

# PREA Facility Audit Report: Final

**Name of Facility:** Jackson Correctional Institution

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 05/27/2022

**Date Final Report Submitted:** 11/04/2022

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"/>
<b>Auditor Full Name as Signed:</b> Deborah Striplin	<b>Date of Signature:</b> 11/04/2022

AUDITOR INFORMATION	
<b>Auditor name:</b>	Striplin, Deborah
<b>Email:</b>	dstriplin@doc.nv.gov
<b>Start Date of On-Site Audit:</b>	04/12/2022
<b>End Date of On-Site Audit:</b>	04/14/2022

FACILITY INFORMATION	
<b>Facility name:</b>	Jackson Correctional Institution
<b>Facility physical address:</b>	N6500 Haipek Road, Black River Falls, Wisconsin - 54615
<b>Facility mailing address:</b>	

Primary Contact	
<b>Name:</b>	Jeremiah Curtis
<b>Email Address:</b>	Jeremiah.Curtis@wisconsin.gov
<b>Telephone Number:</b>	715-284-7353

Warden/Jail Administrator/Sheriff/Director	
<b>Name:</b>	Lizzie Tegels
<b>Email Address:</b>	Elizabeth.Tegels@wisconsin.gov
<b>Telephone Number:</b>	(715) 284-4550

Facility PREA Compliance Manager	
<b>Name:</b>	Jeremiah Curtis
<b>Email Address:</b>	jeremiah.curtis@wisconsin.gov
<b>Telephone Number:</b>	O: 715-284-4550

Facility Health Service Administrator On-site	
<b>Name:</b>	Tammy Maassen
<b>Email Address:</b>	Tammy.Maassen@wisconsin.gov
<b>Telephone Number:</b>	(715) 284-4550

Facility Characteristics	
<b>Designed facility capacity:</b>	837
<b>Current population of facility:</b>	964
<b>Average daily population for the past 12 months:</b>	900
<b>Has the facility been over capacity at any point in the past 12 months?</b>	Yes
<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	18 - 83
<b>Facility security levels/inmate custody levels:</b>	Medium
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	281
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	45
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	169

AGENCY INFORMATION	
<b>Name of agency:</b>	Wisconsin Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	State of Wisconsin
<b>Physical Address:</b>	3099 East Washington Avenue, Madison, Wisconsin - 53704
<b>Mailing Address:</b>	PO Box 7925, Madison, Wisconsin - 53707
<b>Telephone number:</b>	(608) 240-5000

Agency Chief Executive Officer Information:	
<b>Name:</b>	Kevin Carr
<b>Email Address:</b>	Kevin.Carr@wisconsin.gov
<b>Telephone Number:</b>	(608) 240-5065

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Leigha Weber	<b>Email Address:</b>	Leigha.Weber@wisconsin.gov

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
<b>Number of standards exceeded:</b>	
1	<ul style="list-style-type: none"> <li>• 115.73 - Reporting to inmates</li> </ul>
<b>Number of standards met:</b>	
44	
<b>Number of standards not met:</b>	
0	

# POST-AUDIT REPORTING INFORMATION

## GENERAL AUDIT INFORMATION

### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-04-12
2. End date of the onsite portion of the audit:	2022-04-14

### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Bolton Refuge House Community Victim Advocate

## AUDITED FACILITY INFORMATION

14. Designated facility capacity:	837
15. Average daily population for the past 12 months:	964
16. Number of inmate/resident/detainee housing units:	5
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

### Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

#### Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	963
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	31
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	70
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	8

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	2
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	23
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	3
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	14
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	While the facility did not have any offenders who reported sexual abuse at this facility during this audit time frame, the audit team interviewed one offender who reported sexual abuse at another facility.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	191
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	2
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	4
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	

53. Enter the total number of <b>RANDOM INMATES/RESIDENTS/DETAINEES</b> who were interviewed:	29
54. Select which characteristics you considered when you selected <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees: (select all that apply)	<input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees was geographically diverse?	The facility provided the audit team with rosters of offenders separated by housing unit including their race/ethnicity. The audit team selected offenders to ensure a diverse population was interviewed.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
58. Enter the total number of <b>TARGETED INMATES/RESIDENTS/DETAINEES</b> who were interviewed:	19
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	5

<p><b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>In following the PREA auditor handbook for the required number of interviews which was "one" physically disabled or blind/deaf or hard of hearing, the auditor selected one offender who was physically disabled and one offender who was deaf over an offender who had limited vision. The facility did not have any offenders who were blind at the time of the onsite audit.</p>
<p><b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>1</p>
<p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>3</p>
<p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>4</p>
<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>2</p>
<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>1</p>
<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>2</p>
<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>At the time of the onsite audit, the facility had not placed any offenders in restrictive housing for risk of sexual victimization or alleged to have suffered sexual abuse.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>22</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>25</p>

<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>a. Explain why it was not possible to interview the Agency Head:</b></p>	<p>The Secretary designated the Assistant Deputy Secretary for the interview.</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>79. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

<p><b>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Agency contract administrator</li> <li><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</li> <li><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</li> <li><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</li> <li><input checked="" type="checkbox"/> Medical staff</li> <li><input checked="" type="checkbox"/> Mental health staff</li> <li><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</li> <li><input checked="" type="checkbox"/> Administrative (human resources) staff</li> <li><input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</li> <li><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</li> <li><input type="checkbox"/> Investigative staff responsible for conducting criminal investigations</li> <li><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</li> <li><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</li> <li><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</li> <li><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</li> <li><input checked="" type="checkbox"/> First responders, both security and non-security staff</li> <li><input checked="" type="checkbox"/> Intake staff</li> <li><input checked="" type="checkbox"/> Other</li> </ul>
<p><b>If "Other," provide additional specialized staff roles interviewed:</b></p>	<p>Facility Victim Services Coordinator and Inmate Complaint Examiner (grievances)</p>
<p><b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>a. Enter the total number of VOLUNTEERS who were interviewed:</b></p>	<p>1</p>

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

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

<p><b>84. Did you have access to all areas of the facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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### Was the site review an active, inquiring process that included the following:

<p><b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.

### Documentation Sampling

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

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

## SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

### Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	1	0	1	0
Staff-on-inmate sexual abuse	0	0	0	0
<b>Total</b>	1	0	1	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	4	0	4	0
Staff-on-inmate sexual harassment	0	0	0	0
<b>Total</b>	4	0	4	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	1	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	0	0	1	0

**Sexual Harassment Investigation Outcomes**

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	1	2	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

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

**Sexual Abuse Investigation Files Selected for Review**

<b>98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:</b>	1
<b>a. Explain why you were unable to review any sexual abuse investigation files:</b>	During the time of this audit, this facility did not have any reported incidents of staff-on-offender or offender-on-offender sexual abuse investigations.
<b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

**Inmate-on-inmate sexual abuse investigation files**

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	4
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3

<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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**Staff-on-inmate sexual harassment investigation files**

<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
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<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
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<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
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<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>During the time of this audit, this facility did not have any reported incidents of staff-on-offender sexual abuse or sexual harassment.</p>
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**SUPPORT STAFF INFORMATION**

**DOJ-certified PREA Auditors Support Staff**

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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**Non-certified Support Staff**

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>a. Enter the <b>TOTAL NUMBER OF NON-CERTIFIED SUPPORT</b> who provided assistance at any point during this audit:</p>	<p>2</p>
<h2>AUDITING ARRANGEMENTS AND COMPENSATION</h2>	
<p>121. Who paid you to conduct this audit?</p>	<p> <input type="radio"/> The audited facility or its parent agency  <input checked="" type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)  <input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)  <input type="radio"/> Other         </p>
<p>Identify your state/territory or county government employer by name:</p>	<p>Nevada Department of Corrections</p>
<p>Was this audit conducted as part of a consortium or circular auditing arrangement?</p>	<p> <input checked="" type="radio"/> Yes  <input type="radio"/> No         </p>

## 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.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Agency PREA Director position description
- Agency Organizational Chart
- Facility PREA Compliance Managers

Interviews conducted

- Specialized interview with the Agency PREA Director
- Specialized interview with the PREA Compliance Manager
- Specialized staff interviews
- Interviews with random staff

(a) ED #72 states “The 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.

- The DOC provides a coordinated victim-centered response to reports of sexual abuse and sexual harassment. This includes providing medical and mental health services to victims of sexual abuse and sexual harassment while investigating all allegations.
- The DOC provides multiple avenues to report allegations of sexual abuse and sexual harassment and, further, recognizes the right of employees and offenders to be free from retaliation for reporting sexual abuse and sexual harassment.
- The DOC trains all staff members, contractors, and volunteers to recognize, respond to and report sexual abuse and sexual harassment.
- The DOC provides offenders with a comprehensive orientation that details their right to be free from sexual abuse, sexual harassment, and report-related retaliation.
- The DOC employs a data collection method to accurately track and aggregate sexual abuse and sexual harassment incidents, identify core causal factors and take corrective action so as to align with a zero-tolerance environment

(b) ED #72 states “The DOC shall employ or designate a PREA Director to oversee department efforts to comply with PREA standards. This position shall have sufficient time and authority to develop, implement and oversee DOC’s efforts to comply with PREA standards in all of its facilities.” The agency policy, agency PREA Director position description, and specialized interview with the Agency PREA Director supported compliance with this provision to include the guidance posted on the PREA Resource Center under the Frequently Asked Questions (FAQ) dated December 18, 2015, which reads in part:

- In terms of authority, PREA Directors at the agency level must, at a minimum, have:
- Direct access to the agency’s most senior leader or chief executive officer (e.g., Director, Secretary, Commissioner, Administrator, etc.);
- Direct access to the agency’s executive or senior leadership team; and The influence necessary to create and implement agency-wide policies, procedures, and practices, without any interference from other levels of bureaucracy or supervision, and in accordance with the PREA standards and interpretative guidance issued by DOJ.

**\*Pre-on-site PREA Director interview:** While the PREA Standards reference and define “PREA Coordinator”, WI DOC policy defines this position as the “PREA Director.” The PREA Director is assigned to the PREA Office in Madison (Headquarters) and reports to the Assistant Deputy Secretary with direct access to the Secretary. The PREA Director supervises four staff who provide additional support and assist in monitoring the designated facility’s PREA Compliance. The PREA Director stated that she has time and authority to oversee the agency’s efforts to comply with the PREA standards with direct access to the agency’s Executive Leadership. In coordinating the agencies and facility’s efforts to comply with the PREA standards, the PREA Office staff conducts quarterly status checks with the facility PREA Compliance Managers

(PCM). This is completed through email, telephone, virtual meetings, and on-site visits. If an issue is identified the PREA Director and the facility PCM brainstorm solutions and ensure there is open communication to discuss and resolve issues which could include but are not limited to: policy and procedure revisions and looking at other facilities on how they are meeting compliance.

(c) ED #72 states "The appointing authority or designee at each facility shall assign one employee as the facility-based PREA Compliance Manager with sufficient time and authority to coordinate the facility's efforts to comply with PREA standards as set forth by DOC."

**PREA Compliance Manager (PCM) pre-on-site interview:** The PCM responsibilities are assigned to a Captain who oversees PREA within the facility. The Warden appointed a new PCM approximately four months before the onsite review and at the time of this audit, they were still learning the responsibilities of a PCM. The PCM stated they have enough time and authority to oversee the PREA program at the facility and have direct access to the Warden, Deputy Warden, Security Director, and PREA Director. The PCM implemented a PREA team to support the facility's mission to support the facility's efforts in maintaining compliance. The PREA team includes and is not limited to; Deputy Warden, Security Director, RHU Captain (backup PCM), medical and mental health staff, and facility victim services coordinator. The PREA team meets regularly to discuss any concerns or deficiencies that may have been identified and work together to determine what actions are needed such as email reminders to staff, updates to procedures, etc.

**On-site interviews:** The audit team conducted random and specialized interviews with staff and offenders. All who were interviewed stated they are aware of the agency's Zero-Tolerance Policy and referenced the PREA posters around the facility.

**Conclusion:** The auditor finds the facility meets compliance with this standard

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Division of Adult Institutions (DAI) policy 410-00-01, effective 1/22
- Contract Compliance Review Report – Prison Rape Elimination Act
- Thirteen contracts for housing WIDOC offenders

Interviews conducted

- Agency Contracts Administrator

**Pre-on-site documentation and contract agency public website review:** The PAQ reflected a total of thirteen agency contracts. Documentation uploaded into the OAS included fourteen active and one dissolved contract within the audit time frame to house WIDOC offenders. The contract with the Forest County Sheriff's office was terminated effective February 1, 2022. The agency policy, contract agreements, and contracted facility public websites were reviewed. This auditor identified only two contract agencies that have received National PREA audits, some agencies did not have annual agency PREA reports, and/or PREA information on their public website. On April 6, 2022, the auditor received a copy of the letter sent by the Secretary to the agencies regarding compliance with standards and agency agreements.

Contracted agencies:

- Bayfield County – Terminated contract effective 5/2022
- Fond Du Lac County
- Milwaukee County House (MCH)
- Jefferson County
- Juneau County
- Marquette
- Ozaukee County
- Racine County
- Rock County
- Sauk County
- Vernon County
- Vilas County

Contracted agencies who have received a National PREA Audit:

- Sauk County Jail: Final PREA audit report dated 12/17/2018
- Vilas County Jail: Final PREA audit report dated 12/13/2018

Contracted agencies with some level of PREA information posted on their public website:

- Fond Du Lac County: PREA information and annual report 2018-2020
- Milwaukee County House (MCH): PREA information and annual report 2018-2020
- Oneida County: PREA information and annual reports 2019 – 2021
- Ozaukee County: PREA information and annual reports 2019 - 2020
- Rock County: PREA information, and annual reports 2015-2020
- Sauk County: PREA information and 2020 Annual report
- Vernon County: PREA information and annual reports 2017-2021
- Vilas County: PREA information and annual reports 2018 – 2021

Contracted agencies with no PREA information posted on their public website:

- Racine County
- Marquette County – 5/3/2022 PREA annual reports posted
- Juneau County
- Jefferson County
- Bayfield County – Terminated contract effective 5/2022

(a) (b) ED #72 states “All new or renewed contracts for the confinement of the DOC offenders not within a DOCoperated facility shall include a provision regarding the contractor’s obligation to adopt and comply with PREA standards. In addition, any new contract or contract renewal shall provide for contract monitoring to ensure that the contractor is complying with PREA standards.”

Excerpt from the contract agreement Q. Prison Rape Elimination Act - 1 thru 5 reads:

1. The Sheriff agrees to comply with the Federal Prison Rape Elimination Act of 2003 and any subsequent standards imposed by the United States Attorney General. If the Sheriff is not in full compliance with the Federal Prison Rape Elimination Act of 2003, the Sheriff shall take all feasible and necessary steps to work toward full compliance, shall continue to do so until full compliance is achieved, and shall continue to maintain full compliance. The Sheriff shall have policies and procedures in place for responding to sexual abuse and sexual harassment allegations as defined by PREA, in addition to report-related retaliation allegations, and shall further have procedures or policies for maintaining reports and records necessary for reporting data consistent with PREA. The Sheriff shall provide training for its staff, contractors, interns, volunteers, and any others who may have contact with inmates pursuant to its policy, procedures, and PREA standards. See 28 C.F.R. § 115.12. 2.

2. The Sheriff shall schedule and subject itself to a Department of Justice (DOJ) PREA Audit pursuant to 28 C.F.R. § 115.401-405 at least once every three years beginning August 20, 2013. The Sheriff shall bear the costs of conducting the audit. The Sheriff shall forward all interim and final facility PREA audit reports within 30 days of receipt to DOCPREData@wisconsin.gov.

3. The Sheriff agrees to timely completion of the Bureau of Justice Statistics Annual Survey of Sexual Victimization (SSV) and/or its current equivalent survey. The Sheriff will forward a copy of the SSVIAAdult Incident Form and/or SSVIJ-Juvenile Incident Form for each incident involving DOC inmates in the prior calendar year to the DOC within 30 calendar days of the date the Bureau of Justice Statistics publishes the Annual Survey on Sexual Victimization. These forms shall be forwarded to the DOC PREA Office at OCPREData@wisconsin.gov. See 28 C.F.R. § 115.87.

4. During the years in which the Sheriff is not audited by a US DOJ PREA auditor in accordance with 28 C.F.R. § 115.401-405, DOC shall conduct an annual compliance review to ensure that the Sheriff is compliant with PREA standards. This review may include, but is not limited to, facility tour, staff and inmate interviews, and examination of Sheriff policies, procedures, staff records, inmate records, training records, and incident records related to sexual abuse or sexual harassment allegations as defined by PREA, or report-related retaliation allegations. See 28 C.F.R. § 115.12.

The Sheriff shall notify the DOC within 24 hours of any sexual abuse or sexual harassment allegation as defined by 28 C.F.R. § 115.5-6, or any report-related retaliation allegation. The notification shall be made via email to DOCPREData@wisconsin.gov and shall include a copy of the facility’s incident report. If the DOC has reason to believe that any of these incidents have occurred, it shall have immediate access to relevant Sheriff’s records as defined by DOC. Section R. of the contract requires they report serious incidents committed by inmates which include any PREA allegations and/or investigations.

