREA training annually and also submit their documentation directly to their employer.</p> <p data-bbox="247 719 1485 972">To further support this standard, the Executive Directive 72 was reviewed which establishes policy for the department concerning sexual abuse and sexual harassment of an inmate. The directive requires that the department ensures compliance in areas of PREA, including Medical and Medical care as required by this standard. Under the applicable directive "Employee" is defined as an individual assigned to or employed by the Department in a full-time, part-time, temporary, or contractual position regardless of job title or classification which includes: contractors, interns, volunteers, and employees of Wisconsin Department of Corrections.</p> <p data-bbox="247 1023 1007 1057">(b): WIDOC medical staff does not conduct forensic examinations.</p> <p data-bbox="247 1137 523 1171">Corrective Action: None</p>

115.41	<p>Screening for risk of victimization and abusiveness</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>(a)-(g): All inmates transferring into Sanger B. Powers Correctional Center are screened immediately upon arriving at the facility, well within the 72 hours permitted in this standard.</p> <p>All the random inmates interviews also indicated that they were seen within hours of their arrival at SPCC and assessed, and there was indication that a reassessment was taking place within 30 days of arrival by their assigned social worker. Auditor was able to see reassessments that were completed within 30 days. During the tour, there were 20 inmates interviewed and all were aware of PREA and indicated that they asked questions related to PREA during intake.</p> <p>Executive Directive 72 establishes policy and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the WIDOC to assess the risk of the individual being sexually abused or being sexually abusive towards other inmates. Section XII of the directive mandates that a screening instrument be utilized as part of the intake and facility transfer or at other times deemed appropriate to assess each inmate's risk for being sexually abused or being sexually abusive towards other inmates. The directive also mandates that the information obtained from assessment be relied to decisions concerning areas such as inmate housing, programming, treatment, and work assignments to minimize circumstances that contribute to incidents of victimization or abusiveness. Also, the directive requires that the screening instrument is utilized to assess each inmate within 72 hours of arrival at a facility and again within 30 days of the inmates arrival. It also mandates that an inmate be re-assessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or potential for abusiveness.</p> <p>(h)-(i): Staff and inmate interviews support that the facility meets the requirements of this standard: there was no evidence found during the audit which would indicate that an inmate would be disciplined for refusing to answer or disclose information related to this screening. In addition, interviews with staff support that only specifically classified staff are allowed to access inmate classification files. This was also confirmed due to the inmate files being maintained electronically.</p> <p>Corrective Action: None</p>
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115.42	Use of screening information
	<p data-bbox="245 159 820 188">Auditor Overall Determination: Meets Standard</p> <p data-bbox="245 230 488 259">Auditor Discussion</p> <p data-bbox="245 302 1485 443">(a): During staff interviews, social worker indicated all incoming inmates are reviewed and assessed individually and the risk assessment information is being used to determine the appropriate bunk assignment. SPCC is using risk assessment information to determine proper placement for work, education and programming assignments.</p> <p data-bbox="245 490 1481 669">(b): Social work staff (one full time and a part-time staff person) indicated if an inmate comes with obvious signs of vulnerability, staff will ensure the inmate is properly placed in order to ensure the inmate's safety from becoming a victim of sexual abuse. The facility is conducting individual risk assessment on all individuals housed in correctional facilities and this information is being uploaded into the electronic system which is used to determine proper bed placement of each inmate.</p> <p data-bbox="245 716 1465 857">To show further support of this standard, auditor reviewed established policy (Executive Directive 72) and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the agency to assess the risk of the individual from being sexually abused or being sexually abusive towards other inmates.</p> <p data-bbox="245 904 1485 1240">(c)(d)(e): SPCC reported having zero transgender inmates that last 12 months. During interviews with staff, they did state they would consider where transgender and intersex inmates are assigned on a case by case basis, and they always take the inmate's health and safety into consideration when determining this placement. Provisions would be made to ensure that transgender and intersex inmates' views are taken into consideration, with the main goal of placing the inmate to ensure sexual safety, as well as to ensure placement does not present management or security problems. Auditor was able to confirm there is a process in place that would ensure proper placement and programming for transgender and intersex inmates are reassessed at least twice yearly if they did reside at SPCC. Interview with staff and review of the policy confirms the process would take place.</p> <p data-bbox="245 1288 1485 1543">(f): As observed during the tour, showers at SPCC have a common showers are set up so multiple people are showering at the same time, similar to what you'll see in a locker room. Showers are walled up to shoulder length and provided the necessary privacy needed for inmates to shower, including transgender, if they resided at SPCC. Transgender inmates are also not housed at SPCC. All inmates interviewed stated that the showers available provided them with privacy, as was also witnessed by the auditor. In addition, the showers are placed in the housing unit so that staff cannot observe the inmate showering, but can view the showers to ensure safety of all inmates.</p> <p data-bbox="245 1590 1465 1731">(g): After reviewing documentation and conducting interviews with staff and inmates it was evident that inmates are not placed in specific facilities or units based solely on the identification of being lesbian, gay, bisexual, transgender, or intersex. Placement of inmates is based on overall needs, and safety and security of the inmate using the standardized risk assessment screening.</p> <p data-bbox="245 1778 520 1807">Corrective Action: None</p>

