## PREA Audit Report

### Interim X Final

**ADULT PRISONS & JAILS**

**Date of report:** 1/27/17

### Auditor Information

**Auditor name:** DeShane Reed  
**Address:** 3400 South Bowman Road #1005, Little Rock, AR 72211  
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**Telephone number:** (501) 276-1678

### Date of facility visit

**Date of facility visit:** May 26, 2016 – May 27, 2016

### Facility Information

**Facility name:** Columbia Correctional Institution  
**Facility physical address:** 2925 Columbia Drive, Portage WI 53901  
**Facility mailing address:** (if different from above) Same as Above  
**Facility telephone number:** 608-835-3101

### The facility is

- [ ] Federal  
- [X] State  
- [ ] County  
- [ ] Military  
- [ ] Municipal  
- [ ] Private for profit  
- [ ] Private not for profit

### Facility type

- [X] Prison  
- [ ] Jail

### Name of facility’s Chief Executive Officer

**Name of facility’s Chief Executive Officer:** Michael Dittman

### Number of staff assigned to the facility in the last 12 months

**Number of staff assigned to the facility in the last 12 months:** 94

### Designed facility capacity

**Designed facility capacity:** 541

### Current population of facility

**Current population of facility:** 831 on date of Site Visit

### Facility security levels/inmate custody levels

**Facility security levels/inmate custody levels:** Maximum/Minimum

### Age range of the population

**Age range of the population:** 18 and above

### Name of PREA Compliance Manager

**Name of PREA Compliance Manager:** Gwen Schultz  
**Title:** Supervising Officer II  
**Email address:** Gwen.schultz@wisconsin.gov  
**Telephone number:** 608-742-9100

### Agency Information

**Name of agency:** Wisconsin Department of Corrections  
**Governing authority or parent agency:** (if applicable) Wisconsin Department of Corrections  
**Physical address:** 3099 East Washington Avenue, Madison, WI 53704  
**Mailing address:** (if different from above) Same as Physical Address  
**Telephone number:** 608-240-5000

### Agency Chief Executive Officer

**Name:** Jon Litscher  
**Title:** Secretary  
**Email address:** Jon.Litscher@wisconsin.gov  
**Telephone number:** 608-240-5065

### Agency-Wide PREA Coordinator

**Name:** Christine Preston  
**Title:** Statewide PREA Director  
**Email address:** Christine.Preston@wisconsin.gov  
**Telephone number:** 608-240-5113
AUDIT FINDINGS

NARRATIVE

On May 26, 2016, in coordination and cooperation with the Wisconsin Department of Corrections (WIDOC), USDOJ Certified PREA Auditor DeShane Reed conducted a facility audit of the Columbia Correctional Institution (CCI). The audit commenced with Pre-Audit Briefing meeting (8:30am) consisting of Columbia Correctional Institution administration and supervisory staff. In attendance was the following from CCI and WIDOC: Don Strahota (Deputy Warden), Gwen Schultz (Captain/PREA Compliance Manager), Kelsey Stange (Psychologist/Victim Services Coordinator), Chad Keller (Investigative Captain), Leigha Weber (PREA Program and Policy Analyst), Jason Ruff (PREA Research Analyst), and Christine Preston (Statewide PREA Director). The PRE-Audit meeting commenced with introductions, review of the PREA audit schedule and agenda, on-site document requests, lists of inmates for interviewing and a tour of the entire Columbia Correctional Institution.

The PREA audit commenced with a full tour of CCI’s multiple housing locations, program locations, warehouse, cafeteria, food prep warehouse, laundry, showering locations, offices, recreation and educational locations within CCI. After a complete tour and documentation, the PREA Auditor moved into interviewing a selecting a random sample of inmates. A total of 13 inmates were interviewed, with a specific selection focused on the following category of inmates, based on PREA audit requirements: (Inmates with prior victimization, LGBTI, disability, current allegation, limited English proficiency, and an inmate in segregation). The PREA Audit also consisted of interviews of a random selection of CCI staff including: CCI’s PREA Compliance Manager, Investigation and Retaliation Team, Human Resources, Contractors, Volunteers, Medical/Mental Health Staff, and other CCI Specialized staff. The PREA Auditor also reviewed multiple files and physical documents while on-site, which allowed the PREA auditor to verify compliance with PREA facility standards and confirm compliance consistency.