**Pre-onsite Agency Contracts Administrator interview:** The agency PREA contracts monitor has worked for WIDOC for 21 years and reports to the Agency PREA Director. Currently, the agency has thirteen active contracts with sheriff departments in several counties that may temporarily house Wisconsin Offenders within the jail or detention center. The contract monitor conducts on-site reviews and internal audits for monitoring compliance. he communicates regularly with these agencies and is notified of any reported incidents of sexual abuse and sexual harassment involving any WIDOC offender who is in their care. This includes the status of an investigation when the investigation has been closed and the outcome of the investigation. During the pandemic, monitoring was conducted virtually with the facility staff and reviewing documentation sent to her. The contract monitor stated that all contracted facilities are required to initiate a contract for a PREA audit by August 2022.

**Post-onsite communication and corrective action:** Virtual meeting on 4/20/22 the auditor and PREA Director discussed the documentation needed to support compliance with this standard and agency contracts. PREA Director will provide a memo outlining the dates contracted agencies scheduled PREA audits and notification for any agencies who elected to terminate the contract with WIDOC.

- **Follow up:** On 5/2/22 the lead auditor received a memo and supporting documentation showing the dates PREA

audits are scheduled for twelve of the contracted agency facilities. Bayfield County elected to terminate the contract with WIDOC effective May 2022. On May 3, 2022, the lead auditor received an email from the PREA Director reporting Marquette County updated its agency's public website to include PREA information. On 5/6/2022 the lead auditor review the agency website which affirmed they have a PREA section and posted annual PREA reports for 2020 and 2021. Three of the contracted facilities are working on updating their public website to add PREA information. They anticipate this will be corrected within the next few months to comply with their PREA audit requirements and contract agreement with WIDOC.

**Conclusion:** The auditor finds the agency meets compliance with this standard.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Division of Adult Institutions Policy and Procedures (DAI) #410-05-05 Chapter 410 Prison Rape Elimination Act
- Completed Facility Staffing Plan
- Agency PREA Director Annual PREA Staffing Plan Review Log
- Division of Adult Institutions Policy and Procedures (DAI) #410.40.01 Unannounced Supervisory Rounds
- Highlight samples of the facility supervisor's unannounced rounds logbook

Interviews conducted

- Specialized interview with Warden
- Specialized interview with the PREA Compliance Manager
- Specialized interview with the PREA Director
- Specialized interviews with facility supervisors
- Random interviews with staff

(a) ED 72 requires, "Each facility shall develop, document and make its best efforts to comply with a staffing plan that provides for adequate levels of employees and, where applicable, video monitoring, to protect offenders against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall consider:

1. Generally accepted correctional practices;
2. Any judicial, federal investigative, and internal/external oversight agency findings of inadequacy;
3. The facility's physical plant including blind spots or areas where employees or offenders may be isolated;
4. The composition of the offender population;
5. The number and placement of security staff;
6. Institution programs occurring on a particular shift;
7. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
8. Applicable State or local laws, regulations, standards, and other relevant factors

DAI 410.50.05 supports ED 72 outlining the general guidelines each facility is required to follow. Additionally, the auditor reviewed the facility's most recent staffing plan report which was signed electronically by the Facility leadership which included the PCM and Agency PREA Director.

**Pre-onsite Warden interview:** The Warden is responsible for completing and submitting the annual staffing plan report to PREA Director. The Warden will communicate with and get input from the Security Director and PCM when preparing the staffing report. The facility has not requested any new positions through the legislative process since the last audit.

(b) ED 72 states "In circumstances where the staffing plan is not complied with, the facility shall document in written form and justify all deviations from the plan."

(c) ED 72 requires, "Whenever necessary, but not less frequently than once each year each facility, in consultation with the PREA Director, shall assess, determine and document whether adjustments are needed to:

1. The facility's staffing plan;
2. The facility's deployment of video monitoring systems and other monitoring technologies; and
3. The resources the facility has available to ensure adherence to the staffing plan

**Pre-onsite PREA Director interview:** Each facility consults with the Agency PREA Director each year around April or May to review staffing plan information. This information is assessed to determine if any adjustments are needed under provision (a) of this standard. The PREA Office maintains a tracking log to ensure all facilities are complying with this standard

provision.

(d) ED 72 requires that "Supervisory staff shall conduct and document unannounced rounds, covering all shifts to identify and deter employee sexual abuse and sexual harassment. The DOC employees are prohibited from alerting other employees that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility." In accordance with ED 72, DAI 410.40.01 requires supervisors to conduct rounds at random times across all shifts and days of the week. Following the unannounced round, supervisors are required to document their name, the time, and the date of the round using one of the following three methods:

1. Maintain a designated PREA/Unannounced round logbook
2. Record the unannounced round in an existing logbook using a red pen
3. Documented in the shift commander's shift report

**On-site interviews:** Targeted interviews were completed with supervisors who conduct unannounced rounds from each shift. While conducting the physical plant review the audit team asked random staff and offenders if they observe supervisors in housing and program areas. If so, are approachable to speak to them by both staff and offenders.

On-site observations:

1. The audit team reviewed the supervisor logbooks in all housing units to verify supervisors are documenting unannounced tours consistently on all shifts. The audit team asked the unit staff if have observed supervisors consistently touring housing units and if the supervisor is of the opposite gender, are they completing the opposite gender tone. The staff who were asked these questions affirmed supervisors were conducting and documenting tours. Additionally, the audit team asked offenders in housing units and program/works areas if they observed supervisors in areas regularly.
2. The audit team identified a blind spot in the chemical room when reviewing the outside perimeter warehouse.
3. While conducting the physical plant review, the audit team identified the staff restroom vacant/occupied device as a bolt lock when turned to "occupied". Auditor asked how staff would be able to access the restroom if occupied and they stated they did not know and would look into where they maintained the mechanism to unlock the door. These areas created a space where staff and offenders could be isolated, placing the facility into corrective action. During the out brief meeting it was discussed that the facility will need to ensure they have a way to unlock the doors if an emergent situation arises.

**Corrective Action:** As referenced under onsite observations numbers two and three required some minor physical plant corrections. **Follow-up:** Item number two was corrected prior to the issuance of the interim report. The facility installed a mirror in the chemical room and sent a picture to the auditor supporting that the action was completed. On October 13, 2022, the auditor received notification from the Deputy Warden that item number three had been completed and the facility removed the bolt locks had been from the restroom doors and included a photo to support the action taken.

**Conclusion:** The auditor finds the facility meets compliance with this standard.

115.14	<p><b>Youthful inmates</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (Ed 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Agency movement memo date 12/19/2016</li> <li>• Division of Adult Institutions (DAI) Policy and Procedure #302.00.20</li> </ul> <p>WIDOC has policies related to this standard Effective December 19, 2016, the Wisconsin Department of Corrections, Division of Adult Institutions moved all youthful inmates out of the adult institutions. Youthful inmates are now housed within Division of Juvenile Corrections (DJC) facilities.</p> <p>(a) (b) (c) ED 72 states, “Youthful inmates shall not be placed in a housing unit in which they have sight, sound or physical contact with any adult offender through use of a shared dayroom or other common space, shower area or sleeping quarters. In areas outside of housing units, DOC shall either: maintain sight and sound separation between youthful inmates and adult offenders or provide direct staff supervision when youthful inmates and adult offenders have sight, sound, or physical contact. Adult facilities shall make best efforts to avoid isolating youthful inmates to comply with this provision. Absent exigent circumstances, adult facilities shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible. Such exigent circumstances leading to the denial of large-muscle exercise, legally required education services, and/or other programming shall be documented.”</p> <p>DAI #302.00.20 states, “The Division of Adult Institutions shall not house juveniles in adult correctional facilities. the placement of adjudicated juveniles or juveniles sentenced as adults.” The policy includes definitions and procedures which clearly state that Adjudicated Juveniles who are less than 18 years of age shall not be admitted to a Division of Adult Institutions (DAI) facility or Wisconsin Resource Center (WRC).</p> <p><b>Conclusion:</b> This auditor finds the facility meets compliance with this standard.</p>
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115.15	<b>Limits to cross-gender viewing and searches</b>
	<p data-bbox="242 145 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 208 451 237"><b>Auditor Discussion</b></p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 427 743 456"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 506 1442 768" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 500.70.24 Clinical Observation</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 306.17.02 Searches of Inmates</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 306.16.01 Use of Body Cameras</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 410.40.02 Opposite Gender Viewing and Announcing</li> <li>• An email reminder from Warden regarding cross-gender announcements</li> <li>• Agency Searches Lesson Plan</li> </ul> <p data-bbox="242 797 456 826"><u>Interviews conducted</u></p> <ul data-bbox="284 875 588 936" style="list-style-type: none"> <li>• Random staff interviews</li> <li>• Random offender interviews</li> </ul> <p data-bbox="242 965 1449 1025">(a) ED 72 states “Facilities shall not permit cross-gender strip or body cavity searches except in exigent circumstances or when performed by medical practitioners.”</p> <p data-bbox="242 1055 1455 1285">DAI 306.17.02 states “Staff directly observing the inmate during a strip search shall be required to be the same sex as the inmate. A second staff shall only observe the staff performing the strip search” and “All body cavity searches and certain body content searches must be conducted by off-site health professionals.” In, accordance with this policy, DAI 306.16.01 address’s the use of body-worn cameras (BWC) during a strip search or staff-assisted strip search. Additionally, DAI 306.17.02 prohibits cross-gender strip searches, except in exigent circumstances or when performed by medical practitioners. If a strip search is required for a non-compliant inmate, the staff member shall be the same gender as the inmate, except in exigent circumstances.</p> <ul data-bbox="284 1337 1469 1397" style="list-style-type: none"> <li>• <b>Onsite random staff interviews:</b> Staff selected for interview affirmed compliance with the agency policy and do not conduct cross-gender searches or cavity body searches.</li> </ul> <p data-bbox="242 1426 1490 1487">(b) ED 72 states “Except in exigent circumstances, adult facilities shall not permit cross-gender pat-down searches of female offenders nor shall juvenile facilities permit cross-gender pat-down searches of either gender.”</p> <ul data-bbox="284 1538 1267 1568" style="list-style-type: none"> <li>• This provision does not apply to this facility audit as the facility does not house female offenders.</li> </ul> <p data-bbox="242 1597 1458 1657">(c) ED states “All cross-gender strip and body cavity searches, in addition to cross-gender pat-down searches of females, shall be documented.”</p> <p data-bbox="242 1686 1485 1881">(d) ED 72 states “In order to enable offenders to shower, perform bodily functions and change clothing without nonmedical employees of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks, employees of the opposite gender shall announce their presence when entering an offender housing unit. If opposite gender status quo changes during that shift then another announcement is required. Facilities shall not restrict access to regularly available programming or other out-of-cell or housing unit opportunities in order to comply with this provision.”</p> <p data-bbox="242 1910 464 1939"><u>Cross-gender viewing</u></p> <p data-bbox="242 1968 1485 2063">DAI policy 500.70.24 defines cross-gender constant observation as a constant observation that is conducted by a staff member with gender identity (male or female) that varies from inmate sex assigned at birth (or gender recognized by DOC, if different than the sex assigned at birth).</p> <p data-bbox="242 2092 1485 2152">The policy outlines the procedures when an inmate has been placed on constant observation status. “Cross-gender constant observation may be conducted when privacy accommodations are provided for toileting, showering, and changing clothing.</p>

Exceptions are allowed in exigent circumstances. Privacy accommodations may be accomplished through a variety of means, including but not limited to:

1. Ensuring the individual has a smock, paper gown, etc., to maintain privacy while toileting.
2. Providing a shower with a partial curtain or other privacy shields which still allow staff to observe the patient and ensure his/her wellbeing.
3. Having staff of the same gender provide the constant observation or at minimum, substituting staff of the same gender during these activities.
4. Exigent circumstances shall be documented.

#### Cross-gender announcements

DAI 410.40.02 requires each facility to develop and be responsible for implementing local procedures to ensure that a consistent announcement is made each time a staff member, contractor, or volunteer of the opposite gender enters a housing unit. At a minimum, the announcement must be made when an opposite-gender staff member enters the housing unit and there are no other opposite-gender staff members present on the housing unit. When an opposite-gender staff member is entering a housing unit and it is unknown to him/her whether the opposite gender announcement has been made on his or her behalf, the entering staff member shall be responsible for making an announcement.

The policy lists three available options of generally accepted practices for executing such announcements.

1. A designated tone, sign, and/or light that is used only for the purpose of announcing a member of the opposite gender entering housing units.
2. An announcement made by the staff working the control desk via the intercom or alternate system.
3. The opposite gender staff person makes an audible announcement of their presence

In accordance with DAI 300.00.35 and 300.0061 policy, facilities shall develop an alternative or supplementary notification method for deaf or blind inmates.

**On-site observation:** Audit team heard the opposite gender “tone” when entering housing units and observed the printed image of the universal “female” human symbol.

**Onsite interviews:** Staff who were selected for interview affirmed the cross-gender “tone” is activated when female staff enters offender living areas. This includes staff placing a printed image /visual aid of the universal “female” human symbol to alert offenders who may be hard of hearing or deaf. Staff affirmed offenders are able to shower, dress and use the restroom without the opposite-gender staff viewing offenders.

**Random and specialized offender interviews:** When conducting interviews with offenders and asking if staff use the opposite gender announcement “tone”, the responses varied between units. Some offenders stated the facility had only recently started the use of the “tone” consistently when female staff first enter the unit, however, the majority stated staff was not completing the opposite gender tone when the status quo of the unit changed. Offenders stated more times than not when female staff leave the unit and return, the opposite gender “tone” is not activated. The audit team asked if other female staff were in the unit to determine if the status quo had changed. While some offenders did not fully understand what “status quo” meant the audit team learned there were many instances the tone should have been initiated.

(e) ED 72 states “Facilities may not search or physically examine a transgender or intersex offender for the sole purpose of determining the offender’s genital status. If the offender’s genital status is unknown, it may be determined during conversations with the offender, 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.” In accordance with ED 72, DAI 306.17.02 states “Staff shall not physically examine or search a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. If unknown, an inmate’s genital status may be determined through the following methods: 1. Conversation with the inmate. 2. Review of medical records. 3. As part of a broader medical examination conducted in private by an ACP.”

**Random and specialized offender on-site interviews:** Staff interviewed stated they would never search a Transgender or Intersex Offender for the sole purpose of determining the offender’s genital status. Interviews with Transgender offenders affirmed the agency policy and staff interviews. Transgender offenders selected for interview by the audit team stated they have never been searched by staff inappropriately.

(f) ED 72 states “All security staff shall be trained on how to conduct cross-gender pat-down searches and searches of transgender and intersex offenders to ensure professionalism and to utilize the least intrusive manner possible consistent with security needs.” Auditor reviewed the agency lesson plan to ascertain the training provided to staff on how to professionally search Transgender inmates. The training outlined the appropriate method with the back of the hand around the breast area.

**Random staff on-site interviews:** Security staff has received training on how to conduct pater searches of Transgender and Intersex Offenders. While conducting interviews with staff, they were asked to describe the “pat search”. The process described was appropriate and professional using the back/blade of the hand around the breasts and appropriate hand placement around the genitals. The agency follows a “universal” style pat search where all staff is searched in the same manner which prevents any confusion if gender identity is unknown by the searching staff member.

**Corrective action:** (d) The facility was asked to provide documentation to the auditor on the action they would take to ensure all staff initiates the opposite gender “tone” and inform staff of the definition of the change in the housing unit “status quo” regardless if the opposite gender staff leave the unit for a short time. **Follow-up:** The auditor received an email from the PREA Director that included a staff Training Brief “Cross-Gender Announcement”, outlining the announcement procedure and included clarification on initiating the cross-gender “tone” when the status quo changes in the unit. The training bulletin was reviewed and satisfied the agreed-upon corrective action.