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)-(d): SPCC has reported zero instances of victims being placed in segregation for the timeframe of the audit period. SPCC is a work release facility and most of the inmates are within three years to release. However, there are no segregation cells but have a holding cell that inmates are held for a few hours before transferring to another facility. During the interview with the Superintendent he did state that there is a process in place if there need to separate the victim and the alleged abuser by placing them in housing in which the inmates would not have contact with each other; placing an inmate in involuntary segregation would be only be used as a last resort to ensure the inmate's safety. A review of housing placement, agency directives, and interviews with staff and inmates support the practice. If there should be an instance where it would be necessary to place an inmate in involuntary segregation to ensure the inmate's safety, the inmate would have access to education, some programming, and privileges; however, this would be a very rare circumstance. The placement in segregation would only continue until alternative means of placement could be arranged and those inmates would be reviewed every thirty days as required by this standard.</p> <p>In further support of this standard, SPCC present Executive Directive 72 which indicates that Protective custody housing is appropriate only when required for the protection of inmates. Every effort is made by social worker and managing official to find suitable alternatives to protective custody housing. However, SPCC does not have protective custody cells. An inmate who meets criteria for protective custody would be transferred to Green Bay Correctional Institution which is about 30 minutes away. Alternative may include, but are not limited to:</p> <ol style="list-style-type: none"> 1. A lateral transfer of the inmate to another facility of the same security level 2. Transfer of inmate's documented enemy or enemies to another facility <p>During an interview with social worker, it was stated that if protective custody housing is utilized or recommended by social worker or managing team, the supporting rationale shall be documented in inmate's electronic records. SPCC indicated that they have had zero instances of this taking place in the last 12 months.</p> <p>(c)-(e): Interview with Superintendent/PREA Compliance Manager indicated agency directives and facility processes when it comes to placing inmate in protective or any segregated housing. There are proper procedures in place to address placement in segregation for sexual safety; however, there have been no instances of such placement.</p> <p>Corrective Action: None</p>

115.51	Inmate reporting
	<p data-bbox="245 152 821 185">Auditor Overall Determination: Meets Standard</p> <p data-bbox="245 226 491 259">Auditor Discussion</p> <p data-bbox="245 297 1485 707">(a): Executive Directive 72 states that a complaint may be submitted by the victim, an individual with knowledge of an incident of sexual abuse or sexual harassment, or "third party" on behalf of the victim. The complaint may be submitted in writing or verbally and may remain anonymous. An individual may file a complaint of sexual misconduct, without the regard of the chain of command with an employee; a supervisor, manager or a shift commander, the head of a unit, or the inmate grievance office. The WIDOC inmate handbook informs inmates that they should report if they become a victim of sexual abuse or sexual harassment and instructs them that they can tell any correctional officer, social worker, chaplain, medical staff, supervisor, or any WIDOC employee. The directive also indicates that employees can receive a report of sexual misconduct from many different sources, including outside persons or agencies and that inmates shall also have access to a toll free hotline number which will refer any reports back to the institution for investigation.</p> <p data-bbox="245 752 1485 1164">(b): WIDOC Executive Directive 72 allows for a complaint to be filed outside of the department with the office of the Attorney General or other private or public office able to receive and immediately forward the complaint of alleged sexual misconduct to the department. There is an established PREA hotline which is used to report incidents of inmate on inmate or staff on inmate sexual misconduct and harassment, related retaliation or staff neglect. Inmates dial "777" which goes directly to WIDOC to make a complaint. They can also dial "888" which goes to an outside agency, the Wisconsin Department of Administration Capitol, who forwards the complaints to WIDOC headquarters in Madison. The hotline numbers are in inmates' handbook, over the phones on the unit. This auditor verified the phone numbers by calling them and they are functioning. During interview with PCM, he confirmed the operation of the PREA hotline and that the information is reported back to the facility head. He also indicated that the information remains confidential and is contained to only the staff necessary to complete an investigation.</p> <p data-bbox="245 1209 1485 1429">(c): Executive Directive 72 allows staff to accept reports in writing, verbally, and from third parties and requires that staff shall immediately report the complaint to a supervisor, manager, shift commander or head of a unit followed by submission of the appropriate written format used to document an inmate rule violation. The directive also requires that the information concerning the complaint is confidential and may only be available to individuals who have an established role in the reporting, processing, investigation and resolution of the alleged conduct.</p> <p data-bbox="245 1473 1485 1581">(d): WIDOC Executive Directive 72 indicates staff have an obligation to immediately report the complaint to a supervisor, manager, shift commander, or head of the facility. The same directive indicates the complaint filed is confidential and may be filed anonymously as well.</p> <p data-bbox="245 1626 1485 1845">During interviews with staff it was indicated that they could privately report sexual abuse or sexual harassment of an inmate by telling their supervisor, calling the PREA Hotline, or telling someone from outside the facility of what occurred. They all felt they could report such issues confidentially. Staff reported that inmates could privately report sexual abuse or harassment by calling the posted PREA hotline numbers, telling staff either in writing or verbally, or tell a third party who could report it. Staff indicated that if they received a report of sexual abuse, they would immediately report and document it.</p> <p data-bbox="245 1890 1485 2110">Interviews with inmates indicate they felt safe from sexual abuse at SPCC and knew how to report abuse or harassment if needed. Inmates indicated they could report sexual abuse by calling the PREA Hotline numbers that are posted by the telephones, they could tell a staff member or a family member, and believed they could do so verbally, or in writing. Postings were prevalent throughout the facility with reporting options as well as in the inmate handbook and intake processing paperwork. In addition to the postings, the PREA hotline numbers were posted above all the inmate phones and were in working order.</p>