On May 27, 2016, the PREA Audit of Columbia Correctional Institution (CCI) concluded with a Post-Audit Debriefing meeting. A portion of the representatives from the Pre-Audit Briefing meeting were in attendance. The PREA Auditor shared that the information presented by the auditor within this Post-Audit Debriefing meeting did not depict a final reporting. The PREA Auditor continued by sharing several highlights of the CCI’s programs, as well as discussion of specific documentation and/or observations which the PREA Auditor needed further clarification. There was adequate and appropriate use of the 182 cameras throughout the CCI. There were observable physical plant blind spots, which was not viewable by camera however, two-way mirrors and consistent staff supervision served as adequate substitutions and supplements. The Post-Audit Debriefing meeting concluded with the Auditor thanking the CCI staff for their cooperation, efficiency and coordination in allowing the audit to move along in an even flow. The PREA Auditor also informed the OCI staff that a PREA Interim or Final Audit report will be submitted 30 from the conclusion of the facility audit.
DESCRIPTION OF FACILITY CHARACTERISTICS

Columbia Correctional Institution (CCI) is a 830 inmate capacity Maximum/Minimum security custody prison, housing male inmates ages 18 and older. According to the facility, they do not house youthful inmates. The physical plant consists of approximately 13 buildings. CCI has 9 multiple occupancy housing units, 2 single occupancy housing units, and 1 open bay dorm housing units. Each housing unit has 1 control room which monitors inmate housing and shower areas (most housing locations are two-levels). The additional buildings consisted of intake/receiving area, administrative, education, vocational training, recreation, maintenance, mental health offices, and dining halls.

CCI relies heavily on a compilation of camera assistance, staff supervision through sight/sound supervision by Correctional Officers, as well as predictable and random unannounced rounds per shift by supervisory staff (Lieutenant or higher). CCI’s video technology consists of limited cameras in strategic locations. To make up for blind spots, CCI relies heavily on staff sight and sound supervision, as well as two-way mirrors. At the time of the PREA Facility Audit, CCI had approximately 342 staff employed, as well as 170 volunteers and individual who may have contact with inmates within their daily roles at CCI. Finally, CCI employs a PREA Investigation Team of 4 staff to investigate allegations of sexual abuse. CCI-related Forensic sexual assault medical exams are conducted off site at Divine Savior Hospital by a Certified SANE Nurse. The University of Wisconsin Hospitals and Clinics are also used for other Specialty Services.
SUMMARY OF AUDIT FINDINGS

The PREA site audit of Columbia Correctional Institution (CCI) consisted of a 2-day comprehensive assessment (May 26, 2016 through May 27, 2016), related to PREA’s mission of prevention, detection, responding to instances of sexual abuse/sexual harassment, and the freedom from retaliation when reporting sexual abuse/harassment. The PREA Institution Audit also consisted of assessing the 43 PREA standards. The assessment of the Columbia Correctional Institution included an exhaustive facility tour, review of electronic and on-site documents, reviewing investigations and retaliation follow-up documentation, comprehensive interviews with inmates, staff, volunteers, and CCI’s Administration.

Based on the audit findings of 43 total PREA Standards there were 42 PREA Standards in Compliance and 1 PREA Standard which was Non-Applicable (115.66).

Number of standards exceeded: 0

Number of standards met: 42

Number of standards not met: 0

Number of standards not applicable: 1
Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

The PREA Auditor reviewed pre-audit documents submitted via electronic source to determine compliance for Standard 115.11 WIDOC submitted their Executive Directive 72: Sexual Abuse and Sexual Harassment in Confinement (PREA) Section V. as evidence of compliance with 115.11. Finally, the PREA Auditor also reviewed the WIDOC-Secretary’s Office Organizational Chart, which identified Christine Preston as the Statewide PREA Director who oversees the agency’s efforts to comply with PREA standards in all WIDOC facilities. Christine Preston was also present at the PREA Audit.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.12 Contracting with other entities for the confinement of inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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According to Wisconsin Department of Corrections (WIDOC) Columbia Correctional Institution’s (CCI) Pre-Audit Questionnaire, CCI identified 8 contracts for confinement of inmates that the agency entered into or renewed, on or after August 20, 2012, or since the last PREA Audit (Whichever is later). This PREA Auditor reviewed a WIDOC Contract and documentation, verifying compliance with PREA Standard 115.12. In section XIX of the is states, “The Contractor agrees to comply with the Federal Prison Rape Elimination Act of 2003, and any subsequent standards imposed by the United Stated Attorney General….”

This Auditor concludes that this particular standard is in compliance with the above PREA Standard.

Standard 115.13 Supervision and monitoring

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.13. This PREA Auditor reviewed WIDOC’s Executive Directive #72 “Sexual Abuse and Sexual Harassment in Confinement (PREA)” Section IX. D. (Page 6), which referenced, “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.”

During the site audit, this PREA auditor also reviewed the “Unannounced Rounds” logs on each of the housing units. In each “Unannounced Rounds” log book, the auditor verified consistent “Unannounced Rounds” by a Lieutenant supervisory level or higher.

The auditor did review electronic documentation of “WIDOC’s 2016 PREA Staffing Plan/Annual Review Log.” This PREA auditor was also able to review the revised CCI staffing plan which demonstrate staffing allocation per shift, post, and necessary relief factors based on post, overtime allocation, and the number of inmates on housing units. Additionally, according to WIDOC’s State PREA Director, WIDOC authorize hourly pay increases for their maximum security institutions, in an effort to recruit and retain WIDOC Correctional Officers.