**Conclusion:** The auditor finds the facility meets compliance with this standard.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Executive Directive 71 (excerpt reference): WIDOC Sexual Abuse and Sexual Harassment Prevention and Intervention, Resources for Inmates (Large Print)</li> <li>• Division of Adult Institutions Policy and Procedures (DAI) 300.00.35 Americans with Disabilities Act</li> <li>• Agency ASL/LEP Video Contract</li> <li>• Agency ASL In-Person Contract</li> <li>• Agency LEP Written Contracts</li> <li>• Agency LEP In-Person Contracts</li> <li>• WIDOC Sexual Abuse and Sexual Harassment Prevention and Intervention, Resources for Inmates (Large Print)</li> <li>• WIDOC Sexual Abuse and Sexual Harassment Prevention and Intervention, Resources for Inmates (Spanish)</li> <li>• Agency Posted Language Policy Notice (English and Spanish)</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interview with Assistant Deputy Secretary</li> <li>• Specialized Interviews with Offenders</li> <li>• Random interviews with staff</li> </ul> <p>(a) (b) ED 72 states “Offenders with disabilities or who have limited English proficiency shall have an equal opportunity to participate in or benefit from all aspects of the DOC’s efforts to prevent, detect and respond to sexual abuse and sexual harassment. This includes providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, in addition to the provision of offender education in formats accessible to all. Written materials shall be provided in formats or methods that ensure effective communication with offenders with disabilities.” In accordance with ED 72, (DAI) 300.00.35 outlines procedures facilities will take to identify and provide accommodations for inmates with disabilities including during intake and when they transfer to another facility.</p> <p>(c) ED 72 states “The facility shall not rely on offender interpreters, offender readers or other types of offender assistants except in exigent circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety, the performance of first-responder duties or the investigation of the offender’s allegations. The exigent circumstances in which offender assistants are used shall be documented.”</p> <p><b>Assistant Deputy Secretary pre-onsite interview:</b> The Assistant Deputy Secretary is aware of and familiar with the agency policy and available services for offenders who are limited English proficient, deaf/hard hearing, or blind/limited vision. She was able to describe the intake process and when staff would utilize services.</p> <p><b>On-site interviews:</b> The audit team conducted a specialized interview with staff who complete offender risk screening and PREA education. Staff is aware of how to utilize the translation service provider and how to ensure offenders who are deaf/hard of hearing, blind/limited sight, or have mental/physical disabilities understand the information provided. When conducting interviews with offenders who were Limited English Proficient the audit team was provided with instructions on how to use the translation service provider and utilized the service when conducting interviews with those who are limited English proficient. The offenders affirmed during the interview process that facility staff had used the translation line when completing risk screening assessments. One of the offenders was bi-lingual and did not require the use of the translation service.</p> <p><b>Conclusion:</b> The auditor finds this facility meets full compliance with this standard.</p>

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Agency Executive Directive #42: Police Contact, Arrest, and Conviction Policy for Current Employees
- Division of Adult Institutions (DAI) Policy and Procedures 309.06.03: Volunteers, Pastoral Visitors, Program Guests, and Interns
- Division of Adult Institutions (DAI) 309.06.03 Volunteer Application
- Agency Human Resources Policy 200.30.507 Reference Checks
- Agency Human Resources Background check procedure
- Agency Human Resources Fingerprint Procedures
- DOC-2430 Contractor Background Check
- DOC-1098D Background Check Authorization Form
- DOC-1098R Candidate Reference Check Form
- DOC-2674 DAI volunteer application (blank)
- DOC-2786 PREA Sexual Abuse and Sexual Harassment in Confinement Training Contractor acknowledgment form
- Sexual abuse and sexual harassment in confinement: A guide for volunteers and contractors (brochure)

Interviews conducted

- Specialized interview with Human Resources Director
- Visiting Coordinator interview

(a) (b) ED 72 Hiring and Promotion Decisions states, "The DOC shall not hire or promote anyone who has engaged in sexual abuse in a confinement facility; has been convicted of engaging or attempting to engage in nonconsensual sexual activity in the community; or has been civilly or administratively adjudicated to have engaged in activity described above. The DOC shall consider any incidents of sexual harassment when determining whether to hire, promote or enlist the services of any employee."

(c) (d) (h) ED 72 states, "Prior to hiring new staff members and enlisting the services of any employee who may have contact with offenders, the DOC shall perform a criminal background records check" and "The DOC shall make its best effort to obtain (and, when requested, provide) reference information from all prior institutional employers on substantiated allegations of sexual abuse or sexual harassment or any resignation during a pending investigation of a sexual abuse allegation." In accordance with ED 72, the agency's Human Resources background check procedure outlines the process HR staff follow when conducting background checks.

(d) DAI 309.06.03 requires the agency to conduct criminal background checks for all volunteers. The policy additionally requires a new background check if the prior review was completed more than one year ago. Any volunteers who have been inactive at all facilities for more than one year shall reapply as new volunteers.

**Pre-onsite:** PREA audit team was required to complete the agency 1098D background check as a contractor in compliance with the standard provision.

(e) ED 72 states, "The DOC shall conduct a criminal background records check every five years for current employees."

(f) (g) ED 72 page five requires all applicants to disclose instances of sexual misconduct and applicants who fail to disclose such information shall be ineligible for hire for the current vacancy and, if applicable, may be grounds for termination.

**Pre-onsite Human Resources Director interview:** The facility's HR Director stated they utilize Portal 100 and LiveScan FBI fingerprints are completed All new hires and staff selected for promotion are required to complete the background check form which includes questions referenced above in provisions (a) and (b) of this standard. HR staff conducts five-year background checks for all facility staff and they will pull monthly reports to identify which staff the five-year background check to be conducted.

**Visting Coordinator:** This position is responsible for conducting background checks for volunteers and contractors following the same background check process as those utilized for staff. Contractors are also required to complete and sign the background release form which includes those outlined above in provisions (a) (b). The facility completes annual background checks for volunteers and contractors.

**On-site review of documentation:** This auditor selected three random contracts medical staff and 21 random facility staff rosters provided before the onsite review. While onsite the auditor met with the HR Director to review staff information for the 24 selected to verify the dates background checks were completed. The HR Director described the process for conducting backgrounds and pulled data up for review. It was learned that the State of Wisconsin has an H retention schedule of six and a half years. While the database referenced the date the background check was completed, HR no longer had a copy of the background authorization check form for some staff.

**Conclusion:** Based upon the available evidence, this auditor finds they meet compliance with this standard.

115.18	<p><b>Upgrades to facilities and technologies</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interview with the Assistant Deputy Secretary</li> <li>• Specialized interview with the Warden</li> </ul> <p>(a) ED 72 states, “When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the DOC shall consider the effect of the design, acquisition, expansion or modification upon the DOC’s ability to protect offenders from sexual abuse.”</p> <p>(b) ED 72 states, “When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the DOC shall consider how such technology may enhance the DOC’s ability to protect offenders from sexual abuse.”</p> <p><b>Pre-on-site interviews:</b> The Deputy Assistant Secretary stated this facility has not had any substantial plant modifications. The facility was approved and was in the process of installing new/updated monitoring technology before installing the equipment the Warden, Security Director, PCM, and other security staff reviewed areas of concern and prioritize areas where blind spots were identified.</p> <p><b>On-site observations:</b> The facility did not have any areas that had been renovated, modified, or expanded. The facility was still in the process of installing new video surveillance. During the physical plant review, the audit team identified cameras and viewed the supervisor’s video monitors including requesting they pull up specific locations.</p> <p><b>Conclusion:</b> The auditor finds the facility meets compliance with this standard.</p>
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**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Agency Law Enforcement Compliance Request
- Agency Victim Services Coordinator Response Checklist (DOC-2767)
- Excerpt from the Agency Healthcare Manual Reference
- MOU between WIDOC and Bolton Refuge House Inc. Jackson County Outreach
- Support Services Workshop - WIDOC Victim Services Coordinators Agenda
- Agency Victim Accompaniment Guide
- Agency Victim Services Coordinator Sexual Abuse and Sexual Harassment Reference Guide

Interviews conducted

- Specialized interview with PREA Compliance Manager
- Interview with random staff
- Specialized Sexual Assault Nurse Examiner (Gunderson Health)
- Specialized interview with a community victim advocate (Bolton Refuge House)
- Specialized interview with facility investigator
- Facility Victim Coordinator

(a) (b) ED #72 states "The DOC shall follow a uniform evidence protocol that maximizes the potential for preserving and/or collecting usable physical evidence for administrative proceedings and criminal prosecutions. Such protocol shall be developmentally appropriate for youth, where applicable, and adapted from a comprehensive and authoritative protocol developed after 2011."

(c) ED #72 states, "The DOC's medical response shall include the timely dissemination of information and access to emergency contraception and sexually transmitted infections prophylaxis [§115.82(c), §115.382(c)]. Further, all victims shall be offered access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Nurse Examiners (SANEs) where possible. If SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The facility shall document its efforts to provide SANEs

(d) (e) (h) ED #72 states, The facility shall attempt to make available to the victim an advocate from a local sexual assault service provider to accompany and support the victim through the forensic medical examination process and investigatory interviews. As requested by the victim, such a person shall also provide emotional support, crisis intervention, information, and referrals. If a sexual assault service provider is not available to provide victim advocate services, the DOC shall make available a member who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues.

(f) When the DOC is not responsible for investigating allegations of sexual abuse, the DOC shall request that the investigating law enforcement agency follow the requirements outlined in §115.21(a-e)

**Pre onsite:** Reviewing ED #72 the appointing authority or designee at each facility shall assign the facility-based Victim Services Coordinator. The staff member who is designated with this responsibility will assist in connecting victims of sexual abuse in confinement to outside support services. This staff member is not responsible for acting in the capacity of a victim advocate. The auditor interviewed the facility Victim Coordinator and described the process she follows after a report of sexual abuse is received and will meet with the victim to provide victim advocate information and services they provide. As requested they will coordinate meetings between the victim-offender and victim advocate.

**Sexual Assault Nurse Examiner (SANE):** The auditor contracted Black River Memorial Hospital and was referred to Gunderson Health in La Cross. This auditor contacted Gunderson Health and spoke to the Charge Nurse in the Emergency Room. The hospital has ten certified Sexual Assault Nurse Examiners who are available to conduct sexual assault forensic

exams. As requested by the victim, a victim advocate from Bolton Refuge House will respond to support the victim during the exam. In the event, that Gunderson Health Emergency Room does not have a SANE on duty or available they would send the victim to Mayo La Cross or O'Claire Hospital.

**Community Victim Advocate:** The auditor interviewed the victim advocate from Bolton Refuge House. The victim advocate is fairly new to this position and is the primary advocate for incarcerated victims. She stated that as requested by the victim, she would respond to the hospital to provide emotional support during the exam and investigator interviews.

**PCM interview:** The PCM stated should an offender victim of sexual abuse requests a victim advocate to be present during the SAFE they would contact the community victim advocate.

**Agency and Facility Investigator interviews:** The agency administrative investigator would be the primary investigator for allegations of staff on offender and offender on offender sexual abuse. Case by case the offender on offender sexual abuse administrative investigation would be assigned to the facility investigator. If the victim-offender requested a victim advocate they would attempt to coordinate the community victim advocate. The criminal investigation would be conducted by local law enforcement. Local law enforcement would provide the agency with the criminal investigation case number to follow up on the status of the investigation.

On-site: During this audit time frame, the facility had not received a report of sexual abuse requiring a sexual assault forensic exam.

**Random staff:** Audit team interviewed random staff who stated they have the knowledge and an understanding of how to secure a crime scene and preserve physical evidence. Local law enforcement is contacted to process the crime scene.

**Conclusion:** The auditor finds the facility meets compliance with this standard.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>.Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 303.00.05 Law Enforcement referrals</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 306.00.15 Inmate Investigations (restricted)</li> <li>• WI Department of Corrections Human Resources Policy 200.30.304</li> <li>• Screenshot of the agency website</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interview with the Assistant Deputy Secretary</li> <li>• Specialized interview with Facility investigator</li> <li>• Interview with the PREA Director</li> </ul> <p>(a) (d) ED 72 states, “The DOC shall ensure that an investigation is completed for all allegations of sexual abuse and sexual harassment, including those received from third-parties and anonymous sources. DOC shall maintain a policy(ies) that governs the conduct of such investigation.”</p> <p>(b) (c) ED 72 requires all allegations of sexual abuse or sexual harassment that involve potentially criminal behavior shall be referred for investigation to local law enforcement. All referrals to law enforcement shall be documented. The policy describing such referrals, in addition to the investigative responsibilities of the DOC and local law enforcement, shall be published and maintained on the DOC’s website.” In accordance with provision (b) and ED 72, DAI 306.00.15 and policy 200.030.304 requires all reports of sexual abuse and sexual harassment that may involve criminal behavior to be reported to law enforcement by the PCM or designee.</p> <ul style="list-style-type: none"> <li>• On March 25, 2022, this auditor reviewed and verified the agency’s public website DOC Prison Rape Elimination Act (wi.gov) includes ED 72 for public view.</li> </ul> <p>(d) In accordance with ED 72 the agency has policies governing the conduct of these investigations. DAI 303.00.05 under LE referrals requires the Warden or designee to refer allegations of sexual abuse or sexual harassment as defined in ED 72 that involve criminal behavior (WI Sexual Assault Statute 940.025)</p> <p><b>Pre-onsite:</b> In addition to the agency website screenshot the auditor reviewed the agency’s public website <a href="#">ExecutiveDirective72.pdf (wi.gov)</a></p> <p><b>Assistant Deputy Secretary:</b> All allegations of sexual abuse and sexual harassment will be investigated and procedures have been implemented to ensure investigations are prompt.</p> <p><b>The Agency and Facility Investigator:</b> On a case-by-case basis offender on offender sexual abuse administrative investigation will be assigned to the facility investigator. Criminal investigations are conducted by local law enforcement who will provide the agency with the criminal investigation case number to follow up on the status of the investigation.</p> <p><b>PREA Director:</b> The agency policy requires all allegations of sexual abuse or sexual harassment are referred to local law enforcement if the allegation involves potential criminal behavior. The agency administrative investigator is responsible for conducting the administrative investigation.</p> <p>During this audit time frame, the facility received one allegation of an offender on offender sexual abuse not meeting criminal behavior. The administrative investigation was reviewed under standard 115.71.</p> <p><b>Conclusion:</b> The auditor finds the facility meets compliance with this standard.</p>

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

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Agency Training Pre-Service Curriculum
- Agency Training Module All-Staff (screenshot)
- Agency Training Module (refresher 2017, 2019, 2021)
- Agency Newsletter for years employees do not receive staff refresher
- WCCS Staff Orientation Checklist
- Agency DOC form 1558 Employment Statement to Acknowledgment
- PREA Facility Staff Training Report

Interviews conducted

- Random staff interviews

(a-d)) ED 72 states “The DOC shall train all new staff members on the department’s zero-tolerance policy for sexual abuse and sexual harassment. All staff members shall receive training every two years; in years in which a staff member does not receive such refresher training, the DOC shall provide refresher information on current sexual abuse and sexual harassment policies. The training shall include but is not limited to the subparts listed below. Each staff member shall acknowledge and certify to the DOC, through signature or electronic verification, that they understand the training they received.”

1. The DOC’s zero-tolerance policy for sexual abuse and sexual harassment;
2. How to fulfill staff responsibilities under the DOC sexual abuse and sexual harassment prevention, detection, reporting, and response policies, and procedures;
3. Offenders’ right to be free from sexual abuse and sexual harassment;
4. The right of offenders 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 offenders;
9. How to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming offenders;
10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities;
11. Relevant laws regarding the applicable age of consent;
12. Instruction tailored to male and female offenders; and
13. Instruction specific to the unique needs and attributes of juvenile

In years employees do not receive refresher training the agency newsletters include a PREA Page. The newsletters cover multiple topics from updated policy and procedures, quick links to resources, and guides that provide updates to staff on policy and procedure revisions, statistics on reporting incidents, investigations, the progress of National PREA audits, etc.

**Pre-onsite:** In conjunction with standard 115.17, this auditor selected a random sampling of staff from the roster provided. The auditor reviewed the training curricula and information sent to staff during years they do not attend PREA refresher. To support the staff training requirement, the auditor reviewed the computer-based electronic verification report reflecting the date staff completed training. Due to the pandemic causing a significant impact on the facility operations, they allowed staff to complete PREA refresher up to the end of February 2022. The auditor requested and received follow-up information for a select few who completed a refresher in 2022.

**Onsite interviews:** Audit team conducted interviews with selected random security and non-security staff. Staff affirmed they have received and understood the PREA training provided. In conjunction with standard 115.15 (f), the security staff was asked to describe pat searches of Transgender and Intersex offenders. The audit team asked staff how they communicate with all offenders, especially those who identify as Transgender. Staff stated they use the offender’s last name, and use gender-neutral terms some said they would ask Transgender offenders their preferred pronoun.

**Conclusion:** This auditor finds the facility meets compliance with this standard and standard provisions

115.32	<b>Volunteer and contractor training</b>
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Division of Adult Institution (DAI) 309.06.03 Volunteers, Pastoral Visitors, Program Guests and Interns
- Agency Volunteer Orientation
- A Guide for Volunteers and Contractors Brochure
- DAI Volunteer, Pastoral Visitor, Program Guest & Intern Orientation
- Agency Contractor & Volunteer Training
- Volunteer Manual
- Agency Contractor Acknowledgment
- Screenshot of agency documentation process
- Agency DOC 2809 form – Volunteer Orientation Roster Attendance Record

Interviews conducted

- Specialized contractor

(a) ED 72 states, “All volunteers and contractors who have contact with offenders shall be trained, in accordance with the type of service and level of contact they have with offenders, on the DOC’s zero-tolerance policy as it relates to sexual abuse and sexual harassment. They shall, additionally, be trained on their responsibilities under the DOC’s sexual abuse and sexual harassment prevention, detection and response policies, and procedures. Each volunteer or contractor shall acknowledge and certify to the DOC, through signature or electronic verification, that they understand the training they received.” In accordance with ED 72 DAI 309.06.03 further outlines volunteer and contractor training procedures.

(b) DAI 309.06.03 states, “Volunteers are required to complete an orientation prior to facility entry and inmate interaction, based upon the type, frequency, and level of inmate contact. The following are minimum expectations for all DAI volunteers:

1. Full orientation shall be required for any volunteer entering any DAI facility (one or any combination of sites) five or more times per year.
2. Brief orientation shall be required for any volunteer entering any facility four or fewer times per year.
3. Persons changing status to increase facility entry to five or more times per year shall be required to complete the full orientation.

Warden/designee may:

1. Require full orientation on a case-by-case basis at any time;
2. Limit volunteer one-to-one contact with inmates
3. Provide direct/line-of-sight staff supervision.

(c) DAI 309.06.03 requires volunteers to sign DOC2809 to verify attendance for all brief and full orientations and annual orientation updates. Facilities are required to maintain a copy of the acknowledgment form and sent the original paper form to the facility PREA Compliance Manager.