115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>(a)-(c): The agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse. WIDOC Executive Directive 72, outlines the administrative complaint process as such "Inmate Complaint Review System shall be immediately redirected and referred for sexual abuse and/or sexual harassment investigation. Inmate shall be notified within 30 days of the initial complaint that an investigation into the portion of the complaint alleging sexual abuse or harassment has commenced and the Inmate Complaint Review process has concluded." In addition, the policy requires an inmate to submit a grievance regarding an allegation of sexual abuse or harassment at any time regardless of when the incident is alleged to occurred. Also, each facility shall ensure that an offender who alleges sexual abuse or sexual harassment may submit a complaint without submitting it to an employees who is the subject of the complaint and that such a complaint is not referred to the employee who is the subject of the complaint. Interview with PCM/ Superintendent, he confirmed that complaints related to sexual abuse or harassment are routed to the leadership for investigation.</p> <p>(b): Agency policy does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. According to Executive Directive 72, the complaint process shall not include a mandatory informal resolution requirement between the alleged victim and the alleged perpetrator.</p> <p>(d)-(e): WIDOC has a policy requiring an inmate be notified within 30 days of the initial complaint that an investigation into the portion of the complaint alleging sexual abuse/sexual harassment has commenced. Facility report on the PAQ zero grievances filed in the 12 months prior to the onsite visit. Executive Directive 72, requires third parties including fellow offenders, employees, attorneys, family members and outside advocates shall be permitted to assist an offender in filing complaints related to allegations of sexual abuse or sexual harassment. All complaints filed shall be referred for sexual abuse/sexual harassment investigation.</p> <p>(f): WIDOC Executive Directive 72 stipulates that if an offender alleges he or she is a subject of a substantial risk of imminent sexual abuse, the inmate may contact any employee who is not the subject of the allegation. Interview with the PCM/ Superintendent, he confirmed that shall immediately forward the allegations to facility leadership for immediate corrective action. The facility leadership shall provide an initial response within 48 hours and issues a final decision within 5 calendar days. The initial response and final facility decision whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency complaint shall be documented. There were no cases reported in the 12 months before the onsite visit, so there were no records for review.</p> <p>(g): The Executive Directive 72 states an inmate may be disciplined, if DOC demonstrates that sexual abuse/sexual harassment complaint was filed in bad faith. PCM reports their facility has not had any complaints or any complaints filed in bad faith. There were no records to review.</p> <p>Corrective Action: None</p>

115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>(a): WIDOC Executive Directive 72, states if requested by the victim and the services are reasonably available, have one of the following, for the purpose of support, for the victim through the forensic examination and investigation interviews; a qualified victim advocate; a department employee who is otherwise not involved in the incident and has received education and training concerning sexual assault and forensic examination issues and has been appropriately screened and determined to be competent to serve in this role; a non-department community based organization representative who meets the criteria for a department employee.</p> <p>The facility provided auditor with inmate handbook (redbook) and during the tour (insert of new sexual assault treatment and support services), auditor also noticed contact information for outside victim advocates such as mailing address, phone numbers (toll free) and other contact information. PCM indicated that the facility contracts with Sexual Assault treatment and support services, a crisis agency which is a local organization in Outagamie County, provides support services to inmates in the facility.</p> <p>(b): The facility provided auditor with documentation to indicate the level of confidentiality. There is a limit of confidentiality form signed by inmates if outside victim support services are required. The facility has zero instances where they had to use the form.</p> <p>(c): The facility PCM could not upload a copy of the contract on the PAQ because it had not been finalized. The facility has entered a contract with sexual assault victim treatment and support program in April 2018 prior to onsite visit. Interviews with staff and inmates all support that the facility has provided contact information for victim's advocacy group on posters stapled on the notice boards all over the facility and in their inmate handbook.</p> <p>Corrective Action: None</p>

115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>a): WIDOC Executive Directive 72 state that a complaint may be submitted by a third party on behalf of the victim or other individual who has knowledge of the sexual misconduct. The agency supplied a copy of the webpage from their agency website that had all the necessary PREA information as well as the agency PREA Coordinator contact information for reporting purposes. The auditor personally went to the department's webpage and was able to easily navigate to the necessary information on their website.</p> <p>Corrective Action: None</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a)(c): Executive Directive 72 defines the term employee as to include paid staff, contractors, interns and volunteers. The policy states, filing a complaint stipulates that employees receiving a complaint or otherwise has knowledge of alleged sexual abuse/sexual harassment shall immediately report the complaint to a supervisor or manager, head of the unit followed by the appropriate written format used to document misconduct. Medical staff during interview confirmed that they will ensure the victims of sexual assault receive prompt and appropriate medical intervention. The facility has policies and procedures regarding the detection, prevention, reduction and punishment of rape consistent with federal law; a consent must be obtained for prior victimization/abuse not occurring in an institutional setting or for an occurrence that happened under the age of 18; all reports of sexual abuse/victimization occurring within the institution will be immediately reported to the SPCC staff.

The directive does indicate that information concerning a complaint of alleged inmate on inmate sexual conduct is confidential and may only be available to individual's who have an established role in the reporting, processing, investigation, and resolution of the alleged inmate on inmate sexual conduct and immediate and continued care of the victim. Interviews with medical and mental health staff both indicated that they do in fact go over informed consent with each inmate receiving treatment from their medical or mental health services. They provide Inmate with an informed consent form which the inmate is required to sign. Both were aware that they are required to report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment to the facility upon learning it. The facility has not had any incidents of abuse being reported.

(b): The directive states information concerning a complaint of alleged sexual abuse or sexual harassment is confidential and may only be available to individuals who have an established role in the reporting, processing, investigating, and resolving the alleged sexual misconduct and immediate and continued care of the victim.

(d): The directive requires staff to comply with all state laws when conducting investigations. If the alleged victim is under the age of 18 or considered a vulnerable person under the state or local vulnerable person statute, the agency will report the allegations to the designated state or local social services agency. SPCC does not house inmates under the age of 18. Medical and mental health professionals are known mandatory reporters in the State of Wisconsin.

During interview with the Superintendent, he indicated that they don't house inmates under the age of 18 and if they had to report a vulnerable person that they would report to mental health and medical for necessary treatment, as well as complete an investigation of the allegations or ensure the appropriate authorities were made aware. PREA Coordinator and PCM indicated that they have never had an incident for this segment of their population.