This PREA auditor concludes that this particular standard is in compliance with the above PREA Standard.

**Standard 115.14 Youthful inmates**

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

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.14. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XIII. C. (Page 10), which referenced all the necessary PREA language to meet standard 115.14 policy compliance requirements. An examples of WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.14 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.

This PREA auditor did not observe any Youthful Offenders on the facility’s inmate census, or during tour. On December 9, 2016, this PREA Auditor received documentation (via WIDOC’s Memo) from WIDOC’s Division of Adult Institutions (DAI) describing measures take to achieve compliance with PREA. Within the memo, WIDOC stated, “DAI has moved all youthful inmates out of WIDOC’s adult institutions and they now are housed within Division of Juvenile Corrections (DJC) facilities. Additionally, no youthful inmates will be housed at any of the above and DAI facilities from this point forward.”

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.


**Standard 115.15 Limits to cross-gender viewing and searches**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.15. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section X. (Page 6), which referenced all the necessary PREA language to meet standard 115.15 policy compliance requirements. An examples of WIDOC’s Executive Order #72 as it pertains to PREA Standard 115.15 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. Facilities shall not permit cross-gender strip or body cavity searches except in exigent circumstances or when performed by medical practitioners. All cross-gender strip and body cavity searches, in addition to cross-gender pat-down searches of females, shall be documented. 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. 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. 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 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.”

This auditor interviewed two LGBTI inmates, who confirmed that they are properly searched according to CCI’s search policy. This PREA auditor also reviewed random staff files to verify search procedures trainings.

On 6/23/16, a memo was circulated to all staff and inmates from Security Director, Lucas Weber on WIDOC’s letterhead. The memo stated, “Beginning today and continuing into the next week all CCI inmates will be participating in mandatory PREA education. Following the training an “audible tone” will be installed on the units. This tone will sound when a staff of the opposite gender enters the unit.” Additionally, the auditor reviewed pictures of the restricted housing unit showers, which showed that half of the full open plexi-glass windows which had potential to show an inmate’s total body when showering was half covered to disallow full viewing of the inmate (only lower thigh and below). The same covering of half of the viewing window was done inside the housing unit’s Control Center, which had potential to fully view inmates while showering.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.16 Inmates with disabilities and inmates who are limited English proficient**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)
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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.16. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XI B. 4. (Page 8), which referenced all the necessary PREA language to meet standard 115.16 policy compliance requirements. An examples of WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.16 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. “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.”

Additionally, during staff interviews, staff shared that they can call the LEP 1-800 number, as well utilize an LEP card to identify what language requires interpretation by calling the LEP 1-800 number. Additionally, the CCI inmates can call the 777 or 888 number on the inmate phones, then select “English” or “Spanish” reporting.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.17 Hiring and promotion decisions

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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.

This PREA auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.17. This PREA Auditor interviewed the CCI Human Resources (HR) Manager, who showed documentation of recruitment, screening, interviewing, and hiring protocols. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section VI A. (Page 4 and 5), which referenced all the required PREA language to meet standard 115.17 policy compliance requirement. An excerpt from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.16 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. 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. 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. The DOC shall conduct a criminal background records check every five years for current employees."

During the auditor’s interview with CCI’s HR Manager, five random employee files were pulled. Each file had the required and updated background checks, employment application questions which may disqualify and potential candidate from being employed with CCI, as well as required PREA disclosures.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.
Standard 115.18 Upgrades to facilities and technologies

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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This PREA Auditor interviewed the PREA Compliance Manager, who identified that Columbia Correctional Institution installed additional video monitoring since August 20, 2012 to enhance supervision and monitoring of inmates. Addition on-site documentation was provided to this auditor, which increased CCI’s video monitor totals to 182 cameras.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.21 Evidence protocol and forensic medical examinations

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.21. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XVI. B. 3. (Page 14), which referenced all the necessary PREA language to meet standard 115.21 policy compliance requirements. An excerpt from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.21 states, “The DOC’s medical response shall include the timely dissemination of information and access to emergency contraception and sexually transmitted infections prophylaxis. 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. 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. Facilities shall document efforts to secure services from a local sexual assault service provider.”

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This PREA auditor verified through documentation and an interview with CCI’s Supervisor of the Health Services Unit, OCI utilizes the “Divine Savior Hospital” in Portage, Wisconsin for SANE staff. The “University of Wisconsin Hospital and Clinics” are used for specialty services. CCI has an MOU with “Hope House,” an external victim support resource for inmates who have reported allegations of sexual abuse.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.22 Policies to ensure referrals of allegations for investigations**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.**

PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.22. This PREA Auditor reviewed WIDOC’s Executive Directive #72, which referenced all the necessary PREA language to meet standard 115.22 policy compliance requirements. An excerpt from WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XVII. A. B. (Page 15) as it pertains to PREA Standard 115.22 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. 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.”

Additionally, this PREA auditor verified through documentation and an interview the CCI’s PREA Investigation Team that the Columbia County Sheriff’s Department (CCSD) handles criminal investigation for CCI. CCI assists with CCSD gathering any evidentiary information.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.31 Employee training**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.31. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XI. A. 1. (Page 7), which referenced all the necessary PREA language to meet standard 115.31 policy compliance requirements. An excerpt from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.31 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.

- The DOC’s zero tolerance policy for sexual abuse and sexual harassment;
- How to fulfill staff responsibilities under the DOC sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures;
- Offenders’ right to be free from sexual abuse and sexual harassment;
- The right of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- The dynamics of sexual abuse and sexual harassment in confinement;
- The common reactions of sexual abuse and sexual harassment victims;
- How to detect and respond to signs of threatened and actual sexual abuse;
- How to avoid inappropriate relationships with offenders;
- How to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex or gender nonconforming offenders;
- How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities;
- Relevant laws regarding the applicable age of consent;
- Instruction tailored to male and female offenders; and
- Instruction specific to the unique needs and attributes of juveniles.

This auditor also review the files of 14 Correctional staff, as well as specialized staff. All files contained the documentation verifying HR meeting with new hires about PREA policy, as well as on-line PREA training for all staff. Finally, this auditor reviewed the online PREA course, as well as the PREA test administered after the training.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.32 Volunteer and contractor training**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.32. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XVII.B. (Page 7-8), which referenced all the necessary PREA language to meet standard 115.32 policy compliance requirements. An excerpt from WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA)Section XVII.B. as it pertains to PREA Standard 115.32 states, “All employees, volunteer, and contractor will receive PREA Zero for sexual harassment and sexual abuse training.”

This auditor also reviewed the files of 2 Volunteers and 2 Contractor Files. All files contained the documentation verifying HR meeting with new hires about PREA policy, as well as on-line PREA training for all staff. Finally, this auditor reviewed the online PREA course, as well as the PREA test administered after the training. Volunteers also receives a pamphlet titled, “Sexual Abuse and Sexual Harassment in Confinement: A Guide for Volunteers and Contractors.”

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.33 Inmate education**

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□ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.33. This PREA Auditor reviewed WIDOC’s Executive Directive #72, which referenced all the necessary PREA language to meet standard 115.33 policy compliance requirements. An excerpt from WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XI. B. 3. (Page 3 and 8) as it pertains to PREA Standard 115.33 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. 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.”

The auditor also reviewed various “PREA Education Inmate Participation logs,” reviewed the PREA Orientation agenda, which entails a PREA Video, Review of the Inmate Handbook, and a Question and Answer session regarding PREA. From interviews with interviewing 13 random inmates, 9/13 stated that they receive their comprehensive PREA education prior to arrival to CCI, and when they arrived to CCI, they received minimal PREA education. Every inmate stated that they received a “red” handbook which entailed PREA information. Finally, the auditor observed PREA-related literature posted within all the housing locations in English and Spanish. Columbia Correctional Institution also have a Language Line for Limited English Proficient (LEP) Inmates.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.34 Specialized training: Investigations**

□ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.34. This PREA Auditor reviewed WIDOC’s Executive Directive #72, which referenced all the necessary PREA language to meet standard 115.34 policy compliance requirements. An excerpt from WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XI. A. 4. (Page 8) as it pertains to PREA Standard 115.34 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.”
The auditor also reviewed files and documentation of the four CCI PREA Investigators, to verify specialized sexual abuse and sexual harassment investigation training. This auditor also reviewed documentation from WIDOC’s training tracking system to verify compliance. Finally, each CCI PREA Investigator had appropriate specialized training and was up-to-date.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.35 Specialized training: Medical and mental health care**

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

*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.*

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.35. This PREA Auditor reviewed WIDOC’s Executive Directive #72 (Page 8), which referenced all the necessary PREA language to meet standard 115.35 policy compliance requirements. An excerpt from WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XI. A. 5. (Page 8) as it pertains to PREA Standard 115.35 states, “All medical and mental health care practitioners who work regularly in a DOC facility(ies) shall be trained on the subparts below. The DOC shall maintain documentation that such training has been received:

a. How to detect and assess signs of sexual abuse and sexual harassment;
b. How to preserve physical evidence of sexual abuse;
c. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
d. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The auditor also reviewed files and documentation of the random CCI Medical staff which was interviewed, to verify specialized sexual abuse and sexual harassment training, as well as reporting sexual abuse and sexual harassment procedures.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.41 Screening for risk of victimization and abusiveness**

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

*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.*

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.41. This PREA Auditor reviewed WIDOC’s Executive Directive #72, which referenced all the necessary PREA language to meet standard 115.41 policy compliance requirements. An excerpt from WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XII (Page 8) as it pertains to PREA Standard 115.41 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. Offenders may not be disciplined for refusing to answer or for failing to disclose information in regards to the assessment questions.

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

Facilities shall not consider lesbian, gay, bisexual, transgender or intersex identification or status as an indicator or likelihood of being sexually abusive.

**Adult Facility-Based Intake Screening**

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. Thereafter, an offender’s risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the offender’s risk of sexual victimization or abusiveness.

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.

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. 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."

This PREA auditor interviewed CCI Assessment Team/Psychologist, as well as reviewed twenty-five (25) “Screening for Risk of Victimization and Abusiveness” Assessments. All the required PREA-related language and categories were in compliance.

This PREA auditor concludes this particular standard is in compliance with the above-mentioned PREA Standard.

**Standard 115.42 Use of screening information**

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

**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.**
Standard 115.42. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XIII. A. (Page 10) and Section XIII E. 2, which referenced all the necessary PREA language to meet standard 115.42 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.42 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. Individualized placement determinations shall be made for each offender. 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 addition to serious consideration of the offender’s own views with respect to their own safety.”

This PREA auditor interviewed CCI’s Assessment Team/Psychologist who shared WIDOC’s policy and procedures regarding how the information is used for housing and programmatic purposes from the “Screening for Risk of Victimization and Abusiveness” Assessment. This PREA also reviewed twenty-five (25) “Screening for Risk of Victimization and Abusiveness” Assessments. All the required PREA-related language and categories were in compliance.

This PREA auditor concludes this particular standard is in compliance with the above-mentioned PREA Standard.

**Standard 115.43 Protective custody**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.43. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XIII. B. 1. (Page 10), which referenced all the necessary PREA language to meet standard 115.43 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.43 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.”

This PREA auditor also toured and reviewed documentation from CCI’s Restricted Housing Unit (RHU). There was no documented inmates in RHU for non-disciplinary reasons or for being high risk of sexual victimization. This auditor also interviewed 2 inmates who identified as LGBTI. Both inmates shared that they have not been placed in RHU for the purpose of their risk level.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.51 Inmate reporting**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)
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.

PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.51. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XIV. (Page 11), which referenced all the necessary PREA language to meet standard 115.51 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.51 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. 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. Employees shall accept reports made verbally, in writing, anonymously, and from third parties; promptly document any verbal reports, and immediately report:

- Any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the DOC;
- Any incidents of retaliation against offenders or employees who reported such an incident; and/or
- Any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Reports shall be immediately reported to a supervisor who is not the subject of the allegation, unless reporting to such a person compromises the safety of the alleged victim, witness(es) or reporter. In those instances a report shall be made to the Office of Special Operations, the PREA Office, local law enforcement or submitted electronically via the DOC’s internet site. The DOC shall provide a method for employees to privately report sexual abuse and sexual harassment of offenders.

All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, shall be reported. Employees shall not reveal any information related to a sexual abuse or sexual harassment report to anyone other than to supervisors, investigators and designated officials. Such information shall be limited to information necessary to make treatment, investigation and other security and management decisions.

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. 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. In addition, if the alleged victim is under the age of 18 the facility shall promptly (within 14 days) report the allegation to the alleged victim’s:

- Parents or legal guardians, unless the facility has official documentation showing the parents or legal guardians should not be notified; or
- Child welfare caseworker, if the alleged victim is under the guardianship of the child welfare system; or
- Attorney or other legal representative, if a juvenile court has jurisdiction over the alleged victim.

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. In the event the alleged victim is a juvenile, facility employees shall also notify the appropriate investigative agency. All notifications shall be documented and the appointing authority that receives such notification shall ensure that the allegation is investigated."

This PREA auditor interviewed 13 inmates regarding their knowledge on how to report sexual abuse and sexual harassment. The common responses to reporting avenues among the inmates were: a) Calling any staff; b) Calling 777 or 888 on any inmate telephone; and c) Writing a complaint. Each inmate interviewed also knew that they a PREA abuse call can be made through a Third-Party. Lastly by dialing #777 or #888 to report a PREA incident, there is an option for English or Spanish.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.52 Exhaustion of administrative remedies**

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

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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.52. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) Section XV. (Page 12), which referenced all the necessary PREA language to meet standard 115.52 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.52 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. See Investigations (section XVII.) for guidelines. 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. Further:

A. A time limit shall not be imposed on when an offender may submit a complaint regarding an allegation of sexual abuse or sexual harassment though other applicable time limits may still apply to any portion of the complaint that does not allege an incident of sexual abuse or sexual harassment. All appeals shall be made in accordance with Wisconsin State statutory time limits and referred to the appropriate reviewing authority.

B. The complaint process shall not include a mandatory informal resolution requirement.

C. 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.

D. 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.

E. 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.

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.”

This PREA auditor interviewed 13 random inmates, 10 security staff, and 7 specialized staff, who all understood the understood WIDOC’s CCI administrative procedures to address inmate grievances regarding sexual abuse or sexual harassment. Additionally, each understood that there is no time limit on grievances regarding sexual abuse or sexual harassment.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

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Standard 115.53 Inmate access to outside confidential support services

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.53. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement
(PREA) Section XVI B. 5.  (Page 14), which referenced all the necessary PREA language to meet standard 115.53 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.53 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. Juveniles shall be provided reasonable and confidential access to their attorneys or other legal representation and reasonable access to parents or legal guardians.”

This PREA auditor interviewed 13 inmates who had knowledge of the outside victim advocacy for inmates, but could not identify the actual services they provide. The interviewed inmates also shared that the information regarding external advocacy, is posted on the housing unit’s information board. CCI has an MOU with “Hope House” as the external advocates for sexual abuse victims.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.54 Third-party reporting

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.54. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA), which referenced all the necessary PREA language to meet standard 115.54 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.54 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. 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.”

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.61 Staff and agency reporting duties

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.61. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XIV C. 1. (Page 11), which referenced all the necessary PREA language to meet standard 115.61 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.61 states, “Employees shall accept reports made verbally, in writing, anonymously, and from third parties; promptly document any verbal reports; and immediately report:

d. Any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the DOC;

e. Any incidents of retaliation against offenders or employees who reported such an incident; and/or

f. Any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.”

This auditor interviewed 17 random staff, covering multiple shifts and disciplines within CCI. This auditor asked all the same question, “If you witnessed or was a informed of sexual abuse or sexual harassment here at CCI, what steps do you take in reporting this alleged sexual abuse or sexual harassment?” Each interviewed staff verbally shared their reporting procedures based on their specific role. The responses were consistent with PREA reporting standards. The PREA auditor also verified the most current PREA training of each randomly selected staff. Each staff’s file was in compliance with PREA training standards. Finally, the auditor interviewed the CCI PREA Investigators, who were well versed in their responsibilities, once any reports of sexual harassment and sexual abuse occur.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

### Standard 115.62 Agency protection duties

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

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.62. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XVI (Page 13), which referenced all the necessary PREA language to meet standard 115.62 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.62 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.”

This auditor also interviewed 17 random staff, covering multiple shifts and disciplines within CCI. This auditor asked all the same question, “If you learn an inmate is at risk of imminent sexual abuse, what actions do you take to protect the inmate…and how quickly do you take such actions?” Each interviewed staff verbally shared that they would immediately report the inmate’s imminent risk issue to their immediate supervisor, mental health or the highest ranking officer on duty, with the goal of further investigation or reassigning the inmate to another housing location pending the outcome of further investigation.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

### Standard 115.63 Reporting to other confinement facilities

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

**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.**

This PREA auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.63. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XIV C. 8. (Page 11), which referenced all the necessary PREA language to meet standard 115.63 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.63 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 to the head of the facility where the alleged abuse occurred. In the event the alleged victim is a juvenile, facility employees shall also notify the appropriate investigative agency. All notifications shall be documented and the appointing authority that receives such notification shall ensure that the allegation is investigated.”

In the past 12 months, CCI had 1 documented report of sexual abuse by a CCI inmate, which occurred at a previous facility. The auditor reviewed documentation that once the allegations reported to CCI, the institution met the 72 hours timeframe to notify the institution where the allegation was made.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.64 Staff first responder duties**

□ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (requires corrective action)

**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.**

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.64. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XVI A. 1. (Page 13), which referenced all the necessary PREA language to meet standard 115.64 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.64 states, “Upon learning of an allegation that an offender was sexually abused, the first security staff member to respond to the report shall be required to, at a minimum:

a. Separate the alleged victim and abuser;

b. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;

c. 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

d. 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.”

This auditor interviewed 17 random staff, covering multiple shifts and multiple disciplines within CCI. This auditor also interviewed 1 medical and 2 mental health staff. This auditor asked all the same question, “If you witnessed or were informed of sexual abuse or sexual harassment here at CCI, what steps do you take in reporting this alleged sexual abuse or sexual harassment and preserving/protecting the alleged crime scene?” Each interviewed staff verbally shared their reporting procedures and procedures, within their specific role, to preserve/protect the crime scene (including not allowing the involved inmates to clean, brushing teeth, urinating, defecating, drinking, eating, or changing clothing). All trainings of these 17 random staff was in compliance with PREA training standards, which included PREA
This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.65 Coordinated response**

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

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.65. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA), which referenced all the necessary PREA language to meet standard 115.65 policy compliance requirements.

During the on-site audit, this PREA auditor reviewed WIDOC’s “Sexual Abuse Response Team (SART) Protocol”, which identified each SART member’s role and procedures. Additionally, this PREA auditor interviewed CCI’s four member PREA Investigation Team as well as other members of the Sexual Abuse Response Team. Each was able to identify their coordinated duties within their roles, when an incident of sexual abuse has occurred.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.66 Preservation of ability to protect inmates from contact with abusers**

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- N/A Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

**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.**

According to a WIDOC, no collective bargaining agreements have been entered into or renewed since August 20, 2012, or since the last PREA audit.

This PREA auditor concludes this particular standard (115.66) is “Not Applicable” to the above-mentioned PREA Standard.

**Standard 115.67 Agency protection against retaliation**

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.67. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XVIII A and B (Page 16), which referenced all the necessary PREA language to meet standard 115.67 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.67 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. 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 were 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.”

This PREA auditor interviewed the PREA Investigation Team as well as CCI’s Psychologist, who is the appointed retaliation monitoring staff. She showed documentation of retaliation monitoring from 3 random PREA Investigation files reviewed on the site audit.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.68 Post-allegation protective custody

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.68. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XVIII A. and B. (Page 16), which referenced all the necessary PREA language to meet standard 115.68 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.68 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 as found within Placement.”

This PREA auditor interviewed the PREA Investigation Team as well as OCI’s PREA Compliance Manager. Each stated that zero inmates whom has suffered sexual abuse was placed in segregated housing or involuntary segregation within the past 12 months. Interviewed inmates also stated that segregated housing is not to place alleged victims of sexual abuse or sexual harassment. The inmates further stated that the alleged victim will likely be relocated to another housing unit for separation from the alleged perpetrator.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.71 Criminal and administrative agency investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)
### Standard 115.72 Evidentiary standard for administrative investigations

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**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.**

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.71. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XVII (Page 15), which referenced all the necessary PREA language to meet standard 115.71 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.71 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.

- **A.** 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.
- **B.** 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. 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).
- **C.** 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.
- **D.** 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.
- **E.** Administrative investigations shall include an effort to determine whether employee actions or failures to act contributed to the abuse.
- **F.** 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.
- **G.** 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. Administrative investigative reports shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and the investigative facts and findings.
- **H.** 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.
- **I.** 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.

The auditor also reviewed files and documentation of the 4 CCI PREA Investigators, to verify specialized sexual abuse and sexual harassment investigation training. This auditor also reviewed WDOC’s training tracking system, which assisted in verifying compliance. Additionally, the WIDOC’s CCI utilizes the Columbia County Sheriff’s Department for all criminal investigation with the institution.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.72 Evidentiary standard for administrative investigations**

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**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance**
The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.72. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XVII G. (Page 16), which referenced all the necessary PREA language to meet standard 115.72 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.72 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.”

This auditor also verified through 3 random investigation where “preponderance of the evidence” is utilized in determining the outcome of allegations of sexual abuse and sexual harassment.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.73 Reporting to Inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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.

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.73. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XVII K, L, and M (Page 16), which referenced all the necessary PREA language to meet standard 115.73 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.73 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. 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. 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.”

WIDOC has policies and procedures to report outcomes of investigations to the inmate making the sexual abuse/harassment allegation. The PREA Auditor reviewed twenty (20) investigation finding memos sent to inmates. All reports submitted by CCI’s investigation team contained all the necessary PREA-related language, findings, and WIDOC’s zero-tolerance for any retaliation. Additionally, according to interviews with the CCI PREA Investigators, the inmate is verbally informed of the outcomes at its conclusion.

This PREA auditor concludes this particular standard is in compliance with the above-mentioned PREA Standard.

Standard 115.76 Disciplinary Sanctions for Staff

☐ Exceeds Standard (substantially exceeds requirement of standard)

PREA Audit Report 24
X  Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐  Does Not Meet Standard (requires corrective action)

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.

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.76. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XIX M. (Page 17), which referenced all the necessary PREA language to meet standard 115.76 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.76 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. Sanctions shall be commensurate with the nature and circumstances of the violation, the staff member’s disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories. Termination is the presumptive sanction for a staff member who engaged in sexual abuse. All terminations for violations of the 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. 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.”

The auditor also verified through interviews with CCI’s Human Resources and Compliance Manager that the standard of practice is consistent with the above standard.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.77 Corrective action for contractors and volunteers**

☐  Exceeds Standard (substantially exceeds requirement of standard)

X  Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐  Does Not Meet Standard (requires corrective action)

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.

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.77. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XIX A. (Page 4), which referenced all the necessary PREA language to meet standard 115.77 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.77 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.”

The auditor also verified through interviews with CCI’s Human Resources and Compliance Manager that the standard of practice is consistent with the above standard.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

**Standard 115.78 Disciplinary sanctions for inmates**
The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.78. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XIX B. (Page 17), which referenced all the necessary PREA language to meet standard 115.78 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.78 states, “Offenders who have committed offender-on-offender sexual abuse are subject to disciplinary sanctions pursuant to a formal disciplinary process. 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. 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. 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. For juveniles, the DOC may require participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, but not as a condition to general programming or education. An offender may only be disciplined for sexual contact with an employee upon a finding that the employee did not consent to such contact. 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. 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.”

The auditor also verified through interviews with CCI’s Compliance Manager and CCI’s PREA Investigation Team that the standard of practice is consistent with the above standard. Additionally, the auditor reviewed the Rules of the WIDOC—Inmate Offenses and Disciplinary Procedures,” which documented similar PREA compliant language within it Disciplinary Codes.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

**Standard 115.81 Medical and mental health screenings; history of sexual abuse**

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

**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.**

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.81. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XII E. and F. (Page 9), which referenced all the necessary PREA language to meet standard 115.81 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.81 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. 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. 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.”

This PREA auditor interviewed CCI’s Assessment Team/Psychologist who shared WIDOC’s policy and procedures regarding how the information is used for medical-related, housing and programmatic purposes from the “Screening for Risk of Victimization and Abusiveness” Assessment. This PREA also reviewed twenty-five (25) “Screening for Risk of Victimization and Abusiveness” Assessments. Questions #7 and #8 on the “Screening for Risks of Victimization and Abusiveness” Assessment has a checkbox which, if answered YES, refers the inmate to medical or mental health for a follow-up screening. Additionally, all the required PREA-related language and categories were in compliance.

This PREA auditor concludes this particular standard is in compliance with the above-mentioned PREA Standard.

**Standard 115.82 Access to emergency medical and mental health services**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.**

PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.82. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XVI B. 2. (Page 14), which referenced all the necessary PREA language to meet standard 115.82 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.82 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”

The auditor also interviewed CCI’s Psychologist, the Mental Health Victims Advocate, as well as random inmates. Each verified that access to medical services and crisis intervention services are responded to within a reasonable timeframe (1-72 hours). Also, the documentation CCI submitted while on site verifies timely access to medical and mental health services.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.83. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XII E. and F. (Page 9), which referenced all the necessary PREA language to meet standard 115.83 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.83 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.”

The auditor also interviewed CCI’s Psychologist and Mental Health Victim’s Advocate. Each verified that ongoing access to medical and mental health care for sexual abuse victims and abusers.

This PREA auditor concludes this particular standard is in compliance with the above-mentioned PREA Standard.

**Standard 115.86 Sexual abuse incident reviews**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.**

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.86. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XII E. and F. (Page 9), which referenced all the necessary PREA language to meet standard 115.86 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.86 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. The review team shall:

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.

The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.”

According to CCI, they conducted one incident sexual abuse/sexual harassment incident review for 2016. The auditor reviewed the one (1) CCI “Sexual Abuse Incident Review Form” and verified that the form contained the necessary PREA-related documentation and personnel were present regarding this standard.

This PREA auditor concludes this particular standard is in compliance with the above PREA Standard.

**Standard 115.87 Data collection**
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.87. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XXI A. 1. (Page 18), which referenced all the necessary PREA language to meet standard 115.87 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.87 states, “The DOC shall collect accurate, uniform data from incident-based documents such as reports, investigation files and sexual abuse incident reviews for every allegation of sexual abuse within facilities, including facilities with which it contracts for the confinement of offenders, using a standardized instrument and set of definitions. The extracted data, at minimum, shall include the information to answer all questions from the most recent version of the Department of Justice Survey of Sexual Victimization. This data shall be aggregated annually, reported to the Department of Justice as requested and, with personal identifiers removed, posted publicly to the DOC’s website annually.”

The auditor also verified through interviews with CCI’s Human Resources and OCI’s Compliance Manager that the standard of practice is consistent with the above standard.

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

Standard 115.88 Data review for corrective action
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.88. This auditor reviewed the WIDOC Web-based PREA Annual Data Report After this PREA Auditor’s examination of this comprehensive reports, it contains all the elements and language to meet this 115.88 PREA Standard.

Standard 115.89 Data storage, publication, and destruction
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
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.

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.87. This PREA Auditor reviewed WIDOC’s Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XXI A. 1. (Page 18), which referenced all the necessary PREA language to meet standard 115.87 policy compliance requirements. Excerpts from WIDOC’s Executive Directive #72 as it pertains to PREA Standard 115.87 states, “All data shall be securely retained and maintained for at least 10 years after the date of initial collection. The DOC shall collect accurate, uniform data from incident-based documents such as reports, investigation files and sexual abuse incident reviews for every allegation of sexual abuse within facilities, including facilities with which it contracts for the confinement of offenders, using a standardized instrument and set of definitions. The extracted data, at minimum, shall include the information to answer all questions from the most recent version of the Department of Justice Survey of Sexual Victimization. This data shall be aggregated annually, reported to the Department of Justice as requested and, with personal identifiers removed, posted publicly to the DOC’s website annually.”

This PREA auditor concludes this particular standard is in compliance and meets the above-mentioned PREA Standard.

**AUDITOR CERTIFICATION**

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

DeShane Reed

January 27, 2017