**Pre-onsite:** The auditor interviewed the contract medical employee who stated that they completed the PREA training. The employees were able to describe training to include the first responder duties related to standard 115.35 (specialized training).

**On-site review:** During the onsite review the audit team interviewed one religious volunteer and one contract medical employee. Both were able to support they had received training and actions they would take if an offender reported they were a victim of sexual abuse or harassment. The contract medical staff had more knowledge of the response and actions medical staff would take when an allegation of sexual abuse has been reported.

**Conclusion:** This auditor finds the facility meets compliance with this standard

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Division of Adult Institutions (DAI) 410.20.01 Inmate PREA Education
- Agency Offender Education Video Reference
- Offender ID Card (PREA) reporting options on the back
- Agency Offender PREA Education Facilitator Guide
- Agency Offender Handbook (English & Spanish)
- Agency Handbook Addendum
- Inmate Education Directive from the agency PREA Director
- Offender education/orientation documentation reviewed

Interviews conducted

- Specialized staff interview
- Random and specialized offender interviews

(a) ED 72 states "At intake, offenders shall receive information detailing the DOC's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents or suspicions." In accordance with ED 72, DAI 410.20.01 procedure outlines general intake guidelines for ensuring inmates receive PREA education during intake explaining the agency's "zero tolerance" policy regarding sexual abuse and sexual harassment, including retaliation reporting, methods to make a report, and the agency response.

DAI 410.20.01 states, "At the intake facility, inmates shall acknowledge they received POC-0041, POC-0041B, and comprehensive education by signing the Acknowledgement of PREA Education offender standard form in WICS using an electronic signature pad."

1. POC-0041 – Sexual Abuse and Sexual Harassment Prevention and Intervention: A Resource for Inmates
2. POC-0041B – Sexual Abuse in Confinement

This auditor reviewed the Agency Inmate Handbook which included and was not limited to:

1. The agency's "zero tolerance" policy,
2. Methods and how to report,
3. Definitions of sexual abuse, sexual harassment, retaliation, confidentiality, consent,
4. Tools to help keep safe (prevention)
5. Protection, support, and recovery for victims of sexual abuse
6. Investigatory process after a reporting sexual abuse

In addition to the offender handbook, the PREA reporting options are printed on the back of the offender ID card

(b) ED 72 states "Within 30 days of intake at adult facilities and within 10 days at juvenile facilities, the facility shall provide a comprehensive education to offenders either in person or through video regarding:

1. The DOC's zero-tolerance policy, including offenders' right to be free of sexual abuse, sexual harassment, and disclosure-related retaliation; and
2. The DOC's policies and procedures for responding to such incidents

In accordance with ED 72, DAI 410.20.01 general intake guidelines state "upon transfer to a facility, each inmate shall receive POC-0041 and POC-0041B complete with local sexual assault service provider contact information. And within 30 days of intake, each inmate shall be provided comprehensive PREA education, which includes:

- Viewing the video “Sexual Abuse and Sexual Harassment Prevention and Intervention.
- Following the video a staff-facilitated discussion shall occur and include:
  - The facility’s cross-gender announcement procedure.
  - Local sexual assault service provider contact information.
  - Notable facility-specific PREA procedures.
  - Facilities shall use POC-0041C to guide their comprehensive education

The auditor reviewed the POC-0041C Inmate PREA Education Facilitator Guide as referenced in DAI 410.20.01 Inmate PREA Education. The guide may be modified to suit each facility.

(c) WIDOC began implementing PREA in 2015 and completed PREA inmate education to all inmates who were currently incarcerated and began providing inmate PREA education to all inmates during the intake process.

ED 72 states “Upon transfer to another facility, offenders shall receive education specific to the facility’s sexual abuse, sexual harassment and report-related retaliation policies and procedures to the extent they differ from the previous facility.” In accordance with ED 72, DAI 410.20.01 general transfer guidelines state “upon transfer to a facility, each inmate shall receive POC-0041 and POC-0041B complete with local sexual assault service provider contact information. Within 30 days of intake, each inmate shall be provided comprehensive PREA education, which includes, at minimum, a staff-facilitated discussion of:

1. The agency’s zero tolerance for sexual abuse, sexual harassment, and report-related retaliation.
2. Sexual abuse and sexual harassment reporting options.
3. The facility’s cross-gender announcement procedure.
4. Local sexual assault service provider contact information.
5. The facility’s response procedure.
6. Notable facility-specific PREA procedures.

The auditor reviewed the POC-0041C Inmate PREA Education Facilitator Guide as referenced in DAI 410.20.01 Inmate PREA Education. The guide may be modified to suit each facility.

(d) ED 72 states “Offenders with disabilities or who have limited English proficiency shall have an equal opportunity to participate in or benefit from all aspects of the DOC’s efforts to prevent, detect and respond to sexual abuse and sexual harassment. This includes providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, in addition to the provision of offender education in formats accessible to all. Written materials shall be provided in formats or methods that ensure effective communication with offenders with disabilities.” In accordance with ED 72, DAI 410.20.01 states, “Inmates with disabilities or who have limited English proficiency shall be provided with access to interpreters or alternate formats to assist them with comprehension of the information in accordance with DAI Policies 300.00.35 and 300.00.61. Alternate formats of education may include:

- POC-0041 Audio recording (obtain from PREA Office)
- POC-0041 Braille translation (obtain from PREA Office)
- POC-0041S, POC-0041BS Spanish translation
- Spanish and subtitled versions of the PREA education video
- Special education teachers or similar to facilitate education

When a facility uses alternate formats or resources to educate inmates with disabilities or for those who are limited English proficient, the facilitator shall at minimum document such provision in a DOC-2466 and denote “PREA” and “Informational”.

(e) ED 72 states “Each facility shall maintain documentation of offender participation in these education sessions.” DAI 410.20.01 states, “This acknowledgment shall be completed at the receiving site in WICS each time an inmate transfers.”

(f) ED 72 states “Each facility shall ensure that key information is continuously and readily available or visible to offenders through posters, handbooks or other written formats.” In accordance with ED 72, DAI 410.20.01 page 3. IV. Accessibility of PREA Education and Information requires Information about reporting and receiving support shall be continuously and readily available or visible to inmates through posters, handbooks, and other written formats. Facilities shall have a copy of POC-0041 in the library and if equipped, make an effort to regularly play the video, “Sexual Abuse and Sexual Harassment Prevention and Intervention” on the institution channel.

**Onsite interview with staff who conducts offender education:** The audit support team interviewed the staff who complete the PREA offender education and described the process and was aware of how to access the language line for translation services.

**Onsite offender interviews and document review:** The audit team observed PREA posters throughout the facility and

offenders stated information is on their ID cards. The audit team watched the offender's PREA education video while onsite at another facility audit and includes options in English, Spanish, and closed-captioned. The audit team conducted random and specialized offender interviews with a majority of the offenders stating that they watched the PREA video and understood the information provided. After offender interviews were completed, the audit team utilized the offender file review guide for the offenders who had been selected for an interview and identified the majority of the offender education electronic acknowledgments had not been signed by the staff member. Two of the LEP offenders interviewed were bi-lingual and understood English however, two required some level of translation and received acknowledgment in English. The forms did not include information on how the offender knew what they were signing. i.e. translation services utilized

The auditor determined the facility was not meeting substantial compliance with provisions (d) and (e) of this standard and agency policy.

**Corrective Action:** Provisions (d) – The auditor requested monthly offender education reports and requested the facility notify the auditor if they receive an offender who was limited English proficient (LEP) and to provide information on how the education was delivered and documented. Provision (e) intertwined with provision (d). **Follow up:** In June 2022 the auditor began receiving the monthly offender admission education reports which included the dates the electronic tablet was signed acknowledging offender education was completed. The auditor communicated with the facility to identify whether they had received any offenders who were LEP and was informed each time they had not received an LEP offender. The facility maintained substantial compliance during the monitoring time frame and found that COVID had still had a minor impact on facility operations with offenders under quarantine.

**Conclusion:** The auditor finds the facility meets compliance with this standard.

115.34	<b>Specialized training: Investigations</b>
	<p data-bbox="242 145 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 208 451 237"><b>Auditor Discussion</b></p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 427 743 456"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 506 1442 633" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Agency directory of staff who completed investigator training</li> <li>• Agency investigation training curricula</li> </ul> <p data-bbox="242 663 456 692"><u>Interviews conducted</u></p> <ul data-bbox="284 741 708 804" style="list-style-type: none"> <li>• Office of Internal Affairs (IA) Investigator Facility Investigator</li> </ul> <p data-bbox="242 833 1490 960">(a - d) ED 72 states “Staff who investigate incidents of sexual abuse and sexual harassment shall receive specialized training on techniques for interviewing sexual abuse victims, proper use of Miranda, Garrity, and Oddsen warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral. The DOC shall maintain documentation of training completion</p> <p data-bbox="242 990 1490 1151"><b>Pre-onsite document review:</b> The lead auditor reviewed the agency investigator training directory and included all staff who have received training on how to investigate reports of sexual abuse and sexual harassment in confinement. The auditor verified who was authorized to conduct investigations at this facility to ensure any investigations (if applicable) were completed by staff who had attended the specialized training. Additionally, this information supported document review utilizing the PRC PREA Audit document review – Employee &amp; Investigations guide (if applicable)</p> <p data-bbox="242 1180 1490 1644"><b>Pre-onsite interviews:</b> The auditor interviewed one IA and one facility investigator and asked them to describe the investigation training received and the process they follow from the time they are assigned the investigation, including what evidence they collect and rely upon, summarizing interviews with the victim, suspect, and witness (if any). The investigators were able to provide knowledge and understanding of the training received when describing the investigatory process. Both investigators had knowledge of the Miranda Warning, however, they are not criminal investigators and do not have the legal authority to read Miranda Rights to offenders or staff. Staff conducting investigations are fact finders, and the final resolution is determined by the appointing authority and sent to the PREA Office for final review. While they do not determine the resolution/finding, they were able to define Substantiated, Unsubstantiated and Unfounded. Generally, when an incident of sexual abuse or sexual harassment has been reported the investigation will be assigned the same day or the next business day depending on the time and day of the report. Should the PREA Office identify elements not meeting the investigatory process for a thorough investigation, the investigation will be referred back to the investigator for corrections. Generally, when an incident of sexual abuse or sexual harassment has been reported the investigation will be assigned the same day or the next business day depending on the time and day of the report. Should the PREA Office identify elements not meeting the investigatory process for a thorough investigation, the investigation will be referred back to the investigator for corrections.</p> <p data-bbox="242 1673 1436 1736"><b>Conclusion:</b> Reviewing available evidence, documentation, and interviews with staff, the auditor finds the facility meets compliance with this standard.</p>

115.35	<b>Specialized training: Medical and mental health care</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Agency Healthcare Module (screenshots)</li> <li>• Health Care Training Completed Staff Roster</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Health Services Unit (HSU) Staff</li> <li>• Psychological Services Unit (PSU) Staff</li> </ul> <p>(a) ED 72 states, “All medical and mental health care practitioners who work regularly in a DOC facility(ies) shall be trained on the subparts below.</p> <ol style="list-style-type: none"> <li>1. How to detect and assess signs of sexual abuse and sexual harassment;</li> <li>2. How to preserve physical evidence of sexual abuse;</li> <li>3. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and</li> <li>4. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment</li> </ol> <p>(b) This provision is not applicable. All sexual abuse victims are transported to a community hospital</p> <p>(c-d) Ed 72 states “The DOC shall maintain documentation that such training has been received”</p> <p><b>Pre-on-site Medical and Behavioral Health staff interviews:</b> The auditor conducted an interview with Health Services Unit and Behavioral Health Unit facility staff. Both affirmed they had completed PREA training and additional specialized training and were able to describe the training received. They were able to describe the training received and how they would respond to a reported incident of sexual abuse.</p> <p><b>Pre-on-site document review:</b> The auditor reviewed the screenshots of the agency's computer-based specialized training for healthcare staff and the facility training roster. The computer-based training objectives addressed the following areas.</p> <ul style="list-style-type: none"> <li>• First Responder,</li> <li>• Initial Assessment,</li> <li>• Reporting, Preserve Evidence,</li> <li>• Provider Care, and Response.</li> <li>• Upon completion of the course, the staff is required to take a quiz with a passing score of 80%.</li> </ul> <p><b>Onsite review:</b> The auditor interviewed a contract medical employee who stated they receive staff PREA training every other year and complete refresher courses. They also were able to describe training received and was consistent with the specialized Healthcare training course.</p> <p><b>Conclusion:</b> This auditor finds the facility meets compliance with this standard.</p>

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Division of Adult Institutions (DAI) Policy and Procedures 410.30.01 (PREA) Screening for Risk of Sexual Abusivcness and Sexual Victimization.
- Agency Risk Screening Directive (3/2016)
- Agency Wisconsin Integrated Corrections System (WICS) User Guides A, B, C, and D (confidential)
- DOC-2781B PREA Screening Tool – Adult Male Facility
- Onsite review of offender information

Interviews conducted

- Specialized staff interviews
- Random and Specialized Offender interviews
- Interview with the PREA Director

(a-e) ED 72 states “Offenders shall be assessed during an initial screening within 72 hours of arrival at the facility, and again upon transfer to another facility, for risk of being sexually abused by other offenders or sexually abusive towards other offenders. The objective screening instrument shall include, at minimum, the following criteria:

1. The presence of a mental, physical or developmental disability;
2. Level of emotional and cognitive development (juveniles facilities only)
3. Age;
4. Physical build;
5. Previous incarcerations;
6. Exclusively nonviolent criminal history;
7. Prior convictions for sex offenses against an adult or child;
8. Is, or is perceived to be, gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
9. Previously experienced sexual victimization;
10. Prior acts of sexual abuse, prior convictions for violent offenses, and/or history of prior institutional violence or sexual abuse; and
11. Offender’s perception of vulnerability

The agency policy includes risk screening factors for juvenile settings as referenced above( #2). This risk factor is not applicable for this facility audit as it is an adult confinement facility.

In accordance with ED 72, DAI 410.30.01 outlines definitions, forms, and procedures for conducting the risk screening process. Auditor reviewed DOC-2781-B, and the WICS user guide (confidential), which provides step-by-step instructions for staff who conduct inmate PREA risk screening assessments.

(f) ED 72 states “In addition to the initial screening, within 30 days of arrival, the facility shall reassess the offender’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the initial screening.”

(g) ED 72 requires an offender’s risk level to be reassessed when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the offender’s risk of sexual victimization or abusiveness.” In accordance with ED 72, DAI 410.30.01 page 4. Screening (c) outlines requirements for when an inmate will be reassessed and referred for a follow-up rescreening based on new information.

(h) ED 72 states “Offenders may not be disciplined for refusing to answer or for failing to disclose information in regards to the assessment questions.”

(i) ED 72 states “Appropriate controls shall be placed on the dissemination of information gathered from the initial and follow-up screenings to ensure that sensitive information is not exploited to the offender’s detriment by employees or other offenders.” In accordance with ED 72, DAI 410.30.01 the WICS user guide (confidential), and use of the risk screening database requires staff to use their unique ID number and includes a warning section outlining confidentiality requirements.

**Pre-onsite PREA Director and PCM Interview:** Each facility designates the staff who can view risk screening information and is based on their scope of work and the need and right to have access. At the initiation of the risk screening process, there is a warning on the sensitive information, confidentiality, and actions that will be taken if there is a breach/release of information. The Agency PREA Director has the authority to review all staff authorized to use WICS and remove access if necessary.

**Pre-onsite document review:** Provision (a)(f) The facility was not meeting substantial compliance. Both 72-hour (intake) and 30-day follow-up risk screening assessments were not completed timely during the 12-month time frame. While some improvement was seen within a few months of the on-site audit, there was not a level that supported consistent improvement and maintaining compliance.

**Onsite:** Audit interviewed the staff member who completed the 72-hour intake and 30-day follow-up risk screening assessments and observed the offender intake process by sitting with the staff member while they completed an offender intake and 30-day follow-up risk screening.

**Offender Interviews:** The majority of offenders selected to be interviewed stated they were asked the “PREA” questions when they arrived. However, offenders stated that they had not been asked risk screening questions again during the 30-day follow-up for an affirmative response. This was further affirmed by the interview with staff who conduct risk screening assessments who stated they do not ask each question again and only ask if there were any changes.

**Document review:** The audit support staff reviewed risk screening and education information for all offenders who were interviewed. The information corroborated the pre-onsite review that the risk screening assessment had not been completed within the required time frames.

**Out brief:** The audit team discussed the issues identified related to provision (f) 2nd issue of this standard and the requirement for staff to ask questions again for an affirmative response and requested to discuss further after returning from the onsite audit. **Post onsite:** Provision (f) After returning from the on-site review, the auditor referred back to the WICS User Guide (section D) for staff conducting the 30-day follow-up related to provision (f), which notated “A response to each question is mandatory.”