(e): Executive Directive 72, states that a complaint of alleged sexual abuse or sexual harassment received anonymously shall be accepted and processed the same as a complaint received from an identified source. The superintendent indicated during his interview that all allegations of sexual abuse and sexual harassment are referred for investigation once received by the facility regardless of how they are reported. Facility supplied supporting documents to include a Limits of Confidentiality form that each inmate signs when receiving treatment from mental health or medical health care. In the form it indicates that treatment provider must report any information that presents a threat to the inmate, others in the facility, safety of the institution, and/or public safety. The following can not be kept confidential, as one issue is related to sexual abuse within the correctional setting.

All staff interviewed through the random interview process indicated that they were fully aware of their requirements to report all instances of sexual abuse or harassment, this includes medical and mental

health staff.

Corrective Action: None

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a); Executive Directive 72 states when making decisions related to housing, bed, work, education, and program assignments with the goal of separating inmates who are determined to be at high risk of being sexually victimized from inmates who are determined to be at high risk of being sexually abusive. Section XVI of the Directive, Initial response and care, states when the department or facility learns that an offender is subject to substantial risk of imminent sexual abuse, it shall take action to protect the offender. SPCC provided PREA intake Screening tool, that is used upon inmate arrival to the facility, as supporting document that is used to determine if an inmate is at risk of being sexually victimized or abusive. After the screening, inmates are classified as Risk of Violence (ROV) or Risk of Abusiveness (ROA). These codes are used to make decisions related to housing, bed, work, and programming. Also, the codes are used in making individualized determinations as how to ensure the safety of each inmate; when deciding to assign a transgender or intersex inmate to a facility for male or female inmates; r housing and programming assignments and on a case by case basis. In the case of SPCC, which is a work release facility, the inmate maybe housed in one of the room that houses only two inmates at a time and it is closer to the control center.</p> <p>Interviews with the Superintendent, PCM and random staff all indicate that any time a staff member becomes aware that an inmate is at risk of imminent sexual abuse they will remove the inmate from the situation and protect them by following all the applicable procedures. SPCC reported zero instances of situation related to this standard during the last 12 months.</p> <p>Corrective Action: None</p>

115.63	<p>Reporting to other confinement facilities</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>(a): The Executive Directive, Section XIV-Employee Reporting, states, if a complaint of alleged sexual misconduct is received by a supervisor, manager, shift commander or head of the unit at a facility other than the facility where the alleged sexual misconduct occurred, the facility receiving the complaint shall immediately notify the head of the facility of the complaint. If the alleged sexual abuse occurred in a WIDOC facility, or if the alleged sexual abuse occurred in a non WIDOC facility, the appropriate official shall be notified and documented.</p> <p>The head of the facility is responsible to report for ensuring that a reported allegation which occurred at another facility is reported to the head of appropriate office of the agency where the alleged abuse occurred and that the notification must occur no later than 72 hours after receiving the allegation and must be documented.</p> <p>(b): The directive requires notification is made immediately upon receiving the complaint which could be sooner than 72 hours. DACC reported zero instances being made about allegations at another facility.</p> <p>(c): The facility head will make the notification and document the notification.</p> <p>(d): EXecutive Directive 72 states the appointing authority that receives such notification shall ensure that the allegation is investigated according to applicable statutory, regulatory, contract, WIDOC procedures or other reasonably accepted standards related to:</p> <ol style="list-style-type: none"> (1) collecting and preserving evidence, (2) interviewing victims and witnesses, (3) conducting and using polygraph examinations, (4) identifying suspects, (5) preserving an individual's personal dignity and legal rights, (6) maintaining confidentiality of the investigation. <p>Corrective Action: None</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): WIDOC Executive Directive 72, section XVI - Initial response and care-First Responder, states 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:</p> <ol style="list-style-type: none"> (1). separate the alleged victim and the abuser (2). preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. (3). If the Abuse occurred within a time period that still allows for the portection of physical evidence, including, as appropriate, bathing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating. (4). if the abuse ocured 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. (5). Refer the victim for appropriate medical and mental health follow up services. <p>The agency Directive is general, as in first responder is referred to the person, custody or non-custody, first to the scene of an incident, or gets notified that something happened. All custody and non-custody staff interviewed were able to articulate their responsibilities as they relate to properly managing an incident of sexual abuse or sexual harassment as directed by the standard.</p> <p>(b): The agency directive indicates that anyone is first notified has a responsibility to respond to the incident while help is on the way. Therefore, the directive is applicable to all WIDOC staff, custody and non-custody, mental health and medical, volunteers and contractors, who have contact with inmates.</p> <p>Corrective Action: None</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): The agency provided Executive Directive 72, it explains the process of processing a complaint, investigating a complaint, providing medical and mental health care as well as what the facility and agency leadership's roles are in the process. These procedures are an institution plan that supports compliance with this standard. As a supporting documentation, the facility submitted "Sexual Abuse Response Team Protocol (2015)." This protocol outlines the responsibilities of every department in the facility. During interview with Superintendent, he indicated that SPCC staff are trained on how to initially respond to incidents of sexual abuse and sexual harassment and will take appropriate actions. He also indicated that all staff have PREA cards that they carry and are part of their uniform inspection. The PREA cards have a list of first responder duties as they relate to sexual abuse incidents.</p> <p>Corrective Action: None</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): The agency has not entered into or renewed any collective bargaining or other agreement since August 2012. The agency maintains the ability to protect inmates from contact with abusers. It is noteworthy that the State of Wisconsin does not have MOU with Labor Unions.</p> <p>Corrective Action: None</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>(a): Executive Directive 72, indicates that the facility 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.</p> <p>(b):The directive specifically prohibits retaliation against victims or other individuals related to an incident of sexual abuse after determining if an individual has been the target of retaliation. During interview with Social Worker, Corrections Program Supervisor, retaliation monitor, he indicated those making allegations are separated from the alleged abuser. The facility head is charged with ensuring that retaliation does not occur. Interview with staff indicated that they are aware of this process.</p> <p>(c)(e): Executive Directive 72 indicates that an individual, staff or inmate, reporting, participating in the investigation or resolution of, or who is the victim of alleged sexual abuse or sexual harassment is monitored for 90 days against retaliation and if retaliation is detected will take action which may include, application of available medical or mental health services or counseling; changes to inmate housing assignments and staff work assignments; and continued monitoring as deemed appropriate. Both agency head and facility head during their respective interviews, indicated that they would reassign, transfer or move the individual and start an investigation.</p> <p>(d): Policy addresses continuous monitoring for 90 days or as deemed appropriate. Also, for offenders, such monitoring shall include periodic status checks. Employees shall act promptly to remedy any such retaliation. Monitoring beyond 90 days shall continue if the initial monitoring indicate a continuing need.</p> <p>(f): SPCC submitted a form, "Staff Retaliation Monitoring form and Victim services coordinator response checklist" that the social worker uses to document retaliation monitoring. In the PAQ, the facility reported zero instances of retaliation in the past 12 months.</p> <p>Corrective Action: None</p>

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): Executive Directive 72, section XVI, indicates that Restricted Housing Unit (RHU) is appropriate only when required for the protection of the inmate. Every effort shall be made by social work staff and the managing official to find suitable alternative to protective custody housing. Alternatives may include, but are not limited to:</p> <ul style="list-style-type: none"> - Transfer of the inmate to a different housing unit within the facility - A lateral transfer of the inmate to another facility of the same security level - Transfer of the inmate's documented enemy or enemies to another facility <p>As with standard 115.43 where inmates who are at high risk for sexual victimization, inmates who have allegedly suffered sexual abuse fall under the same provisions as does 115.43. The agency's process and documentation support compliance with this standard as it did for 115.43. Interview with the Superintendent indicated that they would separate the victim from the perpetrator. He mentioned that Restricted Housing Unit would be a last resort. It is worth noting that SPCC does not have Restricted Housing Unit (RHU). SPCC reports zero instances of this within the last 12 months.</p> <p>Corrective Action: None</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a): WIDOC has a policy related to investigating sexual abuse and sexual harassment in confinement. Section XVII, investigations, specifically states this directive applies to personnel assigned to conduct investigation of an allegation of misconduct that involves sex related offense. Also, the policy states that WIDOC will ensure that an investigation is completed for all allegations of sexual abuse and sexual harassment. Interview with investigative Captain, he indicated once an allegation is received, it is documented and a case number is issued. It is reviewed and assigned for investigation.

The Executive Directive 72 states a complaint of alleged sexual misconduct may be submitted by a third-party on the behalf of the victim or other individual who has knowledge of the sexual misconduct. The facility did not have any reported cases within 12 months of onsite visit. Auditor did not have any documentation for review.

(b): WIDOC Executive Directive 72 states Department personnel assigned to conduct an investigation of alleged employee or inmate misconduct involving a sex related offense shall be trained in techniques related to conducting investigation of sex related offenses in confinement. The Facility has one trained investigator who is also a Captain. During onsite visit, investigator interviewed stated they continuously have training on PREA and responding to sexual abuse incidents. The training covers policy, compliance with the complaints, initial response, interviewing and professionally dealing with the victims, evidence collection, witness and offender interviews and referrals for prosecution. Most allegations of sexual abuse and sexual harassment, criminal investigations are conducted by the local police departments or sheriff departments. The administrative investigations are conducted by WIDOC trained investigators.

(c): The Executive Directive 72 states investigators shall preserve and /or collect direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. An investigator shall conduct a prompt, thorough and objective investigation of every complaint of alleged sexual misconduct according to applicable statutory regulatory case law contract department procedure, or reasonably accepted standards related to interviewing victims and witnesses. Facility staff are trained to secure the area an alleged assault occurred until the local law enforcement agency arrives on the scene. During this time, access to the scene is limited and documented who entered and why. Additionally, WIDOC policy requires alleged victims to be sent to a nearby hospital (St. Vincent Hospital) for a forensic exam to be conducted by SANE/SAFE certified staff.

(d): The facility investigator is required to work with the local law enforcement as the case is being developed for criminal prosecution. Even though the facility does not conduct criminal investigation, investigator indicated that local law enforcement agencies, Miranda and Garrity are implemented appropriately in order to ensure the information gathered during the investigation does not jeopardize a criminal investigation.

(e): Executive Directive 72 states the credibility of a victim, witness, or suspect shall be determined on an individual basis, regardless of the individual's status, for example employee or inmate. A victim may not be required to take a polygraph or other truth telling to determine to proceed with an investigation of an incident involving a sex related offense. The investigator interviewed indicate that the credibility of all involved in an investigation is based upon the facts of the investigation and not upon the status of the individual as an inmate or employee.

(f): Executive Directive 72 requires investigators to conduct post-incident actions including determining if an employee actions or lack of action contributed to the occurrence. Also, the investigator indicated that

investigator shall document all aspect of the investigation in a comprehensive investigative report that thoroughly describes physical, testimonial, and documentary evidence and that explains the reasoning behind credibility assessment and includes facts and findings. There were no allegations reported in the past 12 months at SPCC.

(g): WIDOC/DACC conducts administrative investigations. Therefore, the requirements outlined above in section (f) of this standard apply here as well.

(h): Executive Directive 72 states that department assigned investigator will assist a local law enforcement conducting a criminal investigation.

(i): Executive Directive 72 states the investigation is maintained according to an established retention scheduled, which requires that the report is maintained as long as the employee is employed by the Department or the inmate is under the authority of the Department plus five years. All investigative reports are retained electronically within the WIDOC office in Madison.

(j): According to the Executive Directive 72, an investigation under this directive may not be terminated based on victim or suspect departure from Department employment or custody. During interview with investigator, he indicated an investigation, once initiated, will be continued until completed regardless of the status of an employee or inmate within WIDOC. There were no administrative cases for review at SPCC.