**Corrective action:** The facility was placed into corrective action for the following standard provisions

1. Provision (a) (f) The agency PREA office sent the facility monthly admission report. This report is generated from the agency database and includes the date of intake and the dates risk screening assessment are completed. **Follow-up:** The auditor observed some improvements from the time of the onsite up to the date the first admission log was received. After the first admission report was received the auditor found the facility made substantial improvements and continued to maintain substantial compliance over the corrective action time frame.
2. Provision (f) – 2nd issue: This provision was placed into short-term corrective action to provide a reminder/refresher to staff that conduct the 30-day risk screening follow-up and the requirement to ask questions again for an affirmative response. **Follow-up:** On 7/21/2022 auditor received an email from the PREA Director and included the email string from the PCM to staff and included the instruction guide for completing the PREA screening tool and the WICS 30-day follow-up User guide Section D.

**Conclusion:** After the corrective action time frame, the auditor finds the facility meets compliance with this standard.

115.42	<b>Use of screening information</b>
	<p data-bbox="240 145 740 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="240 208 451 237"><b>Auditor Discussion</b></p> <p data-bbox="240 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 427 743 456"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 506 1442 969" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures (PREA) 410.30.01 Screening for Risk of Sexual Abusivcness and Sexual Victimization.</li> <li>• Division of Adult Institutions (DAI) 306.00.72 (Security) Screening for Risk of Sexual Abusivcness and Sexual Victimization.</li> <li>• Division of Adult Institutions (DAI) 306.00.23 (Security) (Restricted) Special Placement Needs of Inmates</li> <li>• Division of Adult Institution (DAI) 500.70.27 Transgender Management and Care (4/4/22)</li> <li>• Division of Adult Institutions (DAI) policy and procedures 325.00.04 Temporary Release Under Supervision</li> <li>• Agency Risk Screening Directive (3/2016)</li> <li>• Agency Wisconsin Integrated Corrections System (WICS) User Guide</li> <li>• DOC-2781B PREA Screening Tool – Adult Male Facility</li> <li>• DOC-2570 Inmate Offsite Review</li> <li>• Revised Agency Inmate Classification Report and Process</li> </ul> <p data-bbox="240 999 456 1028"><u>Interviews conducted</u></p> <ul data-bbox="284 1077 892 1240" style="list-style-type: none"> <li>• Specialized interview with the PREA Director</li> <li>• Specialized interview with the PREA Compliance Manager</li> <li>• Specialized interviews with staff</li> <li>• Specialized interviews with Transgender offenders</li> <li>• Specialized interviews with Gay and Bi-sexual offenders</li> </ul> <p data-bbox="240 1270 1493 1397">(a) ED 72 states “Information obtained from the initial or follow-up screening shall inform housing, bed, work, education and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. For the purposes of education, programming, work, and recreation activities, line-of-sight monitoring by DOC staff is sufficient to maintain separation.”</p> <p data-bbox="240 1426 1493 1787">Auditor reviewed DOC-2781-B, and the WICS user guide (confidential), which provides step-by-step instructions for staff who conduct inmate PREA risk screening assessments. In accordance with ED 72, DAI 410.30.01 and DAI 306.00.72 outline the use of screening information. In making housing and bed assignments, there is the expectation to keep inmates who score as a high risk of being sexually victimized separate from those scoring as a high risk of being sexually abusive. Depending on the type of housing unit those placed in a dormitory setting who are at risk of victimization or risk of abusiveness, and who cannot otherwise be separated by housing unit, shall be bunked at opposite sides of the dormitory. Those at risk of victimization shall be bunked in areas more likely to receive additional staff supervision. For work, education, and program assignments, the expectation is to supervise or separate inmates who score as a high risk of being sexually victimized from those scoring as a high risk of being sexually abused. DAI 325.00.04 requires the Warden/Superintendent/Designee to screen inmates to determine whether they are appropriate for consideration as authorized operators of State-owned vehicles. The policy outlines the minimum considerations.</p> <p data-bbox="240 1816 1477 1879">(b) ED 72 states “Individualized placement determinations shall be made for each offender.” In accordance with ED 72, DAI 410.30.01 requires facilities to ensure individualized determinations are made for each inmate.</p> <p data-bbox="240 1908 1493 2072">(c) ED 72 states “When making facility, cell/unit housing and programmatic assignments for transgender or intersex offenders the DOC shall consider on a case-by-case basis whether a placement would ensure the offender’s health and safety and whether the placement would present management or security problems.” In accordance with ED 72, DAI 500.70.27 was revised effective April 4, 2022, and outlines procedures for completing case-by-case reviews. DAI 500.70.27 defines and outlines procedures that include but are not limited to:</p> <ul data-bbox="284 2123 892 2152" style="list-style-type: none"> <li>• Accommodations for Transgender and Intersex Offenders,</li> </ul>

- approved sites (facilities)
- Placement Review
- Operations at a Receiving Facility Consistent with Gender Identity
- Removal from Receiving Facility Consistent with Gender Identity
- Medical and Psychological Treatment for Gender Dysphoria (GD)
- Transfer to Work Release Facilities
- Release Planning
- Transgender Committee
- Transgender Housing Committee, and
- Committee Roles

(d) ED 72 states “Placement and programming assignments for each transgender or intersex offender shall be reassessed at least twice each year to review any threats to the safety experienced by the offender.” November 2021 and prior to the release of DAI 500.70.27 designated staff were informed they will inquire with an identified transgender and intersex individual about their perception of safety in housing and programming assignments. In accordance with ED 72, DAI 500.70.27 states “Placement and programming assignments shall be reassessed at a minimum of every six months in a reclassification hearing and shall include a review of any threats to safety experienced by the PIOC.” “In the reclassification pre-hearing, the assigned social worker/treatment specialist shall inquire about the PIOC’s perception of safety in housing and programming assignments and document the response in the Reclassification Report (if response reflects significant safety risk, notify security supervisor)”

(e) ED 72 states “in addition to serious consideration of the offender’s own views with respect to their own safety.”

(f) ED 72 states “Transgender and intersex offenders shall be given the opportunity to shower separately from other offenders.” In accordance with ED 72, DAI 410.30.01 and DAI 500.70.27 include facilities that will give Transgender and intersex offenders the opportunity to shower separately from other offenders. Intake/Reception facilities require that the initial showering be separate from other PIOC and reviewed on a case-by-case basis.”

(g) ED 72 states “Lesbian, gay, bisexual, transgender or intersex offenders shall not be placed in dedicated facilities, wings or units solely on the basis of such identification or status.”

**Pre-on-site interviews:** During interviews with the Assistant Deputy Secretary and PREA Director, this lead auditor discussed the updated agency policy DAI 500.70.27, Transgender Management and Care. Both are well informed and described the process the agency and facilities follow when a Transgender Offender requests to be housed in a facility they identify vs their gender assigned at birth. The Secretary will review all information that is provided and will make the final determination on whether to approve or deny the request. A denial by the Secretary will not be based on the gender assigned at birth.

**Facility PCM:** The staff member assigned as the PCM was new to this position and was still learning and not fully familiar with the policy for case-by-case reviews when Transgender Offenders request to transfer to a facility that they identify, not by gender assigned at birth. He immediately took down notes and stated he would contact the Behavioral Health supervisor and get back to me. He followed up and provided information on the new policy and provided the Behavioral Health staff contact information. The PCM is aware Transgender offenders are to be seen every six months and they meet with transgender offenders to coordinate private shower times. The facility does not house gay, bisexual, transgender, or intersex offenders in dedicated wings nor do they have any consent decrees or legal judgments.

**On-site interviews:** Staff who completed risk screening assessments: This interview intertwines with and is a continuation of standard 115.41. The staff member who conducts the risk screening assessments will not house offenders who are assessed as a high risk of victimization (ROV) with those assessed as high risk of aggressiveness (ROA).

Specialized interviews were conducted with Gay, bi-sexual and Transgender offenders. At the time of the onsite audit, the agency had just released DAI 500.70.27 Transgender Management and Care policy and procedure. One Transfemale offender was aware of the new policy and had already expressed her desire to transfer to the women’s facility. The facility was still in the process of reviewing her request and was not available for the auditor to review. The agency will issue gender-affirming items to Transgender Offenders and they are also able to place canteen orders for gender-affirming items.

**Conclusion:** The auditor finds the facility meets compliance with this standard.

115.43	<b>Protective Custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 306.05.01 Protective Confinement</li> <li>• Division of Adult Institutions (DAI) 306.00.72 (Security) Screening for Risk of Sexual Abusivicness and Sexual Victimization.</li> <li>• DOC-30 Inmate in Restrictive Housing</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interview with the Warden</li> <li>• Staff who work in restrictive housing</li> </ul> <p>(a) ED 72 states “Offenders at high risk for sexual victimization shall not be separated from the general population unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If an assessment cannot be conducted immediately, the facility may separate the offender involuntarily from the general population for less than 24 hours while completing the assessment.” In accordance with ED 72, DAI 306.0072 states “If an assessment cannot be conducted immediately, the facility may separate the inmate involuntarily from the general population for less than 24 hours while completing the assessment.”</p> <p>(b) ED 72 states “Offenders separated from the general population for this purpose shall have access to programs, privileges, education or work opportunities to the extent possible. If the facility restricts access to programs, privileges, education or work opportunities the facility shall document the opportunities limited, the reason for such limitations, and the duration of the limitation.”</p> <p>(c) ED 72 states “Involuntary separation from the general population shall only be until alternative means of separation from likely abusers can be arranged and shall not ordinarily exceed 30 calendar days” In accordance with ED 72, DAI 306.00.72 states “Involuntary separation from the general population shall only be until alternative means of separation from likely abusers can be arranged and shall not ordinarily exceed 30 calendar days.”</p> <p>(d) ED 72 states “If an offender is involuntarily separated from the general population the facility shall document the basis for the facility’s concern for the offender’s safety and the reason an alternate placement cannot be arranged.”</p> <p>(e) ED 72 states “Every 30 days, the facility shall review the offender’s circumstances to determine whether there is a continuing need for separation from the general population and document accordingly.” In accordance with ED 72, DAI 306.05.01 and DAI 306.0072 require the facility to ensure the inmate’s protective confinement placement is reviewed every 30 days to determine if placement remains necessary.</p> <p><b>Warden pre-onsite interview:</b> The facility has not placed any victim offenders of sexual abuse or those who expressed imminent fear of sexual abuse in involuntary restrictive housing. If a victim is placed in restrictive housing it would be less than 24 hours and the facility would document the reason for the short-term placement until an alternative placement can be arranged.</p> <p><b>On-site review:</b> The auditor interviewed staff who work in restrictive housing and they have not placed any offender victims of sexual abuse or offenders who expressed imminent fear of sexual abuse in restrictive housing. If offenders were placed into the restrictive housing unit they would make every effort not to restrict them from access to programs, privileges, education, and/or work opportunities. If there were any restrictions staff would be documented the reason in WICS.</p> <p><b>Conclusion:</b> Based on the relevant information available, interviews conducted and onsite observations, the auditor finds the facility meets compliance with this standard</p>

115.51	<b>Inmate reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Agency Inmate Handbook in English and Spanish</li> <li>• Agency PREA Poster (English and Spanish) – Reporting options</li> <li>• PREA Posters in English and Spanish</li> <li>• Agency Third-Party Poster</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interview with the PREA Compliance Manager</li> <li>• Random interviews with staff and offenders</li> </ul> <p>(a) (b) ED 72 states “The DOC shall provide multiple ways for offenders to privately report sexual abuse and sexual harassment, retaliation by other offenders or employees for reporting sexual abuse and sexual harassment, and employee neglect or violation of responsibilities that may have contributed to such incidents. In addition, the DOC shall provide at least one way for offenders to report sexual abuse and sexual harassment to a public or private entity that is not part of the DOC.” In accordance with ED 72, offenders are provided with the inmate handbook as referenced in standard 115.33 which includes reporting options. Offender posters include the option to report outside of WI DOC and do not require the offender to use their unique ID number. This phone option connects the Offender to Capital Police who will provide the report to the Agency PREA Division.</p> <ul style="list-style-type: none"> <li>• The agency does not detain offenders solely for civil immigration purposes.</li> </ul> <p>(c) ED 72 states “Employees shall accept reports made verbally, in writing, anonymously, and from third parties; promptly document any verbal reports.”</p> <p>(d) ED 72 states “The DOC shall provide a method for employees to privately report sexual abuse and sexual harassment of offender.” Auditor reviewed staff training (115.31) which allows for staff to report privately to the PREA Office, and local law enforcement or submit reports electronically via the DOC’s internet site.</p> <p><b>Pre-onsite PCM interview:</b> The PCM stated that offenders can report to an outside agency using the offender’s phone. The facility follows the agency policy and procedures and offenders are able to report using multiple options.</p> <p><b>Onsite interviews:</b> Random staff and random and specialized offender interviews were conducted. Staff and offenders were able to provide different ways offenders and staff could report sexual abuse, sexual harassment, and retaliation. Most of the offenders stated they felt comfortable with the staff and would report to them and understood there were multiple options including the PREA hotline that can be dialed from the offender’s phone.</p> <p><b>On-site review and observations:</b> The audit team observed PREA posters throughout the facility including and not limited to the following locations, housing units, program and work areas, visiting, and Health Services Unit. The lead auditor tested the offender’s phone which provided directions and options the offender can select to report an incident of sexual abuse or sexual harassment. The poster also includes a number that will connect them with the outside victim advocate in conjunction with standard 115.53. All the options referenced on the PREA poster can be accessed by offenders without requiring them to their unique PIN and at no cost. The auditor received an email notification from the PREA office that the test call had been received.</p> <p><b>Conclusion:</b> Based on the relevant information available, interviews conducted and onsite observations, the auditor finds the facility meets compliance with this standard</p>

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Agency Admin Code Chapter 310 Complaint Procedures
- Division of Adult Institutions (DAI) Policy and Procedures 310.00.01- Inmate Complaints Regarding Staff Misconduct

Interviews conducted

- Random and Specialized interviews with offenders
- Interview with Inmate Complaint Examiner (ICE)
- Random Staff Interviews

(a) (d) ED 72 states "All sexual abuse and sexual harassment complaints filed through the Inmate Complaint Review System shall be immediately redirected and referred for sexual abuse and/or sexual harassment investigation. Inmates shall be notified within 30 days of the initial complaint that an investigation into the portion of the complaint alleging sexual abuse or sexual harassment has commenced and the Inmate Complaint Review process has concluded." Agency Admin Code Chapter 310, DOC 310.08 PREA complaint procedure, outlines the process for the handling of inmate complaints related to sexual abuse and sexual harassment.

(b) ED 72 states "A time limit shall not be imposed on when an offender may submit a complaint regarding an allegation of sexual abuse or sexual harassment through other applicable time limits may still apply to any portion of the complaint that does not allege an incident of sexual abuse or sexual harassment. All appeals shall be made in accordance with Wisconsin State statutory time limits and referred to the appropriate reviewing authority." Additionally, the complaint process shall not include a mandatory informal resolution.

(c) ED 72 states "Each facility shall ensure that an offender who alleges sexual abuse or sexual harassment may submit a complaint without submitting it to an employee who is the subject of the complaint and that such a complaint is not referred to an employee who is the subject of the complaint. The offender may use an alternate method of filing."

(e) ED 72 states "Third parties, including fellow offenders, employees, family members, attorneys and outside advocates, shall be permitted to assist an offender in filing complaints related to allegations of sexual abuse or sexual harassment. Complaints filed shall be referred for sexual abuse and/or sexual harassment investigation." In Accordance with ED 72, Agency Admin Code DOC 310.08 (4) states "Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist an inmate in filing a request for administrative remedies relating to allegations of sexual abuse or sexual harassment and shall also be permitted to file such requests on behalf of inmates. Requests for administrative remedies filed under this section will be referred for a PREA investigation."

(f) ED 72 states "If an offender alleges that he or she is subject to a substantial risk of imminent sexual abuse, the offender may contact any employee who is not the subject of the allegation. Staff shall immediately forward the allegation to facility leadership for immediate corrective action. Facility leadership shall provide an initial response within 48 hours and issue a final decision within 5 calendar days. The initial response and final facility decision shall document the facility's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency complaint. Further response shall be in accordance with Employee Reporting." In Accordance with ED 72, Agency Admin Code DOC 310.08 (5) states "Emergency grievance procedures for complaints alleging a substantial risk of imminent sexual abuse or sexual harassment will be handled in the following manner:

1. The inmate may contact any staff member who is not the subject of the allegation for immediate corrective action.
2. The inmate may file a complaint. Complaints collected under s. DOC 310.08 shall be immediately forwarded to the warden to determine if immediate action is warranted.
3. Reports of substantial risk of imminent sexual abuse or sexual harassment outside of the complaint process under this chapter shall be immediately forwarded to the warden to determine if immediate action is warranted.

4. Further response will be in accordance with department policy.

(g) ED 72 states "The DOC may discipline an offender for a complaint filed alleging sexual abuse or sexual harassment only where the DOC demonstrates that the complaint was filed in bad faith." In Accordance with ED 72, Agency Admin Code DOC 310.08 (6) states "The warden may discipline an inmate for filing a complaint related to alleged sexual abuse or sexual harassment only if the warden demonstrates that the inmate filed the complaint in bad faith."

**Pre on-site:** The facility reported on the PAQ that they did not receive any inmate complaints reporting sexual abuse or harassment during this audit time frame. The lead auditor interviewed the facility Inmate Complaint Examiner (ICE) who described the offender complaint process. When an offender files a complaint they are placed inside a lockbox in the housing unit and the only staff who have the key is the ICE and her assistant. An offender who is housed in the restrictive housing unit is provided an envelope, the envelope is then sealed and unit staff takes it to the ICE. If the ICE identifies the envelope has been tampered with, they will report to the supervisor.