(k): The State has addressed the requirements outlined in this report.

(l): The local law enforcement agencies conduct criminal investigations on the behalf of the agency because they are sworn police officers. Executive Directive 72 states when outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall work to remain informed about the progrss of the investigation. SPCC reported zero cases for past 12 months.

Corrective Action: None

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): WIDOC Executive Direcetive 72 specifically states upon concluding an investigation involving an inmate as a victim of a sex related offense, the investigator shall make their determination regarding substantiating the allegation based on upon a preponderance of the evidence. The facility did not have documentation for review of this section but policy requires investigators utilize the standard of preponderance or lower standard of proof of the evidence in making determination about investigative outcomes.</p> <p>Corrective Action: None</p>

115.73	<p>Reporting to inmates</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>(a): Executive Directive 72 specifically states upon concluding an investigation involving an inmate as a victim of a sex related offense and based on a preponderance of evidence, the investigator shall advise the victim inmate if the investigation resulted in the incident being determined to be substantiated, unsubstantiated, or unfounded. There were no investigations conducted in the past 12 months. However, PCM presented auditor with a copy of the form letter that is sent out to victim inmate upon conclusion of an sex related investigation.</p> <p>(b): WIDOC conducts administrative investigations of sex related allegations. The Directive requires WIDOC to request the relevant information from the investigative agency in order to inform the alleged victim, if WIDOC did not conduct the investigation. The same notification process will be followed, sending inmate victim a letter notifying them of the conclusion of the investigation.</p> <p>(c): This directive continues to require the investigator to ensure, if the incident involved an employee committing a sex related offense on an inmate and the incident was substantiated or unsubstantiated, arrange for the inmate to be advised all the requirements outlined in this section of the standard.</p> <p>(d): Same directive states if the incident involved an inmate committing a sex related offense on another inmate arrange for the victim inmate to be advised of the requirement regarding the perpetrator outlined in this portion of the standard. SPCC indicated there were no instances occurring within the last 12 months requiring such notification. Interview with staff indicates they are aware of this process.</p> <p>(e): The portion of the directive addressing subsection(e) states written confirmation is received from the managing official or a designee, and maintained in the investigative file that documents notifications made under this section have been made and include the date and time of the notification, the name and signature of the inmate notified, and the name and signature of the individual making the notification.</p> <p>(f): The directive specifically states the victim reporting requirements under this directive shall terminate at the time the victim is released from WIDOC custody.</p> <p>Corrective Action: None</p>
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115.76	Disciplinary sanctions for staff
	<p data-bbox="247 152 821 185">Auditor Overall Determination: Meets Standard</p> <p data-bbox="247 226 491 259">Auditor Discussion</p> <p data-bbox="247 297 1485 443">a): WIDOC Executive Directive 72 outlines an employee determined to have committed sexual misconduct is in violation of DOC sexual abuse, sexual harassment and retaliation policies shall be subject to disciplinary sanctions and including termination, criminal prosecution and if applicable, notification of a relevant licensing authority.</p> <p data-bbox="247 488 1469 555">(b): The same directive states termination is the presumptive sanction for a staff member who engaged in sexual abuse. The agency/facility had no instances of termination for this reason in the last 12 months.</p> <p data-bbox="247 600 1453 779">(c): Executive Directive 72 outlines an employee who was determined to have committed sexual misconduct is in violation of DOC policy and is subject to a penalty up to and including termination of employment with WIDOC. The policy specifically states "sanctions shall be commensurate of the violation, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories."</p> <p data-bbox="247 824 1465 936">(d): The same directive outlines an employee determined to have committed sexual abuse is in violation of WIDOC policy and is subject to a penalty, up to and include termination of employment with WIDOC, criminal prosecution and if applicable, notification of a relevant licensing authority.</p> <p data-bbox="247 981 523 1014">Corrective Action: None</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a): Executive Directive 72, Sexual Abuse and Sexual Harassment in Confinement, state a contractor determined to engage in sexual abuse is considered to be in violation of terms or conditions of a contract or the agreement establishing the relationship between the contractor and the WIDOC, subject to sanction according to provisions of the contract or agreement, is subject to criminal prosecution, and if applicable, notification of relevant licensing authority.</p> <p>(b): The same directive stipulates that if the contractor or volunteer fails to to fulfill its obligation under this contract properly and on time, or otherwise violates any provisionof the contract, WIDOC will terminate the contract by wwritten notice to the contractor. The policy prohibits contact between contractors, volunteers and employees to have contact with inmates prior to PREA training. All volunteers and contractors sign an agreemet form after PREA training acknowledging receipt of the training and what their responsibilities are for reporting suspected sexual abuse or sexual harassment. Interview with volunteer indicated that he completed all PREA training and auditor was able to verify in the automated system.</p> <p>Corrective Action: None</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a): WIDOC Executive Directive 72, states that an inmate may not commit, participate in, support, or otherwise condone sexual conduct. The policy details how inmate discipline is handled, including inmate sexual abuse. SPCC reported on the PAQ that there were no instances of administrative or criminal findings in the past 12 months of inmate on inmate sexual abuse.</p> <p>(b): The Agency Directive does state the discipline shall "be commensurate with the nature and circumstance of the violation, offender's disciplinary history and the sanctions imposed for comparable offenses by other offenders with similar histories."</p> <p>(c): The Directive outlines the disciplinary process shall consider a perpetrating offender's mental disabilities or mental illness contributed to his or her behavior when determining that type of sanction, if any, should be imposed. This implies that the hearing officer may consider the inmate's competency at the time of the rule violation as a mitigating circumstances when determining the sanction.</p> <p>(d): WIDOC directive suggests a facility to consider mandating therapy or counseling is offered to perpetrating offenders to participate in interventions to address and correct underlying reasons or motivations for the abuse. A psychologist was interviewed and he acknowledged that policy requires staff to encourage inmates to participate in treatment.</p> <p>(e): The policy stipulates an offender may only be disciplined for sexual contact with an employee upon finding that the employee did not consent to such contact. Also, offenders-on-offenders sexual abuse are subject to disciplinary sanctions pursuant to a formal disciplinary process. SPCC reports no sexual abuse cases in the past 12 months.</p> <p>(f): The Executive Directive 72 states a complaint of alleged sexual abuse made in good faith based upon a reasonable belief that the alleged sexual abuse occurred may not be considered a false report or lying, even if the required investigation does not establish sufficient evidence to substantiate the allegation.</p> <p>(g): The same directive states that an inmate may not commit, participate in, support, or otherwise condone sexual conduct. SPCC staff indicated there were no instances of inmate on inmate consensual sexual conduct in the past 12 months. During interview, staff confirmed that they would definitely respond to all instances under PREA standards and further investigate to determine if in fact it was consensual or sexual abuse.</p> <p>Corrective Action: None</p>

115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>(a)-(c): Upon interview with the social worker and intake officer, it was stated that during the screening process, if an inmate discloses that he has never experienced sexual victimization or ever been the perpetrator of sexual vicitimization, he is automatically referred to either medical or mental health immediately upon disclosure, and if the inmate agrees to see Medical or Mental Health then, he is seen generally within a day of the report. During the interview with intake staff, the intake Sergeant stated that intake staff screens all intake assessments and specifically look for any sexual abuse victimization or perpertrator. The directive indicates that if screening indicates that an inmate has exprienced prior to sexual victimization, whether it occurred in a facility or in the community, the inmate is offered to follow-up with a medical or mental health practitioner within 14 days of the intake screening.</p> <p>(b): The policy requires all new inmates will be screened for history of sexual abuse/assault victim or perpetrator, either in the community or during incarceration, and will be referred for further evaluation with medical /mental health within 14 days. In the same policy, The perpetrator will be offered follow up with medical or mental health practitioner within 14 days of intake.</p> <p>(d): The portion of this standard is met with agency wide as indicated by Policy. The instructions of PREA intake screening, PREA instrument were reviewed and indicate that the responses to the questions asked on the screening instrument are to be kept confidential and disseminate only to those individuals with a need to know. This supported the interview with social worker who stated that the information is provided only to individuals for who it is necessary for medical and mental health evaluation and treatment and those staff for whom it is necessary to make security and management decisions.</p> <p>(e): The limits of confidentiality is provided by Medical and Mental Helath practitioners in an effort to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. Review of this form does support that inmates' informed consent is obtained by medical or mental staff. The form does support that they inform inmates before signing the form about some information cannot keep confidential issues related to sexual abuse within correctional setting. The auditor was presented with blank form, " Authorization for dislose of information of no-health confidential information."</p> <p>Interview with medical staff, they would obtain informed consent from inmates before reporting information about prior sexual informed consent.</p> <p>Corrective Action: None</p>

115.82	<p>Access to emergency medical and mental health services</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>(a): An interview with medical staff indicated that follow-up treatment for alleged victims and perpetrators will be administered immediately and at no cost to the inmate. Timely and unimpeded access to medical treatment will be provided as necessary, as a result of any incidents, at no cost to inmate victims of sexual assault. To further support this standard, Executive Directive 72 was reviewed and indicates that facility staff shall ensure the safety of the victim of sexual abuse, through a coordinated response to a complaint of sexual misconduct that includes immediate medical attention and continued personal protective, referral for medical and mental health care follow-up and non-medical or mental health related counseling and support services. In addition, the policy states that staff shall immediately arrange for emergency medical services.</p> <p>(b): Executive Directive 72 states that while processing a complaint of alleged sexual misconduct, supervisor, manager, shift commander or head of the unit, shall immediately protect the victim from further harm and arrange for emergency medical services; in addition, staff shall refer the victim for appropriate medical/mental health follow-up services. Interviews with staff first responders did show that SPCC staff were well informed with what steps they are to take in the event that there are no available mental health or medical staff on duty at the time of a report of sexual abuse. Staff stated they would separate the victim and ensure that the on-call medical or mental health staff was contacted. SPCC staff report zero instances in past 12 months.</p> <p>(c)-(d): Security staff and non-security staff interviews indicate medical and mental health services are provided to victims at no cost to the victim. The Executive Directive 72 support this standard; in addition, follow-up testing related to Sexually Transmitted Infections, HBV, Pregnancy, and RPR shall be reviewed with the inmate and any additional testing or treatment is required within 5 business days. All PREA related post assault follow-up clinical activities for medial and mental health must be completed, including testing and prophylactic treatment for STDs. The victims shall be offered medical treatment at no financial cost regardless of whether the victim names the abuser or cooperates with the investigation arising out of the incident.</p> <p>Corrective Action: None</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p data-bbox="247 159 821 192">Auditor Overall Determination: Meets Standard</p> <p data-bbox="247 230 491 264">Auditor Discussion</p> <p data-bbox="247 302 1492 672">(a-g): Interviews with medical and mental health staff supported that all treatment services as required by this standard are taking place and are consistent with community level care, if not better due to the immediate availability of clinicians. Staff indicated in the event that an inmate suffered any sexual abuse, follow-up services and further treatment is available, including any tests for sexually transmitted infections. This is also supported by agency directives and the medical manual/processes are provided to inmate victims of sexual abuse without financial cost. Staff interviews indicated that inmates are immediately offered mental health services upon learning that the inmate is a known abuser and treatment is offered when deemed appropriate. SPCC reports zero instances in the past 12 months. Auditor was not able to review any documentation. All requirements of this standard have been met.</p> <p data-bbox="247 719 1476 864">(h): The Executive Directive 72 requires that the alleged abuser shall be offered health evaluation within 30-60 days of the alleged assault or abuse. Staff interviews with the social workers and medical charge nurse confirmed that the alleged abuser would be offered a mental health evaluation within 30-60 days of the alleged assault or abuse.</p> <p data-bbox="247 947 523 981">Corrective Action: None</p>

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>a)(b)(c): Executive Directive 72 requires that a review team, consisting of upper level facility management, shall review all sex related offenses that are investigated, unless determined to be unfounded, within 30 days after the investigation is concluded. The review team shall have input from the line supervisors, investigators and medical and mental health practitioners concerning the incident. In addition, the agency's policy requires the review shall consider if the incident or allegation indicates a need for a change in policy or procedure to better prevent, detect, or respond to sexual abuse and the specific reasons by which the incident was motivated. In accordance with the agency's directive, the review team shall also examine the location of the incident to evaluate any physical plant issues and assess staffing levels and the need for monitoring technology to determine if there are other issues that may have contributed to the incident.</p> <p>(d): The Executive Directive 72 outlines six aspects of this standard that the review team shall consider:</p> <p>(a) Whether the allegation or investigation indicates a need to change or practice to better prevent, detect or respond to sexual abuse</p> <p>(b) 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 was motivated or otherwise caused by other group dynamics at the facility.</p> <p>(c) The area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.</p> <p>(d) The adequacy of staffing levels in that areas during different shifts</p> <p>(e) Whether monitoring technology should be deployed or augmented to supplement supervision by employees.</p> <p>(f) Prepare a report of its finding, including but not necessarily limited to determinations made in the above items, and any recommendations for improvement and submit such report to the facility head and PREA Compliance Manager. SPCC reports zero instances in the past 12 months. There were no Incident Review Team notes or minutes for review.</p> <p>(e): No incident reviews were conducted at SPCC, therefore no recommendations for improvement have been made. According to policy, facility shall implement the recommendation for improvement or shall document reasons for not doing so.</p> <p>Corrective Action: None</p>

115.87	<p>Data collection</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>(a): Executive Directive 72, section XXI- Data Collection and Monitoring, states WIDOC shall collect and maintain data regarding PREA related criminal and administrative allegations, including facilities with which it contracts for the confinement of offenders.</p> <p>(b)(c)(f): The above mentioned directive states that DOC shall uniformly collect and maintain data for each reported allegation of sexual abuse at all correctional facilities under the authority of WIDOC that, at a minimum, is necessary to respond to data reporting required by the Survey of Sexual Violence conducted by the Department of Justice. The policy states this data shall be aggregated annually.</p> <p>(d): The agency maintains, reviews, and collects data from all incident based document, including reports, investigative files, and sexual abuse incidents reviews, The data analyst prepares reports and studies requests and provide each facility with technical support.</p> <p>(e): The agency's Directive states WIDOC shall uniformly collect accurate data from every allegation of sexual abuse from each correctional facility under the authority of the WIDOC to assess and improve effectiveness of sexual abuse prevention, detection and responsiveness.</p> <p>(f): Executive Directive 72 states that WIDOC shall uniformly collect accurate data for every allegation of sexual abuse from each correctional facility under the authority of WIDOC. With regard to section (a) of this standard which requires that a standardized instrument must be used to collect data for every allegation of sexual abuse, the agency's policy does not assign the responsibilities to anyone or department in particular. WIDOC most recent version of Survey of Sexual Victimization (2015) was reviewed and the survey supports that the agency has collected and aggregated the data as required by this standard, and has submitted this information to the United States Department of Justice/Bureau of Justice Statistics. Annual reports for 2014, and 2015 were available and reviewed on the agency website.</p> <p>Corrective Action: None</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)-(b): Executive Directive 72 states WIDOC shall, on PREA related matters, is responsible for data collection and review. The incident-based sexual abuse data collected shall be aggregated annually. Further, the report will include identification of problem areas or problems within specific correctional facilities, used to facilitate corrective action, and compare the current year's data and activities with that which is available from previous years.</p> <p>A review of the agency's most recent report revealed that several steps have been taken to comply with PREA in general. This includes updates to policy, establishment of facility PREA Compliance Managers at every facility and entrance into MOU for certified PREA audits.</p> <p>(c): The agency annual report is approved by the Agency Head. This was verified through an interview with the Agency Head and the Agency Head's signature on the report itself.</p> <p>(d): There is no information contained within the agency's report that would require redacting.</p> <p>Corrective Action: None</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a), (b), (c), (d): Executive Directive 72, section XXI Data Collection and Monitoring, requires that WIDOC shall securely retain and maintain incident-based and aggregated data ensuring only authorized personnel have access to the information. In addition, the sexual abuse data must be maintained for at least 10 years from the date received.</p> <p>Corrective Action: None</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>All facilities under the jurisdiction of WIDOC, have been audited by a PREA certified Auditor at least once since 2014. WIDOC manages over 30 institutions and at a minimum 10 of the institutions have been audited since the beginning cycle of PREA audit. Auditor was given access to all areas of the institution during the onsite visit. Also, copies of all documentations were uploaded on PAQ. However during onsite visit, Auditor was given copies of any extra documents when needed.</p> <p>Auditor was assigned a room with a lock to conduct private interviews with staff and inmate. There were two staff members assigned to assist auditors with all requests. Notices of the Audit were posted 6 weeks prior to onsite with auditor's address to receive inmate correspondence prior to onsite visit. Auditor did not receive any letters prior to onsite visit.</p> <p>Corrective Action: None</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency has published prior audits (2016) on their website: https://doc.wi.gov/pages/about/Doc/prisonrapeeliminationact.aspx</p>

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 consideration the number and placement of supervisory staff 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 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.)	yes

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.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.)	na

115.15 (c)	Limits to cross-gender viewing and searches	
	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?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes

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

115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	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.)	yes

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?	no

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 inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of 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).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

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 an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

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.)	na

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.)	na

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.)	yes

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 prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

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