**On-site:** Interviews with random staff and offenders affirmed they understood that an offender could file a complaint form to report sexual abuse or sexual harassment allegations. Offenders interviewed stated they would most likely report to staff and not use the inmate complaint form

**Conclusion:** Based on the relevant information available, interviews conducted and onsite observations, the auditor finds the facility meets compliance with this standard.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Agency Inmate Handbook in English and Spanish
- Agency PREA Poster (English and Spanish) – Community Victim Advocacy Organization
- DOC-2937 Advocacy Request Form / DOC-2937 (S) Spanish Advocacy Request Form
- POC-0041B Sexual Abuse in Confinement – A Resource For Offenders (English and Spanish)
- Memorandum of Understanding Between WIDOC and Bolton Refuge House

Interviews conducted

- Random offenders
- Specialized inmate offenders
- Community Victim Advocate
- Facility Victim Services Coordinator

(a-c) ED 72 states “Thereafter, the facility shall provide offenders with access to outside victim advocates, with whom the DOC shall maintain or attempt to enter into memoranda of understanding with, for emotional support services related to sexual abuse. Access includes giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers where available. The facility shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible and, in advance, provide notification to offenders of the extent to which such conversations will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.” In accordance with ED 72, offenders are provided with the inmate handbook as referenced in standard 115.33 which includes information on how to contact the community victim advocate. Additionally, the facility provided a copy of the victim advocate organization information posted throughout the facility (English/Spanish), and includes the following:

1. The hotline number,
2. Mailing address
3. Informs offenders they do not need to enter their unique PIN,
4. Calls are not recorded or monitored, and
5. The level of confidentiality when sending correspondence

Reviewing ED #72 the appointing authority or designee at each facility shall assign the facility-based Victim Services Coordinator. The staff member who is designated with this responsibility will assist in connecting victims of sexual abuse in confinement to outside support services.

Pre-Onsite Interviews:

**Community Victim Advocate:** The auditor interviewed the victim advocate from Bolton Refuge House. The victim advocate is fairly new to this position and is the primary advocate for incarcerated victims. She stated that as requested by the victim, she would respond to the hospital to provide emotional support during the exam and investigator interviews. She has recently started working with this facility and offenders and with the pandemic restrictions lifting, she is hoping to start conducting on-site client emotional support services at the facility. She stated that when she provided telephonic emotional support services during the pandemic, offenders were allowed to speak to her in a room that allowed for privacy and arranged similar to a legal call at no charge.

**Facility Victim Services Coordinator:** The facility does not provide emotional support services to victims of sexual abuse. Their role is to work as the liaison between the facility and the community victim advocate including arranging meetings and providing resources to the victim. The facility had one reported incident of an offender on offender sexual abuse and provided victim advocate information at the time of the report. This was documented in the SINC program by the facility victim

coordinator

**On-site review and interviews:** The audit team observed PREA posters throughout the facility which includes the contact number from the offender's phones and mailing addresses. Random Offenders were interviewed some knew there was an option to contact the community victim advocate. Reviewing offender signed education, offender video, offender handbook, PREA posters, and testing the offender phone line options for victim advocacy, the information is available.

**Conclusion:** Based upon the relevant information available, interviews conducted and onsite observations, the auditor finds the facility meets compliance with this standard.

115.54	<b>Third-party reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Agency third party poster (English and Spanish)</li> <li>• Screenshot of the agency's public website reporting information</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Random staff interviews</li> <li>• Random and specialized offender interviews</li> </ul> <p>(a) ED 72 states “The DOC shall provide a method for third parties to report sexual abuse and sexual harassment on behalf of an offender. Information on how to report sexual abuse and sexual harassment on behalf of an offender shall be posted publicly.” The agency investigates all allegations of sexual abuse and sexual harassment of offenders in custody, past, and present. An offender can report using the following methods:</p> <ol style="list-style-type: none"> <li>1. Tell, or write to, any staff member;</li> <li>2. Call the internal or external reporting hotline;</li> <li>3. File a grievance;</li> <li>4. Contact local law enforcement; or</li> <li>5. Tell any family member, friend, or support person</li> </ol> <p><b>Pre on-site:</b> On March 10, 2022, the auditor reviewed the agency website DOC Prison Rape Elimination Act (wi.gov) for 3rd party reporting option. A test was submitted to the email link provided and received a response the same day.</p> <p><b>Onsite:</b> Interviews with random staff and offenders affirmed they knew that a 3rd party report could be made on behalf of an offender. At the time of this audit, the facility had not received any 3rd party reports of sexual abuse or sexual harassment.</p> <p><b>Conclusion:</b> The auditor finds the facility meets compliance with this standard</p>

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)

Interviews conducted

- Warden
- PREA Director
- Random staff
- Health Services Unit (HSU)
- Psychological Services Unit (PSU) staff

(a) ED 72 states "Employees shall accept reports made verbally, in writing, anonymously, and from third parties; promptly document any verbal reports and immediately report." Staff is required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility regardless it is part of the agency. The policy further requires staff to report any incidents of retaliation against offenders or employees who reported an incident and/or, neglect by an employee for violation of responsibilities that may have contributed to an incident or retaliation.

(b) ED 72 states "Employees shall not reveal any information related to a sexual abuse or sexual harassment report to anyone other than to supervisors, investigators, and designated officials. Such information shall be limited to information necessary to make treatment, investigation, and other security and management decisions."

(c) ED 72 states "Medical and mental health practitioners shall be required to report sexual abuse and to inform offenders of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services."

**Pre-onsite Health Services Unit (HSU) and Psychological Services Unit (PSU) staff interviews:** Both HSU and PSU staff stated they inform the offender of their duty to report and the limitations of confidentiality at the initiation of services.

(d) ED 72 states "If the alleged victim is under the age of 18 or considered a vulnerable adult in accordance with State or local statute, the DOC shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws".

- The facility does not house adjudicated adult offenders as such this requirement only applies to those considered vulnerable adults.

Auditor reviewed the Wisconsin State Legislature public website for the vulnerable adult state statute Wisconsin Legislature: 940.285. WI Criminal Code 940.285 Abuse of individuals at risk definitions and related applicable other Criminal Code statutes

- "Adult at risk" 55.01 (1e): means any adult who has a physical or mental condition that substantially impairs his or her ability to care for his or her needs and who has experienced, is currently experiencing or is at risk of experiencing abuse, neglect, self-neglect, or financial exploitation
- "Elder adult at risk" (46.90 (1) (br): means any person age 60 or older who has experienced, is currently experiencing or is at risk of experiencing abuse, neglect, self-neglect, or financial exploitation
- "Individual at risk" means an elder adult at risk or an adult at risk.

(e) ED 72 states "All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, shall be reported."

**Pre-onsite interviews:** The Warden, Superintendent/PCM, Captain, and agency PREA Director were interviewed stating that policy requires all staff to immediately report allegations of sexual abuse and sexual harassment. The PREA Director stated local law enforcement conducts the criminal investigations and would be responsible for any mandatory reporting

requirements if the victim-offender of sexual abuse falls under the vulnerable offender statute. All HSU and PSU staff and contract employees are required to inform offenders of their limits to confidentiality and that as agency employees they are also mandatory reporters.

**On-site random staff interviews:** All staff selected for the interview stated they are required to immediately report all allegations of sexual abuse, sexual harassment, and retaliation by staff or offenders. Staff stated they understand that any information related to allegations of sexual abuse and sexual harassment is confidential and not to be shared with anyone other than those who have a need and right to know. When an offender files a report to staff, they stated the reports would be accepted verbally, in writing, by 3rd party, and they would accept anonymous reports. After receiving a report they notify their supervisor. Additionally, the staff was aware of the translation service provider in conjunction with standard 115.16

**Conclusion:** Based on the relevant information available and interviews conducted the auditor finds the facility meets compliance with this standard

115.62	<b>Agency protection duties</b>
	<p data-bbox="242 145 742 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 208 454 237"><b>Auditor Discussion</b></p> <p data-bbox="242 271 1460 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 432 742 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 506 1444 573" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> </ul> <p data-bbox="242 595 454 624"><u>Interviews conducted</u></p> <ul data-bbox="284 678 582 775" style="list-style-type: none"> <li>• Deputy Assistant Secretary</li> <li>• Warden</li> <li>• Random Staff</li> </ul> <p data-bbox="242 797 1460 864">(a) ED 72 states "When the department or facility learns that an offender is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the offender."</p> <p data-bbox="242 887 1476 1021"><b>Pre-onsite interviews:</b> The auditor conducted virtual interviews with the Assistant Deputy Secretary and Warden. Both described the process staff is to follow when they learn an offender is at imminent risk of sexual abuse. Staff will report and ensure the victim is separated from the aggressor. The facility supervisor will interview the victim to assess to determine actions to be taken i.e. move the aggressor or as requested the victim to a different unit, facility, etc.</p> <p data-bbox="242 1043 1492 1245"><b>On-site review:</b> The auditor interviewed staff who work in restrictive housing and they have not placed any offender who expressed imminent fear of sexual abuse in restrictive housing. If offenders were placed into the restrictive housing unit they would make every effort not to restrict them from access to programs, privileges, education, and/or work opportunities. If there were any restrictions staff would be documented the reason in WICS. When asking random staff interview questions that in the event an offender reported an imminent threat of sexual abuse, staff stated they would immediately report to their supervisor and keep the offender away from the aggressor.</p> <p data-bbox="242 1267 1460 1335"><b>Conclusion:</b> Based on the relevant information available, interviews conducted and onsite observations, the auditor finds the facility meets compliance with this standard</p>

115.63	<b>Reporting to other confinement facilities</b>
	<p data-bbox="242 145 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 208 451 237"><b>Auditor Discussion</b></p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 427 743 456"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 506 1442 602" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Agency report template</li> </ul> <p data-bbox="242 629 456 658"><u>Interviews conducted</u></p> <ul data-bbox="284 707 580 770" style="list-style-type: none"> <li>• Assistant Deputy Secretary</li> <li>• Warden</li> </ul> <p data-bbox="242 797 1493 896">(a) (b) ED 72 states “Within 72 hours of receiving an allegation that an offender was the victim of sexual abuse while confined at another facility, the information shall be reported by the head, or designee, of the facility to the head, or designee, of the facility where the alleged abuse occurred.”</p> <p data-bbox="242 922 1458 985">(c) (d) ED 72 states “All notifications shall be documented and the appointing authority that receives such notification shall ensure that the allegation is investigated.”</p> <p data-bbox="242 1012 675 1041"><u>Pre-onsite interviews and document review</u></p> <p data-bbox="242 1068 1485 1196"><b>Assistant Deputy Secretary:</b> Should the Assistant Deputy Secretary receive information from another agency that an offender reported sexual victimization while housed within a WI facility, she would contact the agency PREA Director. The PREA Director would research their database to determine if they had received the report and completed an investigation. If not, the PREA Director will contact the Warden/Superintendent, initiate a report and assign an investigation.</p> <p data-bbox="242 1223 1474 1391"><b>Warden:</b> When a report is received that an offender was sexually abused at another WI facility or other confinement facility, the Warden will notify the facility Superintendent, Warden, or agency head where the incident occurred. In the event they receive a report from another facility or agency that an offender reported they were sexually abused in their facility, they will review SINC to determine if an investigation had been completed, if not an incident report would be generated and an investigation assigned.</p> <p data-bbox="242 1417 1426 1480">JCI received a report that an offender reported they were sexually abused while at JCI after they transferred to another facility. An investigation was conducted and addressed under standard 115.71.</p> <p data-bbox="242 1507 1420 1570"><b>Conclusion:</b> Based on the relevant information available and interviews conducted the auditor finds the facility meets compliance with this standard</p>

115.64	<b>Staff first responder duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Agency First Responder Card (Healthcare staff)</li> <li>• Agency First Responder Card (security)</li> <li>• Agency First Responder Card (non-security)</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interviews with security and non-security staff first responders</li> <li>• Random staff</li> </ul> <p>(a) ED 72 First Responder requirements page 13 states the following:</p> <p>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"> <li>1. Separate the alleged victim and abuser;</li> <li>2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;</li> <li>3. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating; and</li> <li>4. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.</li> </ol> <p>(b) ED 72 states "If the first employee responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff."</p> <p><b>Pre-on-site:</b> The PAQ reflected one incident of sexual abuse reported within this audit time frame. Reviewing the investigation reports provided, the allegation of an offender on offender sexual abuse was reported after the offender victim transferred to another facility and outside of the time frame for protection of physical evidence.</p> <p><b>On-site:</b> The audit team conducted interviews with staff and asked them to walk thru the process and actions they would take when an incident of sexual abuse was reported. Both custody and non-security staff were able to describe the first responder's duties to prevent physical evidence from being destroyed and keep the victim safe and separated from the aggressor and notify a supervisor. The custody staff is responsible for securing the crime scene. During the on-site review, the facility did not have any offenders who reported sexual abuse that occurred at JCI. An interview was conducted with an offender who reported sexual abuse that occurred at a different facility and does not apply to this facility audit response.</p> <p><b>Conclusion:</b> Based on the relevant information available and interviews conducted the auditor finds the facility meets compliance with this standard</p>

115.65	<p><b>Coordinated response</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institution (DAI) Policy and Procedures 410.50.06: Coordinated Response Plan</li> <li>• Facility Coordinated Response Plan</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interview with the Warden</li> <li>• Random staff</li> </ul> <p>(a) ED 72 states “Each facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among employee first responders, medical and mental health practitioners, investigators, and facility leadership.” In accordance with ED 72 and DAI 410.50.06, the facility provided a copy of its coordinated response plan that outlines a step-by-step guide for staff and supervisors. Additionally, the coordinated response plan includes a flow chart that is easy to follow and provides direction to ensure all steps are followed.</p> <p><b>Pre-onsite interview:</b> The Warden stated developed a facility-specific coordinated response plan following the agency policy and procedures requirements.</p> <p><b>Onsite interviews.</b> The audit team interviewed random staff and asked them to describe actions they would take if they received a report of sexual abuse. Staff were able to describe the response process and would report to the Captain and Superintendent.</p> <p><b>Conclusion:</b> The auditor finds the facility meets compliance with this standard</p>
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115.66	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interview with the Director</li> </ul> <p>(a) This standard does not apply as the agency does not have Collective Bargaining.</p>

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Division of Adult Institutions (DAI) Policy and Procedures 410.50.04 Support Services and Retaliation Monitoring
- DOC-2805 Sexual Abuse Allegation Staff Retaliation Monitoring
- DOC-2767 Sexual Abuse and Sexual Harassment Incident Victim Services Coordinator Response Checklist

Interviews conducted

- Specialized interview Assistant Deputy Secretary
- Specialized interview with the Warden
- Staff who monitor retaliation
- Facility Victim Services Coordinator (VSC)

(a) ED 72 states "Each facility shall designate an employee(s) 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."

(b) (e) ED 72 states "For offenders or employees who express fear of retaliation, the facility shall take appropriate protective measures."

(c - d) ED 72 states "For at least 90 days following a report of sexual abuse, the designated facility-based employee(s) shall monitor the conduct and treatment of the offender(s) or employee(s) who reported the sexual abuse and the offender(s) who was reported to have experienced sexual abuse to determine if retaliation occurred. 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 indicates a continuing need." In accordance with ED 72, DAI 410.50.04 states "During periodic retaliation monitoring status checks described below, the VSC shall ask the alleged victim about the individual's perceived degree of wellness. Support services shall be modified, as needed." The policy requires that following a report of sexual abuse, the VSC shall monitor the conduct and treatment of the reporter and alleged victim once every 30 days for at least 90 days. In addition to monthly conversations with the victim, additional items that should be monitored are any inmate disciplinary reports, housing, or program changes. Depending on the facility, the PREA Compliance Manager could be designated to monitor staff from possible retaliation.

(f) ED 72 states "The DOC's obligation to monitor shall terminate if DOC determines that the allegation is unfounded." In accordance with ED 72, DAI 410.50.04 states "If the report is determined to be unfounded, efforts to monitor retaliation may be discontinued."

**Pre-onsite interviews:** The Assistant Deputy Secretary was interviewed and stated the agency has Administrative and Executive Directives addressing there is Zero Tolerance for any form of sexual abuse or sexual harassment and retaliation. Facility Victim Services Coordinators or PCMs are responsible for monitoring retaliation for 90 days which could be extended. If an individual expresses fear of retaliation the PCM or facility supervisor will meet with them and if retaliation is identified an investigation would be assigned.

The Warden has an understanding of the retaliation requirements and stated that if an offender victim expresses fear of retaliation and they feel they would be safer at another facility, they will review. If they are monitoring staff for possible retaliation, they would review to determine if they had been moved to a different housing unit.

The VSC was interviewed and described the retaliation process, the time frames they meet with the offender victims, and continued monitoring beyond the 90 days. The VSC stated they will meet with the offender victims in person and would only stop if the victim stated that they no longer want to meet in person. The VSC stated if the victim did not want to be seen, they would continue monitoring for retaliation by talking to unit staff or PSU staff.

**Onsite:** The lead auditor and support staff met with the VSC to ask some follow-up questions and view retaliation monitoring

tracking information. The VSC maintains a calendar to ensure she follows up with victim offenders within time frames and will receive an email when an incident is reported to initiate retaliation tracking. During this discussion, the auditor identified that the VSC was not fully aware of the periodic checks requirement to include monitoring disciplinary reports and reviewing for any housing/program changes. The auditor discussed this during the out brief with a follow-up discussion and requested to discuss it with the PREA Director after the onsite review.

**Post onsite:** After returning from the onsite audit, the lead auditor reviewed ED 72, 410.50.04 IV Retaliation Monitor (B), and DOC 2767 for clarification on the agency policy and retaliation monitoring requirements. After reviewing the information further the auditor contacted the PREA Director to discuss compliance concerns. The PREA Director stated they had a VSC meeting scheduled and would address this topic and make a minor revision to DOC 2767 to add periodic checks and other potential sources of information. This was placed into a short-term corrective action. **Follow-up:** The auditor was included in an email that was sent to institution and facility Victim Services Coordinators and PREA Compliance Managers from the PREA Director and included guidance to the VSC staff and a copy of the updated DOC 2767 form.

**Conclusion:** The auditor finds the facility meets compliance with this standard

115.68	<p><b>Post-allegation protective custody</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• DOC-30 Review of Inmate in Restrictive Housing</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interview with the Warden</li> </ul> <p>(a) ED 72 states “Any use of restricted status housing to protect an offender who is alleged to have suffered sexual abuse shall be subject to the requirements of §115.43 and §115.343 as found within Placement.”</p> <p><b>Warden pre-onsite interview:</b> The facility has not placed any victim offenders of sexual abuse or those who expressed imminent fear of sexual abuse in involuntary restrictive housing. If a victim is placed in restrictive housing it would be less than 24 hours and the facility would document the reason for the short-term placement until an alternative placement can be arranged.</p> <p><b>On-site review:</b> The auditor interviewed staff who work in restrictive housing and they have not placed any offender victims of sexual abuse or offenders who expressed imminent fear of sexual abuse in restrictive housing. If offenders were placed into the restrictive housing unit they would make every effort not to restrict them from access to programs, privileges, education, and/or work opportunities. If there were any restrictions staff would be documented the reason in WICS.</p> <p><b>Conclusion:</b> Based on the relevant information available, interviews conducted and onsite observations, the auditor finds the facility meets compliance with this standard</p>
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**115.71 Criminal and administrative agency investigations**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Division of Adult Institutions (DAI) Policy and Procedures 306.00.15 (Restricted) Inmate Investigations
- Wisconsin Department of Corrections Human Resources Policy 200.30.304 Employee Disciplinary Investigations
- Notification for expansion of the Internal Affairs Office (IAO)
- Agency Sensitive Investigation Network Communication (SINC) User's Guide (Confidential)
- State of WI Department of Administration Agency retention records
- Investigation reports

Interviews conducted

- Warden
- PREA Director
- PREA Compliance Manager
- Internal Affairs Office (IA) Investigator
- Facility Investigator

The agency and facilities conduct administrative investigations, and the agency and/or facilities will contact and work collaboratively with outside local law enforcement when there is potential criminal behavior.

(a) ED 72 states "The DOC shall ensure that an investigation is completed for all allegations of sexual abuse and sexual harassment, including those received from third parties and anonymous sources. DOC shall maintain a policy(ies) that governs the conduct of such investigation." In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 outlines the investigatory process includes conducting prompt, thorough, and objective investigations.

(b) This provision is addressed under and in accordance with standard 115.34.

(c) ED 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." In accordance with ED 72, DAI 306.00.15 outlines the agency's investigatory process and obligations for evidence preservation.

(d) (g) (h) ED 72 states "Allegations of sexual abuse or sexual harassment that involve potentially criminal behavior shall be referred for investigation to local law enforcement. All referrals to law enforcement shall be documented" In accordance with ED 72 DAI 303.00.05 outlines procedures for sexual abuse incident referrals to law enforcement.

(e) ED 72 states "The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as offender or employee. The DOC shall not require an offender who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation." In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 requires investigators to assess the credibility of the alleged victim, suspect, or witness and shall not be determined by the person's status as an inmate or staff member.

(f) ED 72 states "Administrative investigations shall include an effort to determine whether employee actions or failures to act contributed to the abuse." ED 72 additionally requires administrative investigation reports to include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and the investigative facts and findings. In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 outlines the agency's investigatory process and requirement to include a description of the physical and testimonial evidence and credibility assessments.

(i) ED 72 states, "Administrative and criminal investigations shall be documented in a written report to be retained for as long

as the alleged abuser is incarcerated or employed by the DOC, plus ten years.”

(j) (k) ED 72 states “The departure of an alleged abuser or victim from the employment or control of the facility or the DOC, or the recantation of the allegation, shall not provide a basis for terminating an investigation.” In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 outlines the agency’s investigatory process and the obligation to continue with the investigation regardless of the departure of the alleged victim or suspect

(l) ED 72 states “When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall work to remain informed about the progress of the investigation.” In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 investigators shall work collaboratively with law enforcement investigators, if applicable, and attempt to remain informed about the progress of the criminal investigation.

**Pre-onsite document review:** The PAQ noted that they had two substantiated allegations referred for prosecution since the last PREA audit, however, these were referred before the 12-month audit time frame. During the audit time frame, the facility conducted four administrative investigations. Investigation reports were requested and provided to the auditor to review before the onsite. After reviewing the investigation reports, the auditor had some additional questions and followed up with the facility PCM onsite.

All staff who conduct sexual abuse and sexual harassment investigations are required to attend specialized training on how to investigate reports of sexual abuse and sexual harassment in confinement. The auditor verified facility and agency staff responsible for conducting investigations are listed in the directory.

Pre-onsite investigator interviews:

The Agency Administrative Investigator is assigned to the Internal Affairs Office based in Madison and is responsible for conducting investigations involving staff on offender sexual abuse, fraternization, sexual harassment, and incidents meeting a violation of serious misconduct. Facility investigators are responsible for offender-on-offender sexual harassment and case-by-case, offender-on-offender sexual abuse investigations.

The auditor interviewed the IA investigator and facility investigator and asked them to describe the investigatory process from the time they are assigned the investigation. This included what evidence they collect and rely upon, summarizing interviews with the victim, suspect, and witness (if any), how they assess the credibility of those interviewed, and whether is this documented within their report. The investigators were able to provide knowledge and understanding when describing the investigatory process of a thorough investigation. Both stated they received training on Miranda Rights, however, they are not criminal investigators and would not have the legal authority to read Miranda Rights to offenders or staff. While the investigators do not determine the findings, they were able to define Substantiated, Unsubstantiated and Unfounded.

Staff conducting investigations are fact finders, the appointing authority is notified when the investigation has been completed and they are responsible for determining the finding. If the administrative investigation involves staff, the investigation is reviewed by the appointing authority and the Infraction Review Team (IRT).

**Onsite:** The auditor requested a follow-up discussion with the PCM and the Facility Deputy Warden for clarification on some of the investigation reports. One of the investigations completed early in the audit year did not include a credibility assessment and learned this was an element investigators had not been documenting in their investigation reports. The facility took action and addressed with the facility investigator to ensure they include credibility assessments and document the assessment in their reports. The Investigations completed after the facility took action, included the investigator’s credibility assessment.

While onsite auditor spoke with one offender who wrote to the auditor and one offender who requested to speak to the auditor. Both stated they reported incidents and it appeared these reports had not been reviewed and referred for investigation. The auditor support staff interviewed an offender who stated they had made a report and wanted to know the status. The offenders were asked and authorized by the audit team to discuss their concerns with the PCM and PREA Director. This standard was placed into short team corrective action and requested they provide the completed investigation reports for review. **Follow-up:** Investigation reports were provided to the auditor and included notifications to the offender of the outcome and closure.

**Conclusion:** The auditor finds the facility meets compliance with this standard

115.72	<b>Evidentiary standard for administrative investigations</b>
	<p data-bbox="242 145 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 208 451 237"><b>Auditor Discussion</b></p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 427 738 456"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 506 1437 633" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 306.00.15 (Restricted) Inmate Investigations</li> <li>• WIDOC Human Resources Policy 200.30.304 Employee Disciplinary Investigations</li> </ul> <p data-bbox="242 663 456 692"><u>Interviews conducted</u></p> <ul data-bbox="284 741 686 804" style="list-style-type: none"> <li>• Internal Affairs Office (IA) Investigator</li> <li>• Facility Investigator</li> </ul> <p data-bbox="242 833 1461 927">(a) ED 72 states “The DOC shall impose no standard higher than a preponderance of the evidence in determining whether the allegations of sexual abuse or sexual harassment are substantiated.” In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 includes the definition of a preponderance of evidence in determining a substantiated finding.</p> <p data-bbox="242 956 1337 985"><b>Pre-on-site investigator interviews:</b> The investigator interviews intertwine with standards 115.34 and 115.71.</p> <p data-bbox="242 1014 1477 1209">The auditor interviewed the IA and the facility investigator asking them what standard is used to determine whether the allegation of sexual abuse or sexual harassment is substantiated. They both stated they are not responsible for determining the investigation finding however stated that the policy is a preponderance of the evidence to determine a substantiated/sustained finding. The appointing authority is responsible for reviewing investigations and determining the closure finding. If the administrative investigation involves staff, the investigation is reviewed by the appointing authority and the Infraction Review Team (IRT).</p> <p data-bbox="242 1238 1445 1301">This facility had three offender-on-offender sexual harassment investigations and one offender-on-offender sexual abuse investigation (not meeting criminal referral).</p> <p data-bbox="242 1330 1074 1359"><b>Conclusion:</b> The auditor finds this facility meets full compliance with this standard.</p>

115.73	<b>Reporting to inmates</b>
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 306.00.15 (Restricted) Inmate Investigations</li> <li>• Agency PREA Investigation Notification DOC-2768 - substantiated findings</li> <li>• Agency PREA Investigation Notification DOC-2768A - unsubstantiated findings</li> <li>• Agency PREA Investigation Notification DOC – 2768B - unfounded findings</li> <li>• Agency PREA Investigation Notification DOC-2768C – Report does not constitute sexual abuse or sexual harassment as defined by 115.6</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Warden</li> <li>• Internal Affairs Office (IA) Investigator</li> <li>• Facility Investigator</li> <li>• Specialized offender(s)</li> </ul> <p>(a)(b)(e)(f) ED 72 states “Following an investigation of an allegation that an offender suffered sexual abuse in a DOC facility, the facility shall inform the alleged victim, and document such notification, as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. If the DOC did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the alleged victim. The DOC’s obligation to report shall terminate if the alleged victim is released from custody.” In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 policy outlines the notifications and documentation process.</p> <p>(c) ED 72 states “Following an offender’s allegation that an employee committed sexual abuse against an offender and the findings are substantiated or unsubstantiated, the DOC shall subsequently inform the alleged victim, and document such notification, whenever the employee is no longer posted within the alleged victim’s unit; the employee is no longer employed at the facility, or the DOC learns that the employee has been indicted or convicted on a charge related to the initial allegation of sexual abuse.” In accordance with ED 72, the agency notification forms were reviewed and met the requirement of this provision.</p> <p>(d) ED 72 states, “Following an offender’s allegation that he or she has been sexually abused by another offender, the DOC shall subsequently inform the alleged victim, and document such notification, whenever the DOC learns that the alleged abuser has been indicted or convicted on a charge related to the initial allegation of sexual abuse.” In accordance with ED 72, DAI 306.00.015, HR policy 200.30.304, and agency notification forms support the requirement to notify victims of sexual abuse and sexual harassment of victims of the outcome of the investigation.</p> <p><b>Pre-on-site interviews:</b> This auditor interviewed the Warden, IA, and facility investigator who affirmed offenders are notified of the outcome of investigations. The offender notifications are completed by the agency PREA Office and mailed to the victim-offender unless the offender has been released from WIDOC custody. This was affirmed after the auditor reviewed the closed investigation reports which included outcome notification provided to offender victims of sexual harassment.</p> <p><b>Pre-on-site document review:</b> ED 72 follows and exceeds compliance with the requirement to notify offender victims when they have closed the investigation. Reviewing the PREA Office notification letter, they have included victims of sexual harassment to be notified when investigations have been completed. Additionally, offenders are notified if they report an incident that is determined not to constitute a violation of sexual abuse or sexual harassment by the PREA Office.</p> <p><b>Conclusion:</b> The standards require only those offenders reporting a violation of sexual abuse to be notified of the outcome of an investigation. After reviewing agency policy, completed notifications sent to offenders, and interviews with staff the auditor finds they exceed this standard.</p>

115.76	<b>Disciplinary sanctions for staff</b>
	<p data-bbox="240 145 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="240 210 451 239"><b>Auditor Discussion</b></p> <p data-bbox="240 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 430 738 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1437 604" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Wisconsin Department of Corrections, Executive Directive #2 (ED 2) – Employee Discipline.</li> </ul> <p data-bbox="240 631 1469 759">(a) ED 72 states “Staff members who are found to have violated the DOC sexual abuse, sexual harassment and retaliation policies shall be subject to disciplinary sanctions up to and including termination.” In accordance with ED 72, ED 2 outlines levels of discipline and the progression schedule for formal discipline up to termination. The disciplinary process could be accelerated for incidents of staff sexual misconduct with offenders.</p> <p data-bbox="240 790 1469 887">(b) (d) Ed 72 states “Termination is the presumptive sanction for a staff member who engaged in sexual abuse. All terminations for violations of the DOC sexual abuse and sexual harassment policies, including resignations that would have resulted in termination if not for the resignation, shall be reported to any relevant licensing bodies</p> <p data-bbox="240 916 1453 976">(c) ED 72 states “Sanctions shall be commensurate with the nature and circumstances of the violation, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.”</p> <p data-bbox="240 1005 1485 1066"><b>Conclusion:</b> At the time of this audit, this facility has not received any reported allegations of sexual abuse or sexual harassment involving staff during this audit time frame. The auditor finds this facility meets full compliance with this standard.</p>

115.77	<p data-bbox="229 69 1509 1158"><b>Corrective action for contractors and volunteers</b></p> <p data-bbox="229 129 1509 192"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="229 192 1509 255"><b>Auditor Discussion</b></p> <p data-bbox="229 255 1509 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="229 398 1509 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="229 461 1509 582" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> </ul> <p data-bbox="229 582 1509 645"><u>Interviews conducted</u></p> <ul data-bbox="229 645 1509 725" style="list-style-type: none"> <li>• Specialized interview with the Warden</li> </ul> <p data-bbox="229 725 1509 846">(a) (b) ED 72 states “Any volunteer or contractor who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies. Appropriate remedial measures shall be taken by the facility to ensure the safety of offenders in contact with volunteers and contractors.”</p> <p data-bbox="229 846 1509 1043"><b>Pre-on-site interview:</b> The lead auditor interviewed the Warden and asked if an allegation of sexual abuse or sexual harassment is reported involving a contract employee or volunteer what actions would they take to separate them from the victim. The Warden stated they would temporarily prohibit them from the facility while this investigation was ongoing. If the investigation is closed with a substantiated finding of sexual abuse or sexual harassment, the contract employee or volunteer would be prohibited from entering all WIDOC facilities and reported to relevant licensing bodies if applicable.</p> <p data-bbox="229 1043 1509 1158"><b>Conclusion:</b> At the time of this audit, this facility did not have any reported incidents of sexual abuse or sexual harassment. The finding of compliance with this standard is based upon the review of agency policy and Warden's interview. The auditor finds this facility meets full compliance with this standard.</p>
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115.78

**Disciplinary sanctions for inmates**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Department of Corrections Chapter DOC 303 Discipline (DOC) 303.01

Interviews conducted

- Warden
- Health Services Unit (HSU) Staff
- Psychological Services Unit (PSU) Staff

(a) ED 72 states "Offenders who have committed offender-on-offender sexual abuse are subject to disciplinary sanctions pursuant to a formal disciplinary process."

(b) ED 72 states "Sanctions shall be commensurate with the nature and circumstances of the violation, the offender's disciplinary history and the sanctions imposed for comparable offenses by other offenders with similar histories."

(c) ED 72 states "The disciplinary process shall consider whether a perpetrating offender's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction if any, should be imposed."

(d) ED 72 states "The facility shall consider requiring perpetrating offenders to participate in interventions, such as therapy or counseling, to address and correct underlying reasons or motivations for the abuse."

- **Pre-onsite PSU staff interview:** PSU staff stated they will offer services to offenders who have committed sexual abuse in confinement and if accepted assess for programming needs. They stated most offenders decline the offer.

(e) ED 72 states "An offender may only be disciplined for sexual contact with an employee upon a finding that the employee did not consent to such contact."

(f) ED 72 states "Reports of sexual abuse or sexual harassment made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence to substantiate the allegation."

(g) ED 72 states "While consensual sexual activity between offenders is prohibited in the DOC facilities, the DOC may not deem consensual sexual activities as sexual abuse if it is determined that the activity is not coerced."

**Document review:** The agency and facility offender disciplinary infractions are outlined within Wisconsin Statute - Department of Corrections DOC Chapter 303.14 Sexual Conduct and Chapter 303.15 Sexual contact or intercourse. These chapters outline prohibited acts including "consensual acts are prohibited under this section". This facility received four allegations during this audit time frame. Three for offender-on-offender sexual harassment and on offender on offender sexual abuse (not meeting criminal referral). None of the investigations resulted in substantiated findings, as such the auditor was unable to review offender discipline reports.

**Pre-onsite interview:** The Warden stated the facility will follow agency policy 303 for progressive discipline. If the investigation met criminal referral the aggressor would be charged not only administratively but could receive a new felony charge. If it was identified that the aggressor has some mental illness or mental disability, they would consider all factors when determining the disciplinary sanction.

**Conclusion:** The auditor finds this facility meets full compliance with this standard.

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 500.70.01 Mental Health Screening, Assessment and Referral</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 410.30.01 Screening for Risk of Sexual Abusiveness and Sexual Victimization</li> <li>• Screenshot of the Agency Electronic Medical Record (blank) – Confidential</li> <li>• Screenshot of the Agency Risk Screening Referral –Confidential.</li> <li>• Agency Non-Health Disclosure Form - DOC-1163 (blank)</li> <li>• Agency Confidentiality Form –DOC-1923 (blank)</li> <li>• Agency PHI Disclosure Form – DOC-1163A (blank)</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized interviews with offenders</li> <li>• Health Services Unit (HSU)Staff</li> <li>• Psychological Services Unit (PSU) Staff</li> </ul> <p>(a-c) ED 72 states “If either the initial or follow-up screening indicates an offender has previously experienced prior sexual victimization or has perpetrated sexual abuse, whether it occurred in an institutional setting or in a community setting, employees shall ensure the offender is offered a follow-up meeting with a mental health provider within 14 days of the initial or follow-up screening.” In accordance with ED 72 and DAI 410.01, DAI 500.70.01 page 4. VI. PREA Referrals outlines the referral process to Psychological Services (PSU) staff.</p> <p>(d) ED 72 states “Appropriate controls shall be placed on the dissemination of information gathered from the initial and follow-up screenings to ensure that sensitive information is not exploited to the offender’s detriment by employees or other offenders. Further, any information related to sexual victimization or abusiveness occurring in an institutional setting shall be confidential and strictly limited to medical and mental health clinicians and other employees, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments or as otherwise required by law.” The Agency Risk Screening tool includes an introduction that is required to be read to the offenders prior to completing the assessment and includes the limits of confidentiality statement and staff mandatory reporting requirements.</p> <p>(e) ED 72 states “Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting unless the offender is under the age of 18.”</p> <p><b>Pre-on-site specialized interviews and document review:</b> PSU staff at this facility conduct the offender intake PREA risk screening assessment. They offer mental health services to offenders who report any history of sexual abuse or perpetrated sexual abuse in confinement or confinement. If the offer for services is accepted a follow-up meeting will be scheduled.</p> <p><b>On-site interviews and review:</b> The audit team conducted specialized interviews with offender victims who reported any history of sexual abuse. Some declined the offer to meet with PSU staff, and those who accepted the offer were seen within 14 days. The audit team reviewed information for those offenders who were interviewed and verified they had been seen within 14 days. ICS.</p> <p><b>Conclusion:</b> The auditor finds the facility meets compliance with this standard</p>

115.82	<b>Access to emergency medical and mental health services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p>Policy(s) and supporting documentation reviewed</p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 500.30.19 Health Services Unit Procedure in the Event of Sexual Abuse</li> <li>• Agency Off-Site Review Form DOC-3001 (blank)</li> <li>• DAI 316.00.01 (attachment) Inmate Co-Payment for Health Services</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Specialized offenders</li> <li>• Health Services Unit (HSU) Staff</li> <li>• Psychological Services Unit (PSU) Staff</li> <li>• Staff who were first responders</li> </ul> <p>(a) ED 72 states “Victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment .” In accordance with ED 72, DAI 500.30.19 outlines procedures Health Services staff are to follow when an incident of sexual abuse is reported.</p> <p>(b) ED 72 states “In the event that no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health employee(s).”</p> <p>(c) ED 72 states “The DOC’s medical response shall include the timely dissemination of information and access to emergency contraception and sexually transmitted infections prophylaxis.”</p> <p>(d) ED 72 states “All medical and mental health treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident, and in a manner consistent with the community level of care.” In accordance with ED 72, DAI 316 .00.01 states there is no copayment for treatment for a medical emergency, a referral from a PREA Risk Assessment Screener, and Crisis intervention evaluation and treatment related to sexual abuse in confinement.</p> <p><b>Pre-onsite interviews:</b> Both PSU and HSU staff stated that offender victims of sexual abuse would receive timely, unimpeded access to emergency medical treatment at no cost to the victim-offender. During this audit time frame, the facility did not have any reported incidents of sexual abuse requiring an emergent response.</p> <p><b>On-site:</b> At the time of this audit, this facility did not have any offenders who reported sexual abuse at JCI. The audit team interviewed staff related to standard 115.64 which intertwines with provision (b) of this standard.</p> <p><b>Conclusion:</b> The finding of compliance with this standard is based upon the review of agency policy and staff interviews. The auditor finds this facility meets full compliance with this standard.</p>

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 500.30.19 Sexual Abuse – Health Services Unit Procedure in the Event of Sexual Abuse</li> <li>• Division of Adult Institutions (DAI) Policy and Procedures 500.70.01 Mental Health Screening, Assessment, and Referral.</li> </ul> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> <li>• Health Services Unit (HSU) Staff</li> <li>• Psychological Services Unit (PSU) Staff</li> </ul> <p>(a) (b) ED 72 states “The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse in any confinement setting. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities or their release from custody.” In accordance with ED 72, DAI 500.30.19 and DAI 500.70.01 outline procedures for Health Services and Psychological Services employees to follow in response to and follow up after an incident of sexual abuse is received.</p> <p>(c) (g) ED 72 states “All medical and mental health treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident, and in a manner consistent with the community level of care.”</p> <p>(d) This standard provision is not applicable as this facility does not house female offenders</p> <p>(e) This standard provision is not applicable as this facility does not house female offenders</p> <p>(f) ED 72 states “Victims of sexual abuse shall be offered tests for sexually transmitted infections” In accordance with ED 72, DAI 500.30.19 outlines the procedures for completing the DOC-3542 Diagnostic Testing Results related to Sexual Contact.</p> <p>(h) ED 72 states “Further, facilities shall attempt to conduct a mental health evaluation of all known offender-on-offender abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.”</p> <ul style="list-style-type: none"> <li>• During this audit time frame, this facility did not have any offenders who had been identified as known aggressors of sexual abuse in a confinement setting.</li> </ul> <p><b>Pre-on-site specialized interviews:</b> PSU and HSU staff stated that offender victims of sexual abuse would receive ongoing medical and mental health treatment as needed and requested by the victim-offender. Victim offenders are seen timely and receive services consistent with a community level of care and at no cost to the offender.</p> <p><b>Onsite:</b> At the time of this audit, the facility did not have any offenders who reported sexual abuse in a confinement setting.</p> <p><b>Conclusion:</b> The auditor finds the facility meets compliance with this standard.</p>

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)
- Division of Adult Institutions Policy and Procedures (DAI) 410.50.01 Sexual Abuse Incident Reviews
- Division of Adult Institutions Policy and Procedures (DAI) 300.00.70 Assaults by Inmate Reporting and Tracking
- Agency SAIR Form – DOC 2863 (blank)
- Sample of completed SAIR

Specialized Interviews conducted

- Warden
- PREA Compliance Manager
- Sexual Abuse Incident Review Team Member

(a-c) ED 72 states “All facilities shall conduct a review within 30 days of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded. The team shall consist of upper-level management officials with input from supervisors, investigators, and medical and mental health practitioners.” In accordance with ED 72, DAI 410.50.01 and DAI 300.00.70 requires facilities to conduct a sexual abuse incident review after every sexual abuse investigation is closed substantiated, or unsubstantiated. DAI 410.50.01 outlines procedures for conducting the review and who as a minimum shall be included in the review process.

(d) ED 72 requires the Sexual Abuse Incident Review Team to complete the following provisions:

1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse;
2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
4. Assess the adequacy of staffing levels in that area during different shifts;
5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by employees; and
6. Prepare a report of its findings, 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.

(e) ED 72 states “The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.”

**Pre-on-site:** The auditor interviewed the Warden, Deputy Warden, and PCM. All three were able to describe the process for conducting Sexual Abuse Incident Reviews (SAIR) and stated these reviews are completed within 30 days of the investigation being closed substantiated or unsubstantiated. The auditor asked the Deputy Warden and PCM if they have additional staff on the SAIR team and if so, who? They stated that in addition to each other, the Warden or Security Director, Health Services Unit staff, Psychological Services Unit staff, investigator, and the victim services coordinator. The Team utilizes DOC-2863 Sexual Abuse Incident Review (SAIR) Form which addresses the provisions outlined in the agency policy. During this audit time frame, the facility received and completed one offender-on-offender sexual abuse investigation. The auditor reviewed the completed SAIR which included documented recommendations for improvements and actions the facility took to address any changes that were made. The facility enters SAIR information into the SINC for additional review by the PREA Director.

**Conclusion:** The auditor finds this facility meets full compliance with this standard.

115.87	<b>Data collection</b>
	<p data-bbox="242 145 740 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 208 451 237"><b>Auditor Discussion</b></p> <p data-bbox="242 271 1310 300">In determining compliance the auditor triangulated relevant and available evidence related to this standard.</p> <p data-bbox="242 327 743 356"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 405 1442 535" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</li> <li>• Agency Annual Reports 2018-2020</li> <li>• Screenshot of the agency's public website</li> </ul> <p data-bbox="242 562 459 591"><u>Interviews conducted</u></p> <ul data-bbox="284 640 668 736" style="list-style-type: none"> <li>• Assistant Deputy Secretary</li> <li>• Agency PREA Director</li> <li>• Facility PREA Compliance Manager</li> </ul> <p data-bbox="242 763 1490 1025">(a - d) ED 72 states "The data collected and aggregated shall be analyzed to assess and improve effectiveness of the DOC's sexual abuse prevention, detection and response policies, practices and training by identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility as well as the DOC as a whole. The report shall, additionally, include a comparison of the current year's data and corrective actions with those from previous years and shall provide an assessment of the DOC's progress in addressing sexual abuse. Corrective action reports shall also be posted publicly to the DOC's website. The DOC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted."</p> <p data-bbox="242 1055 1461 1184"><b>Pre-onsite document review:</b> The agency prepares annual reports and posts on their agency public website DOC Prison Rape Elimination Act (wi.gov) This auditor reviewed the agency website and found they have posted annual reports going back to 2010 up to and including 2020. Personal identifying information was redacted meeting compliance with security requirements.</p> <p data-bbox="242 1214 1485 1375"><b>Pre-onsite interviews:</b> The lead auditor interviewed the Deputy Assistant Secretary, PREA Director, and PCM. The PCM sends the facility report and information to the PREA Office. The PREA Director is responsible to review all of the facility's information, assessing the data, and prepare the annual report. After the report has been completed, the report is sent to the Assistant Deputy Secretary for review and is then sent to the Secretary for review and signature. After the annual report has been signed the PREA Director requests the report to be posted on the agency website.</p> <p data-bbox="242 1404 1490 1467"><b>Conclusion:</b> The finding of compliance with this standard is based on interviews, agency policy, reviewing the most current annual report, and the agency's public website. The auditor finds this facility meets full compliance with this standard.</p>

115.88	<b>Data review for corrective action</b>
	<p data-bbox="242 145 738 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 208 451 237"><b>Auditor Discussion</b></p> <p data-bbox="242 271 1490 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. These terms will be used interchangeably in this audit report when referring to an incarcerated person.</p> <p data-bbox="242 427 743 456"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 506 1437 633" style="list-style-type: none"> <li>• Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA).</li> <li>• Agency Annual Reports 2018-2020</li> <li>• Screenshot of the agency's public website</li> </ul> <p data-bbox="242 663 456 692"><u>Interviews conducted</u></p> <ul data-bbox="284 741 667 837" style="list-style-type: none"> <li>• Assistant Deputy Secretary</li> <li>• Agency PREA Director</li> <li>• Facility PREA Compliance Manager</li> </ul> <p data-bbox="242 866 1490 1126">(a - d) ED 72 states "The data collected and aggregated shall be analyzed to assess and improve effectiveness of the DOC's sexual abuse prevention, detection and response policies, practices and training by identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility as well as the DOC as a whole. The report shall, additionally, include a comparison of the current year's data and corrective actions with those from previous years and shall provide an assessment of the DOC's progress in addressing sexual abuse. Corrective action reports shall also be posted publicly to the DOC's website. The DOC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted."</p> <p data-bbox="242 1155 1461 1283"><b>Pre-on-site document review:</b> The agency prepares annual reports and posts on their agency public website DOC Prison Rape Elimination Act (wi.gov) This auditor reviewed the agency website and found they have posted annual reports going back to 2010 up to and including 2020. Personal identifying information was redacted meeting compliance with security requirements.</p> <p data-bbox="242 1312 1485 1476"><b>Pre-on-site interviews:</b> The lead auditor interviewed the Deputy Assistant Secretary, PREA Director, and PCM. The PCM sends the facility report and information to the PREA Office. The PREA Director is responsible to review all of the facility's information, assessing the data, and prepare the annual report. After the report has been completed, the report is sent to the Assistant Deputy Secretary for review and is then sent to the Secretary for review and signature. After the annual report has been signed the PREA Director requests the report to be posted on the agency website.</p> <p data-bbox="242 1505 1490 1568"><b>Conclusion:</b> The finding of compliance with this standard is based on interviews, agency policy, reviewing the most current annual report, and the agency's public website. The auditor finds this facility meets full compliance with this standard.</p>

115.89	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="231 197 1508 257"><b>Auditor Discussion</b></p> <p data-bbox="231 257 1508 313">In determining compliance the auditor triangulated available evidence related to this standard.</p> <p data-bbox="231 313 1508 369"><u>Policy reviewed</u></p> <p data-bbox="231 369 1508 459">Wisconsin Department of Corrections, Executive Directive #72 (ED 72): Sexual Abuse and Sexual Harassment in Confinement (PREA)</p> <p data-bbox="231 459 1508 515"><u>Interviews conducted</u></p> <ul data-bbox="231 515 1508 593" style="list-style-type: none"> <li>• Specialized interview with the PREA Director</li> </ul> <p data-bbox="231 593 1508 649">(a) ED 72 states “All data shall be securely retained and maintained for at least 10 years after the date of initial collection.”</p> <p data-bbox="231 649 1508 772"><b>Pre-onsite interviews:</b> The lead auditor interviewed the PREA Director who stated the data is retained in the Sensitive Information Network Communication (SINC). The only staff who have access to the information are those assigned to the PREA Office.</p> <p data-bbox="231 772 1508 871"><b>Conclusion:</b> The finding of compliance with this standard intertwines with standards 115.87 and 115.88 and PREA Director interview and agency policy. The auditor finds this facility meets full compliance with this standard.</p>

115.401	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="242 210 453 237"><b>Auditor Discussion</b></p> <p data-bbox="242 273 1177 300">In determining compliance the auditor triangulated available evidence related to this standard:</p> <p data-bbox="242 331 497 358"><u>Documentation reviewed</u></p> <p data-bbox="242 389 1477 546">(a) The auditor reviewed the agency's public website DOC Prison Rape Elimination Act (wi.gov) and verified the agency has posted final PREA audit reports for all facilities beginning audit year two of cycle one and continued up to audit year one of cycle three. Due to the pandemic causing a significant impact on the agency and facility operations, they did not have any facilities audited during audit year two of cycle three. Based on these factors, facilities scheduled audits during audit year two were moved to audit year three of cycle three.</p> <p data-bbox="242 577 1477 672">(b) The auditor reviewed the agency's public website DOC Prison Rape Elimination Act (wi.gov) and verified the agency has posted final PREA audit reports for all facilities beginning audit year two of cycle one and continued up to audit year one of cycle three.</p> <p data-bbox="242 703 1487 730">(h) While conducting the on-site review, the auditor and audit support staff had access to and the ability to observe all areas.</p> <p data-bbox="242 761 1471 819">(i) The auditor received requested documentation via email or uploaded within the OAS before the on-site audit review and documentation requested post onsite review and/or during corrective action time-frame.</p> <p data-bbox="242 851 1465 909">(m) The audit team conducted staff and offender interviews in areas that allowed a level of privacy from other offenders or staff from hearing.</p> <p data-bbox="242 940 1465 1034">(n) The audit notifications were posted throughout the facility and clearly articulated that letters to the auditor would not be discussed unless required by law. The auditor did not receive any letters from inmates or staff before or after the on-site review.</p> <p data-bbox="242 1066 976 1093"><b>Conclusion:</b> The agency and facility meet compliance with this standard</p>

115.403	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Auditor review:</p> <p>(f) The auditor reviewed the agency's public website DOC Prison Rape Elimination Act (wi.gov) and verified the agency has posted final PREA audit reports for all facilities beginning audit year two of cycle one and continued up to audit year one of cycle three. The facility's prior final audit reports were posted on the agency website.</p> <p><b>Conclusion:</b> The auditor finds the agency meets compliance with this provision.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	no
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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.)	yes

<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	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
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	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
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes

<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who 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
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	no
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

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

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

<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

<b>115.42 (d)</b>	<b>Use of screening information</b>	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain 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? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from 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

<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

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

<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of 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
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations 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

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually 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
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	no
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant 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
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	no

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	no
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes