

PREA Facility Audit Report: Final

Name of Facility: McNaughton Correctional Institution

Facility Type: Prison / Jail

Date Interim Report Submitted: 11/02/2017

Date Final Report Submitted: 04/19/2018

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Yvonne Gorton	Date of Signature: 04/19/2018

AUDITOR INFORMATION	
Auditor name:	Gorton, Yvonne
Address:	
Email:	gortony@michigan.gov
Telephone number:	
Start Date of On-Site Audit:	09/20/2017
End Date of On-Site Audit:	09/21/2017

FACILITY INFORMATION	
Facility name:	McNaughton Correctional Institution
Facility physical address:	8500 Rainbow Road, Lake Tomahawk, Wisconsin - 54539
Facility Phone	715-277-2484
Facility mailing address:	
The facility is:	<input type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
Facility Type:	<input checked="" type="radio"/> Prison <input type="radio"/> Jail

Primary Contact			
Name:	Brad Kosbab	Title:	Superintendent
Email Address:	Bradly.Kosbab@Wisconsin.Gov	Telephone Number:	715-277-2484

Warden/Superintendent			
Name:	Brad Kosbab	Title:	Superintendent
Email Address:	Bradley.Kosbab@Wisconsin.Gov	Telephone Number:	715-277-2484

Facility PREA Compliance Manager			
Name:	Brad Kosbab	Email Address:	Bradley.Kosbab@wisconsin.gov

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

Facility Characteristics		
Designed facility capacity:	112	
Current population of facility:	105	
Age Range	Adults: 22-73	Youthful Residents:
Facility security level/inmate custody levels:	Minimum/Minimum Community	
Number of staff currently employed at the facility who may have contact with inmates:	22	

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

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

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

AUDIT FINDINGS

Narrative:

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

The Prison Rape Elimination Act (PREA) on-site audit, of the McNaughton Correctional Center, in Lake Tomahawk, Wisconsin, took place on September 20 and 21, 2017. It was conducted by DOJ Certified PREA Auditor, Yvonne Gorton, assisted by Michigan Department of Corrections Prison Counselor, John Morrell. Accompanying the auditors was CJ Carlson, Michigan Department of Corrections Agency PREA Coordinator. Audit notices were posted at the facility six weeks prior to the audit date and auditors were able to observe those postings throughout the facility. No correspondence was received from any inmates at the McNaughton Correctional Center.

The Wisconsin Department of Corrections staff completed the Pre-Audit Questionnaire, on the Online Audit System, in the weeks preceding the on-site audit, enabling auditors to complete a thorough review of documentation prior to their arrival at the facility. Auditors reviewed Departmental policy and procedures, forms, the inmate handbook, training curriculums and training records. Auditors also had the opportunity to review an organizational chart, the facility staffing plan, posters identifying phone numbers for both inside and outside the Department, that are free calls inmates can make to report sexual abuse or sexual harassment, phone numbers and an address for a local advocacy agency, and a national rape crisis hotline number.

Facility Superintendent, Brad Kosbab, Agency PREA Coordinator, Cheryl Frey, and Departmental PREA Analyst, Leigha Weber met Auditors in the lobby and escorted them to Brad's office where an entrance meeting was held. After introductions and welcoming remarks, Auditors explained their proposed process for carrying out the audit and staff presented both inmate and staff rosters for Auditors' review and selection of random subjects to interview. Immediately after the meeting, Auditors, accompanied by Superintendent Kosbab, PREA Coordinator Frey, and PREA Analyst Weber, toured the entire facility.

The Center is a small, minimum security facility consisting of an Administration Building, three Housing Units, a Food Service Building, and various outbuildings that house a woodshop and woodshop storage room, a maintenance area, and a bulldozer storage area. An additional small building houses a classroom where GED testing is conducted and a general library and electronic law library are available. There are two security staff assigned per shift that do make unannounced rounds and cameras are used to supplement security rounds. Cameras are placed inside and outside the center, and camera placement is arranged to maximize use. There are cameras in all of the housing units, but the cameras do not cover all areas of the basements or any of the maintenance out buildings.

Throughout the tour, it was noted that the PREA audit notices, and information regarding how to report instances of sexual abuse and sexual harassment, including both inside and outside numbers that are free calls, were posted in the Housing Units, the Administrative Building Lobby/Visiting Room, and in other areas that inmates frequent. Auditors were able to dial both the inside and outside numbers, from the Housing Unit phones that inmates use, and did determine that the calls are properly answered and

are free. Also posted was the name and contact information for the local advocacy agency, Tri-County Agency on Domestic Abuse and Sexual Assault. A phone call to that agency verified that they have entered into a MOU, with the Center, and will provide advocacy services for inmates if needed. Auditors also observed that female staff do announce when they are entering the Housing Units and a blue light, on the side of the Administration Building, that is visible from the Housing Units when illuminated, alerts inmates that a female Sergeant is on shift and will be making rounds in the Housing Units. Bathrooms, in the Housing Units, have privacy panels on the toilet stalls and single person shower stalls with curtains, enabling inmates to shower and use the toilet without being observed by staff of the opposite gender.

While touring the grounds of the facility, Auditors noticed some areas of concern. In Housing Unit 2, there is a small room, in the basement, that contains two inmate telephones and has a door on the room, making it private and an easy place to hide. On the grounds of the facility are a vehicle garage, a woodshop and a paint spray booth that are connected to each other, a woodshop storage room, and a bulldozer storage area that are all left unlocked during business hours. The woodshop storage room and the paint spray booth are seldom used and have no supervision. In addition, there is a door, in the woodshop that separates it from an old, no longer used, empty coal storage room, The door between these two rooms was unlocked and Auditors were able to walk straight through from one area to the other. The old coal storage room has many blind spots and has a door to the outside that has no locking mechanism, making the whole building accessible at all times.

Since the onsite audit was conducted, locking mechanisms have been installed on the identified buildings and a directive to staff has been issued that requires the buildings to be locked except when staff are present and the buildings are in use. In addition, the door on the telephone room has been removed and a bathroom door, in the workshop building, that locked from the inside and had no window, has been reworked so that there are screened areas at the top and bottom, and staff can easily ascertain if there is anyone in the room but cannot observe anyone dressing or performing bodily functions. Photos that were submitted clearly showed that the appropriate corrective action has been taken.

Immediately following the tour, Auditors began interviewing inmates using the DOJ protocols that are designed to assist Auditors in determining inmate knowledge of the Agency's zero-tolerance policy, their right to be free from sexual abuse and sexual harassment, availability of reporting mechanisms and the services that are available to victims. Because a large number of the inmate population, on any given day, are away from the facility working at jobs in the local community, selecting an adequate sample was a bit challenging. Inmates were selected for interview by choosing the first name on the roster, counting down 10, and repeating the process until an adequate sample was obtained. Auditors interviewed 17 random inmates and one specialized inmate, an inmate who had disclosed prior sexual victimization during risk screening. At the time of the audit, there were no physically or cognitively disabled inmates, no limited English proficient inmates, and no gay, bisexual or transgender inmates housed at the McNaughton Correctional Center. Auditors did not find this concerning because of the criteria inmates must meet to be housed there and the selection process used to identify inmates who are minimum security, work ready, and who are nearing their release date.

Staff to interview were chosen from a daily staffing roster, ensuring that interviews were conducted with staff from every shift. Because the Center is a small facility, we interviewed nearly every staff person assigned there as well as some who are responsible for multiple facilities. The Agency Head, Warden, Human Resources staff, and Investigative Staff do not have offices at the facility so those interviews were conducted by telephone. Auditors interviewed random staff, both custody and non-custody, first-responders, higher level staff, intake staff, staff responsible for conducting risk screening, investigative

staff, victim services staff, and health care staff. The facility does not have mental health care staff so inmates needing mental health care are transferred to another facility. Auditors also interviewed a volunteer and several contracted staff. Medical staff do not conduct forensic exams but will transport inmates to a nearby hospital, in Rhinelander, if a SANE is needed. A call to the hospital verified that a SANE will be made available to inmates from the McNaughton Correction Center when needed. All staff and volunteer interviews were conducted using the DOJ protocols.

Agency PREA Analyst, Leigha Weber, presented documentation of all required staff training, including that of contracted staff, having been completed, but the Volunteer Coordinator was not able to provide documentation of Volunteer PREA training. In fact, he was under the impression that he was not required to retain documentation of Volunteer PREA training. Auditors reviewed Agency policy and ascertained that it does require Volunteers to be trained and to document understanding of the training, and it requires staff to maintain that documentation. A volunteer confirmed, in an interview, that he had been trained on PREA matters and was very well informed. He answered all interview questions appropriately, and without hesitation, confirming that the Volunteer Orientation he had been given included PREA information. Since the onsite portion of the audit, the facility submitted documentation demonstrating that volunteers have been properly trained, and have verified with the appropriate signatures clearly displayed, that they understood the training. They also submitted documentation of instructions to staff on how to obtain the proper documentation, complete with volunteer signatures, at the time the Volunteer Orientation is conducted.

Staff had indicated, in the online PAQ, that departmental policy requires that all inmates transferring into the facility be initially screened, within 72 hours of intake and rescreened, based on any additional or new, relevant information, within 30 days of arrival. They also indicated that due to a rarely occurring lack of staff, only 89% of inmates who transferred into McNaughton Correctional Center, in the past 12 months, were initially screened within 72 hours of arrival. Superintendent, Brad Kosbab, assured auditors that a process has been put into place, to identify and train additional staff to conduct the initial risk screenings, so that this problem will not occur again. Additionally, the WIDOC has not been in the practice of rescreening all inmates within 30 days, instead screening only those for whom new, relevant information was obtained since the initial screening took place. Effective October 1, 2017, the Department has revised its directive to say that all inmates transferring into facilities will be initially screened within 72 hours and rescreened within 30 days. The Center agreed to provide documentation, at a later point, verifying that these screenings are being appropriately done.

During the Corrective Action Period, PREA Analyst, Leigha Weber, submitted documentation demonstrating that the Wisconsin Department of Corrections, as of October 1, 2017, requires that all offenders be reassessed within 30 days of their arrival at the facility. The screening tool that is used requires staff to assess whether offenders' answers to previously asked questions have changed or if the screener has received any additional, relevant information, since the admission screening, that bears upon the inmate's risk of victimization or abusiveness. The screening tool bears the electronic signature, including employee ID number, of the staff who completes the reassessment and the date of completion. Documentation that was submitted verifies that the facility now meets the standard.

McNaughton Correctional Center reported that no allegations of sexual abuse or sexual harassment were received in the last 12 months. Auditors requested to review one of their most recent investigations, which occurred prior to the onset of the audit period, to ensure that a proper procedure was followed. Superintendent, Brad Kosbab, willingly presented that documentation, which Auditors reviewed carefully and observed that everything was in order.

The Wisconsin Department of Corrections, and the McNaughton Correctional Center, staff were all very well prepared for the audit. All pre-audit materials were in order and other requested documentation was presented promptly. All required policies, logs, files and other documentation were checked for PREA compliance. Interviews with staff indicated that they are a group well educated on PREA matters. Auditors were able to talk informally, with both staff and inmates, during the tour of the facility, and all of them were well informed on prisoners' rights and the services available to them and on the responsibilities of staff employed by the Wisconsin Department of Corrections.

An exit meeting was conducted on September 21, 2017, with Superintendent Brad Kosbab, Agency PREA Coordinator, Cheryl Frey, and Agency PREA Analyst, Leigha Weber. All three were open to hearing Auditors' assessment of their Facility's attempts to comply with PREA standards and all of them discussed how they would go about bringing the facility into compliance in the areas where Auditors identified deficiencies. Department and facility staff were polite and helpful, during the audit, and all of them demonstrated a willingness to bring their facility into compliance.

AUDIT FINDINGS

Facility Characteristics:

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

The McNaughton Correctional Center is a minimum security prison for male offenders, located near Lake Tomahawk, Wisconsin. It was originally built, in 1910, to be used as a Tuberculosis Rehabilitation Camp. The Camp closed in 1957 and the buildings and grounds were deeded to the Wisconsin Department of Corrections to house the McNaughton Correctional Center. Some of the original buildings are still standing and are listed on the National Register of Historic Buildings. The facility is part of the Wisconsin Correctional Center system, an "institution" comprised of 14 adult, male correctional centers, overseen by a single warden whose office is centrally located in Madison. The primary goal of the Wisconsin Correctional Center System is to prepare offenders for release to the community by helping them, through the work release program, obtain employment that will allow them to develop and demonstrate good work habits, pay their obligations and save money for release. The facility staff evaluate offenders' risk for placement in the community by considering offense history, risk assessment, conduct history, length of sentence and victim concerns.

The Center is a small facility with an operating capacity of 102 inmates and an average daily population of 102 inmates. The setting is not that of a typical correctional institution. There are no gates, no bars and no fences. Instead, the Center sits on a lake where inmates can boat, swim, and fish, and can clean, cook and eat all the fish they catch.

The McNaughton Correctional Center is comprised of Nine buildings which includes three housing units containing a Center Library, a day room/TV viewing area and a weight room. There are no single rooms but there are rooms where a prisoner can be single celled, to separate him from other prisoners, if that need should arise quickly. An Administration Building holds the Control Center and offices for support staff, health service staff, social workers and Supervisors. A Food Service area is also attached and the lobby of the Administration Building doubles as a Visiting Room. There are also some outbuildings that house a bulldozer garage, woodshop and woodshop storage area, a paint spray booth and a maintenance area. The Housing Units, Food Service, and some other areas with inmate access are outfitted with video monitoring and mirrors. Cameras are placed inside and outside to supplement security rounds.

Staff assigned to the McNaughton Correctional Center include two custody supervisors who are responsible for 24-hour supervision of 14 correctional sergeants and 11 non-uniformed staff. The Superintendent has ultimate responsibility for the Center and is the highest in the chain-of-command on-site. One Captain is also assigned. While the Superintendent has core hours of 7:45a-4:30p and the Captain's core hours are 7a-4p, actual work hours are varied by both supervisors to ensure adequate supervision of staff. Due to increased responsibility of line staff and limited presence of supervisors, the Center is staffed with correctional sergeants, rather than correctional officers. The captain serves as Inmate Complaint Examiner and Religious Services Coordinator.

Non-custody staff includes one Office Support staff, two Social Workers, one half-time and one full-time,

three part-time Registered Nurses and one Nurse Practitioner who works an average of eight hours per month. One Food Service Leader manages the Kitchen, and the Center employs one Maintenance Repair Specialist, and one Employment Services Specialist.

AUDIT FINDINGS

Summary of Audit Findings:

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

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

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

Auditors found three Standards Not Met:

115.13 (a) (5) Supervision and Monitoring - During the tour of the facility, auditors noticed some areas of concern with respect to blind spots:

- In Housing Unit 2, there is a small room, in the basement, that contains two inmate telephones and has a door on the room, making it private and an easy place to hide. Auditors felt that the door should be removed from the telephone room to make it accessible to the common area/day room that is just outside the phone room.
- On the grounds of the facility are a vehicle garage, woodshop, woodshop storage room and a paint spray booth that are all left unlocked during business hours. The wood shop storage room and the paint spray booth are seldom used and have no supervision. There is a door, in the woodshop basement, that separates the woodshop from an old coal room that is empty and no longer used. This old coal room is accessible to inmates and has many blind spots. This room also has a door to the outside that has no locking mechanism on it, making it accessible at all times.
- The bulldozer storage area, and the vehicle garage, are not secure and offer blind spots.
- The bathroom in the equipment storage area, next to the bulldozer, has a door with no window, that can be bolted from the inside.

Corrective action required:

- Remove the door, from the telephone area, in the basement of Housing Unit 2. The area is far enough from the common area that offenders will still be able to make phone calls semi-privately but will also have easy access to the common area.
- Install locking mechanisms on the vehicle garage, the door from the outside into the coal room, the woodshop storage room, the paint spray booth, the bulldozer storage area, and on the door that separates the woodshop from the no longer used coal room, and issue a memo to staff informing them that these areas are to remain locked except when staff is present.
- Remove portions of the bathroom door, in the equipment storage area next to the bulldozer, so that staff can monitor activity without being able to view

inmates using the toilet.

- Provide photos and a copy of the memo, to auditor, of all these changes having been made.

Corrective action completed:

Since the onsite audit was conducted, locking mechanisms have been installed on the identified buildings and a directive to staff has been issued that requires the buildings to be locked except when staff are present and the buildings are in use. In addition, the door on the telephone room has been removed and a bathroom door, in the workshop building, that locked from the inside and had no window, has been reworked so that there are screened areas at the top and bottom, and staff can easily ascertain if there is anyone in the room but cannot observe anyone dressing or performing bodily functions. Photos that were submitted demonstrated that these changes have been made and the facility now meets the standard.

115.32(c) Volunteer and Contractor Training

WIDOC form DOC-2786 contains a signature line for Volunteers and Contractors to sign verifying that they have received PREA training and that they understand the training they received but no such documentation was available to demonstrate that Volunteers had been trained and understood the training they received. A Volunteer who was interviewed recalled the training on the Agency's zero-tolerance policy on sexual abuse and sexual harassment and said that to report an incident he could report to either the Sergeant or the Captain. He also recalled that the training stressed that all allegations are to be reported and investigated. Auditors believe that Volunteers are receiving the proper training but that the documentation is not being maintained as required by both the standard and Agency policy.

Corrective Action Required: The facility will need to ensure that all current Volunteers were appropriately trained and will need to submit documentation verifying that the volunteers understood the training they have received.

Corrective Action Completed: Since the onsite portion of the audit, the facility submitted documentation demonstrating that volunteers have been properly trained, and have verified with the appropriate signatures clearly displayed, that they understood the training. They also submitted documentation of instructions to staff on how to obtain the proper documentation, complete with volunteer signatures, at the time the Volunteer Orientation is conducted.

115.41 (f) Screening for Risk of Victimization and Abusiveness

Executive Directive #72, in Section XII, D, calls for the facility to reassess offenders' risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the initial screening. The agency policy does not currently stipulate that each offender will be reassessed within 30 days of arrival at the facility but a revision of the policy is in process and the WIDOC is working to implement an agency-wide rescreening process, which will begin in October 2017. The screening process will be automated and will include the ability to rescreen inmates within 30 days of admission. The facility does not currently meet this standard but will be able to submit documentation of the rescreening after the new process is in place.

Corrective Action Completed: During the Corrective Action Period, PREA Analyst, Leigha Weber, submitted documentation demonstrating that the Wisconsin Department of Corrections, as of October 1, 2017, requires that all offenders be reassessed within 30 days of their arrival at the facility. The screening tool that is used requires staff to assess whether offenders' answers to previously asked questions have

changed or if the screener has received any additional, relevant information, since the admission screening, that bears upon the inmate's risk of victimization or abusiveness. The screening tool bears the electronic signature, including employee ID number, of the staff who completes the reassessment and the date of completion. Documentation that was submitted verifies that the facility now meets the standard.

Auditors found one Standard Exceeded:

115.71 (i) McNaughton Correctional Center will conduct administrative investigations on all allegations of sexual abuse and sexual harassment and will refer allegations of situations that may involve criminal behavior to the Oneida County Sheriff's Department. The facility will retain records as long as the alleged abuser is employed by the WIDOC, or is incarcerated by the WIDOC, plus 10 years, which exceeds the requirement of the standard.

Number of Standards Exceeded: 1

115.71 Criminal and Administrative Agency Investigations

Number of Standards Met: 44

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

115.12 Contracting With Other Entities for the Confinement of Inmates

115.13 Supervision and Monitoring

115.14 Youthful Inmates

115.15 Limits to Cross-gender Viewing and Searches

115.16 Inmates With Disabilities and Inmates Who Are Limited English Proficient

115.17 Hiring and Promotion Decisions

115.18 Upgrades to Facilities and Technologies

115.21 Evidence Protocol and Forensic Medical Examinations

115.22 Policies to Ensure Referrals of Allegations for Investigations

115.31 Employee Training

115.32 Volunteer and Contractor Training

115.33 Inmate Education

115.34 Specialized Trainings: Investigations

115.35 Specialized Trainings: Medical and Mental Health Care

115.41 Screening for Risk of Victimization and Abusiveness

115.42 Use of Screening Information

115.43 Protective Custody

115.51 Inmate Reporting

115.52 Exhaustion of Administrative Remedies

115.53 Inmate Access to Outside Confidential Support Services

115.54 Third-Party Reporting

115.61 Staff and Agency Reporting Duties

115.62 Agency Protection Duties

115.63 Reporting to Other Confinement Facilities

115.64 Staff First Responder Duties

115.65 Coordinated Response

115.66 Preservation of Ability to Protect Inmates from Contact with Abusers
 115.67 Agency Protection Against Retaliation
 115.68 Post-allegation Protective Custody
 115.72 Evidentiary Standard for Administrative Investigations
 115.73 Reporting to Inmates
 115.76 Disciplinary Sanctions for Staff
 115.77 Corrective Action for Contractors and Volunteers
 115.78 Disciplinary Sanctions for Inmates
 115.81 Medical and Mental Health Screenings; History of Sexual Abuse
 115.82 Access to Emergency medical and Mental Health Services
 115.83 Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers
 115.86 Sexual Abuse Incident Reviews
 115.87 Data Collection
 115.88 Data Review for Corrective Action
 115.89 Data Storage, Publication, and Destruction
 115.93 Audit of Standards
 115.401 Frequency and Scope of Audits

Number of Standards Not Met: 0

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>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.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72 outlines the Department's zero tolerance for sexual abuse, sexual harassment and report-related retaliation in its facilities, including facilities with which the Department contracts for the confinement of offenders. The Directive includes definitions of prohibited behavior, sanctions for those found to have participated in prohibited behavior, and describes agency strategies and responses to reduce and prevent sexual abuse and harassment of inmates. Strategies include training all staff, contractors, and volunteers to recognize, respond to, and report sexual abuse and sexual harassment, and providing inmates with a comprehensive orientation that details their right to be free from sexual assault, sexual harassment, and report-related retaliation. The agency also provides multiple ways for offenders to report sexual abuse or sexual harassment and provides contact information for a local advocacy agency.</p> <p>(b) The State Agency PREA Director recently came to the position of Agency PREA Director. Prior to her appointment, the Statewide PREA Program Analyst, for the Wisconsin Department of Corrections was filling that role. State Agency PREA Director reports that her position is a dedicated position and that she has sufficient time and authority to the development and implementation of agency efforts in PREA compliance. An organizational chart was presented identifying the position of Agency PREA Director and demonstrating that the position reports to the Department Assistant Deputy Secretary.</p> <p>(c) The agency has 38 PREA Compliance Managers, at the Correctional Facilities throughout the state, and each of the 38 PREA Compliance Managers has a backup.</p> <p>McNaughton Correctional Center PREA Compliance Manager verified, in an interview, that he does have enough time to manage all of his PREA related responsibilities. His position is that of Superintendent of the Facility and he reports to the Warden.</p>

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) (b) The Wisconsin Department of Corrections contracts with 10 county Sheriffs' Offices to temporarily house Department inmates. Copies of ten Memoranda of Understanding were provided to demonstrate the agreements with these agencies. Review of provided MOUs revealed the agencies' obligation to adopt and comply with the PREA standards and the Department's right to conduct a compliance review, of the agencies, that includes an examination of incident reports and offender records related to sexual abuse or sexual harassment allegations. The agreements also require the Sheriff to notify the Department of any such allegations within 24 hours. In addition, the contract agencies are required to submit reports from PREA Audits yearly. Agencies that are not audited, in any given year, are required to submit a PREA Compliance Summary outlining their compliance-related achievements and their plan to comply with any unmet standards.</p> <p>The McNaughton Correctional Center itself does not contract for the confinement of inmates.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72 stipulates that all department facilities must develop, document, and make best efforts to comply with a staffing plan that provides for adequate levels of employees and video monitoring where applicable, to protect offenders against sexual abuse. When calculating adequate staffing levels and determining the need for video monitoring, facilities are required to consider:</p> <ol style="list-style-type: none"> (1) Generally accepted correctional practices; (2) Any judicial, federal investigative and internal/external oversight agency findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies (4) Any findings of inadequacy from internal or external oversight bodies (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) (6) The composition of the inmate population (7) The number and placement of supervisory staff (8) Institution programs occurring on a particular shift (9) Any applicable State or local laws, regulations, or standards (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse <p>(1) Any other relevant factors</p> <p>(b) The Superintendent and Warden identified that the facility does not deviate from the staffing plan and will use overtime where necessary to comply with the plan. In an interview, the Warden said, "We have forced overtime. Staff will either volunteer, or be forced, to pick up the hours. We have coverage for the shift."</p> <p>(c) The Superintendent verified that the Facility does have a staffing plan and provided a copy verifying that the plan was reviewed within the last year. Since the last PREA Audit, the average daily number of inmates, at the McNaughton Correctional Center was 102 inmates. The current staffing plan was predicated on a population of 102 inmates. A spreadsheet was provided that demonstrated the yearly review of the staffing plan, by the Agency PREA Coordinator in collaboration with the Facility PREA Compliance Manager, and showed that the plan is current.</p> <p>(d) Executive Directive #72, in Section D, requires that supervisory staff shall conduct and document unannounced rounds, on all shifts, to identify and deter employee sexual abuse and sexual harassment. It also prohibits DOC employees from alerting other employees that these supervisory rounds are being made unless such announcement is related to the legitimate operational functions of the facility. Shift reports containing documentation of unannounced supervisory rounds being made, on all three shifts over various time frames, were presented and were reviewed by auditors. The Superintendent, said, in an interview, "We tell them not to and we could hear on the radio if they did. We only have two staff, other than the Captain, so it's not an issue here. "</p> <p>During the tour of the facility, auditors noticed some areas of concern with respect to blind</p>

spots:

- In Housing Unit 2, there is a small room, in the basement, that contains two inmate telephones and has a door on the room, making it private and an easy place to hide. Auditors felt that the door should be removed from the telephone room to make it accessible to the common area/day room that is just outside the phone room.
- On the grounds of the facility are a vehicle garage, woodshop, woodshop storage room, a paint spray booth and a bulldozer storage area that are all left unlocked during business hours. The wood shop storage room and the paint spray booth are seldom used and have no supervision. There is a door, in the woodshop, that separates it from an old coal room that is empty and no longer used. This old coal room is accessible to inmates and has many blind spots. This room also has a door to the outside that has no locking mechanism on it, making it accessible at all times.
- The bulldozer storage area and vehicle garage are not secure and offer blind spots.
- The bathroom in the equipment storage area, next to the bulldozer, has a door with no window, that can be bolted from the inside. Auditors recommended that some of the door be removed to make this an area that staff can monitor without being able to view inmates using the toilet.

Auditors acknowledge that McNaughton is a minimum security facility, with a relatively low inmate population, and many inmates are away from the facility, during business hours, working at jobs in the local community. However these blind spots present a security concern because of the lack of security cameras, on the grounds, and the small number of staff assigned to the facility.

Corrective action required:

- Remove the door, from the telephone area, in the basement of Housing Unit 2. The area is far enough from the common area that offenders will still be able make phone calls semi-privately but will also have easy access to the common area.
- Install locking mechanisms on the vehicle garage, the door from the outside into the coal room, the woodshop storage room, the paint spray booth, the bulldozer storage area, and on the door that separates the woodshop from the no longer used coal room, and issue a memo to staff informing them that t these areas are to remain locked except when staff is present.
- Remove portions of the bathroom door, in the equipment storage area next to the bulldozer, so that staff can monitor activity without being able to view inmates using the toilet.
- Provide photos and a copy of the memo, to auditor, of all these changes having been made.

Corrective action completed: Since the onsite audit was conducted, locking mechanisms have been installed on the identified buildings and a directive to staff has been issued that requires the buildings to be locked except when staff are present and the buildings are in use. In addition, the door on the telephone room has been removed and a bathroom door, in the workshop building, that locked from the inside and had no window, has been reworked so that there are screened areas at the top and bottom, and staff can easily ascertain if there is anyone in the room but cannot observe anyone dressing or performing bodily functions. Photos that were submitted demonstrated that these changes have been made and the facility

	now meets the standard.
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a-c) The McNaughton Correctional Center does not house inmates under the age of 18.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72 identifies that, except in exigent circumstances, cross-gender patdown searches and cross-gender strip searches are not permitted in adult facilities of the Wisconsin Department of Corrections. Additionally, Division of Adult Institutions Policy #306.17.02 outlines that staff directly observing an inmate during a strip search are to be of the same gender as the inmate and that a second staff person is to only observe the staff performing the strip search.</p> <p>The same policy dictates that all body cavity searches of inmates are to be conducted off-site by medical personnel. No cross-gender strip searches or cross-gender visual body cavity searches are done at McNaughton Correctional Center.</p> <p>(b-c) There are no female inmates housed at McNaughton Correctional Center.</p> <p>(d) Facility procedure 900.07.01 provides for inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks including viewing via video camera. All inmates interviewed verified that they were able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing them. Auditors noted, during the tour of the facility, that all Housing Units showers are single person shower stalls with shower curtains. In addition, bathrooms in the Housing Units have privacy panels to provide privacy for prisoners using the toilet.</p> <p>(d) Executive Directive #72 calls for staff of the opposite gender to announce their presence when entering an inmate housing unit. During the tour of the facility, auditors noted that staff did announce the presence of female staff, and auditors, entering an inmate housing unit. In addition, staff explained that a blue light, on the outside of the Administration Building, when lit, indicated that the Center's one female custody employee was on shift and would be making rounds in the Housing Units. Prisoners who were interviewed said, "there is only one female working here and, early in the morning, they say, 'female in the area.'" Other prisoners identified that since there is only one female custody staff, they hear her making announcements, early in the morning, and know that she is working and will be making rounds in their Housing Units. Overall, of all inmates interviewed, auditors noted that a number of them were not familiar with the blue light, or had seen the blue light but didn't know what it meant. We suggested to the Superintendent that information about the blue light be included in prisoner orientation materials and he agreed to do that.</p> <p>(e) Executive Directive #72 prohibits department facilities from searching or physically examining a transgender or intersex offender for the sole purpose of determining the offender's genital status. McNaughton Correctional Center has conducted no such searches in the past 12 months.</p> <p>(f) Random staff interviews revealed that all custody staffs are trained in cross-gender pat-downs and searches of transgender and intersex inmates in a professional and respectful</p>

manner at the Department's training academy and a yearly refresher is standard as well. The facility documented that 100% of security staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a -c) Executive Directive #72, Section XI, B, 4, page 8, identifies that offenders with disabilities or who have limited English Proficiency shall have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. The agency provides a telephone interpreter service, The Language Line, for use in working with limited English speaking inmates. The facility disallows the use of inmates as translators except in exigent circumstances where a delay in providing an interpreter could have a deleterious effect on safety and security of inmates and/or the facility.</p> <p>Postings in Housing Units, and other areas that inmates frequent, were printed in Spanish and English, and the facility will use The Language Line to provide translators for other languages if needed. In the past 12 months, the facility has not used inmates as translators in any circumstances.</p> <p>Auditors were unable to interview hard of hearing inmates, inmates with limited English speaking ability and inmates with cognitive disabilities because there are no prisoners like that currently housed at the McNaughton Correctional Center. Staff interviewed verified that when they do have inmates with disabilities they read information to them and ask pertinent questions to ascertain that they understand the material.</p>

115.17	Hiring and promotion decisions
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1430 528">(a) (1-3) Section VI of Executive Directive #72, outlines the agency’s prohibition in hiring or promoting anyone who has engaged in sexual abuse in a confinement facility, has been convicted of engaging or attempting to engage in non-consensual sexual activity in the community, or who has been civilly or administratively adjudicated to have engaged in any such activity.</p> <p data-bbox="252 584 1485 741">(b) The Directive also requires the Department to consider any incidents of sexual harassment when determining whether to hire, promote or enlist the services of any employee. Employee is defined, in the Directive, as any staff member, contractor or volunteer who performs work inside of a DOC-operated facility.</p> <p data-bbox="252 797 1481 1088">(c) (1) (2) Section VI, A, 3 requires criminal background records checks to be performed prior to hiring new staff members and enlisting the services of any employee who may have contact with offenders, requires the DOC to 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, and requires the DOC to conduct a criminal background records check every five years for current employees.</p> <p data-bbox="252 1144 1469 1435">(d) (e) An interview with the Human Resources director confirmed that the agency does perform criminal background checks on any employee, including contractors, who may have contact with offenders prior to hiring and that the facility considers prior incidents of sexual harassment when determining whether to hire or promote anyone who may have contact with inmates. The interview also confirmed that the agency provides for fingerprinting services, for all current employees of each of its facilities, on an annual basis, and for criminal background checks every five years.</p> <p data-bbox="252 1491 1485 1648">(f) The agency does ask all applicants and employees, who may have contact with inmates, directly about any identified previous misconduct in written applications and in interviews for hiring or promotions, and the agency imposes upon employees a continuing affirmative duty to disclose any such misconduct.</p> <p data-bbox="252 1704 1409 1738">(g) By agency policy, failure to disclose such information may be grounds for termination.</p> <p data-bbox="252 1794 1409 1906">(h) Section 3a says that the department will provide reference information from all prior institutional employers on substantiated allegations of sexual abuse or sexual harassment allegations involving a former employee when requested.</p>

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a-b) The agency has not acquired a new facility, made substantial expansion or modification to existing facilities, or installed or updated a video monitoring system, electronic surveillance system or other monitoring technology since the last since the last PREA Audit was conducted.

115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="252 170 895 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1485 701">(a)(b) Division of Adult Institutions Policy #300.06.14, Protection, Gathering and Preservation of Evidence, outlines a very specific uniform evidence collection protocol that staff are required to follow to maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution. In addition, DAI 500.30.19, Sexual Abuse – Health Services Unit Procedure in the Event of Sexual Abuse, in Section A, outlines the protocol Health Care staff are required to follow in the event of sexual abuse. This protocol was adapted from the National Commission on Correctional Health Care-Response to Sexual Abuse (2014) and is developmentally appropriate for youth. All staff interviewed were able to articulate the protocol.</p> <p data-bbox="252 757 1474 1171">(c) Agency policy, Executive Directive #72, dictates that all victims will be offered access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate, that examinations will be performed by Sexual Assault Nurse Examiners (SANEs) where possible, that if SANEs cannot be made available, the examination can be performed by other qualified medical practitioners, and that the facility will document its efforts to provide SANEs. The McNaughton Correctional Center does not conduct forensic examinations onsite but will transport inmates to a local hospital, in Rhinelander, where that service is available. In the past 12 months, no allegations of sexual abuse have been made, at the facility, and no forensic medical exams have been performed by SANEs/SAFEs or by a qualified medical practitioner.</p> <p data-bbox="252 1227 1485 1473">(d)(e) The facility also provides access to an advocacy agency, Tri-County Council on Domestic Violence and Sexual Assault, in the local community. An MOU was presented as documentation. The staff contact at Tri-County Council on Domestic Violence and Sexual Assault verified that the agency has entered into an agreement, with McNaughton Correctional Center to provide crisis counseling and emotional support for prisoners who request their services. They will also identify additional resources for inmates where appropriate.</p> <p data-bbox="252 1529 1485 1731">(e)(h) Agency policy provides that if a sexual assault service provider is not available, the DOC will make a staff member who has been screened for appropriateness to serve in this role, and has received education concerning sexual assault, available to inmates requesting their services. Facility PREA Compliance Manager identified that both staff Social Workers have been properly trained and would fill this role.</p> <p data-bbox="252 1787 1469 1944">(f) Executive Directive #72, requires the agency to investigate all allegations of sexual abuse and sexual harassment and to refer all criminal sexual abuse investigations to the local law enforcement agency for investigation. The local law enforcement agency for the McNaughton Correctional Center is the Oneida County Sheriff's Department.</p>

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b) Executive Directive #72, in Section XVII, B identifies that all allegations of sexual abuse and sexual harassment will be investigated by the facility and that all allegations involving potentially criminal behavior will be referred to local law enforcement, in this case the Oneida County Sheriff's Department. The Agency Head said in an interview, "most definitely, we have a zero tolerance policy and we conduct investigations on all allegations. Every one is taken seriously."</p> <p>(b)(c) Executive Directive #72 is published, in its entirety, on the agency website. The agency is required by policy to document all referrals of allegations of sexual abuse or sexual harassment for criminal prosecution. No allegations were received or investigated since 2011. The facility is a Correctional Facility, with a very low population of screened inmates, more than half of whom, on any given day, are away from the facility, for up to eight hours at a time, working at a job in the local community.</p> <p>(d)(e) Executive Directive #72, in Section XVII, Section C, requires the investigating law enforcement agency to follow the requirements of the PREA Standard when the DOC is not responsible for investigating allegations of sexual abuse.</p>

115.31	Employee training
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1453 400">(a) Executive Directive #72, in Section XI, requires all employees who may have contact with inmates to be trained on:</p> <ol data-bbox="252 412 1465 1084" style="list-style-type: none"> <li data-bbox="252 412 1289 445">(1) the Agency's zero-tolerance policy for sexual abuse and sexual harassment, <li data-bbox="252 456 1449 573">(2) How to fulfill staff responsibilities under the WDOC sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures, <li data-bbox="252 584 1203 618">(3) Offenders' right to be free from sexual abuse and sexual harassment, <li data-bbox="252 629 1465 703">(4) the right of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment, <li data-bbox="252 714 1203 748">(5) the dynamics of sexual abuse and sexual harassment in confinement; <li data-bbox="252 759 1219 792">(6) the common reactions of sexual abuse and sexual harassment victims, <li data-bbox="252 804 1267 837">(7) how to detect and respond to signs of threatened and actual sexual abuse, <li data-bbox="252 848 995 882">(8) how to avoid inappropriate relationships with inmates, <li data-bbox="252 893 1449 1010">(9) how to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex or gender nonconforming offenders, and, <li data-bbox="252 1021 1394 1084">(10) how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. <p data-bbox="252 1140 1385 1214">The training lesson plan was reviewed by auditors to verify all required information was included.</p> <p data-bbox="252 1270 1481 1599">(b) Agency policy also requires staff to be trained on mandatory reporting of sexual abuse and sexual harassment to outside authorities. The training is tailored to the gender of the inmates and staff are given additional information if they transfer from facilities housing the opposite gender inmates. In addition, Mental and Medical Health Care workers are required to complete an additional training that is specific to health care workers, although the McNaughton Correctional Center does not employ mental health staff and inmates requiring mental health care are transferred to a nearby correctional institution that has mental health staff available.</p> <p data-bbox="252 1655 1481 1816">(c) Executive Directive #72 requires all employees to receive training, on a biennial basis, with a yearly refresher, on current sexual abuse and sexual harassment policies. When new policies/directives regarding sexual abuse and sexual harassment are released, all employees who may have contact with inmates are informed. The training is delivered in an online format.</p> <p data-bbox="252 1872 1474 2033">(d) Auditors reviewed facility provided electronic documentation of proper training, and verification that employees understand the training they receive, for all employees at the McNaughton Correctional Center, and all random staff interviewed verified that they had been trained according to the requirements of agency policy.</p>

115.32	Volunteer and contractor training
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1477 786">(a) Executive Directive #72 requires that all volunteers and contractors who have contact with inmates be trained on the agency's zero tolerance policy and their responsibilities regarding prevention, detection, and response to allegations of sexual abuse and sexual harassment. Volunteers attend a Volunteer Orientation where they receive a Volunteer Handbook that outlines the agency's zero tolerance policy and their responsibilities. They also receive a publication entitled, "Sexual Abuse and Sexual Harassment in Confinement: A Guide for Volunteers and Contractors." A publication geared specifically toward contractors is used in the training provided contractors. Auditors reviewed the training curriculum as well as all additional materials provided to volunteers and contractors during their orientation. The facility has 56 volunteers and contractors and staff claimed that all have completed PREA training appropriate for the contact they have with inmates.</p> <p data-bbox="252 842 1477 1256">(b)(c)The level and type of this training is to be based on the services provided, and the level of contact volunteers and contractors have with inmates, and the agency is required to maintain documentation confirming that volunteers and contractors understand the training they receive. WIDOC form DOC-2786 contains a signature line for Volunteers and Contractors to sign verifying that they have received the training and that they understand the training they received. Training records of contractors were presented for auditors' review and both Contracted Staff and Volunteers said, in interviews, that they received the training, and made specific, appropriate references to what was included in the training, but no documentation verifying training of volunteers was available and the Volunteer Coordinator was under the impression that facility policy did not require maintaining documentation.</p> <p data-bbox="252 1312 1477 1682">A contracted staff verified, in an interview, that she completed online training, as a new employee, and also had comprehensive training, with the Superintendent, when she was hired at the facility, and her training records supported her claim. A volunteer, who was also interviewed, said he had been told about the Agency's zero-tolerance policy on sexual abuse and sexual harassment and said that to report an incident he could report to either the Sergeant or the Captain. He also recalled that the training stressed that all allegations are to be reported and investigated. Auditors believe that Volunteers are trained but the supporting documentation is not being maintained as required by the Standard. Therefore, the facility does not meet this standard.</p> <p data-bbox="252 1738 1430 1861">Corrective Action Required: The facility will need to ensure that all current Volunteers were appropriately trained and will need to submit documentation verifying that the volunteers understood the training they have received.</p> <p data-bbox="252 1917 1477 2107">Corrective action completed: Since the onsite portion of the audit, the facility submitted documentation demonstrating that volunteers have been properly trained, with the appropriate signatures clearly displayed. They also submitted documentation of instructions to staff on how to obtain the proper documentation, complete with volunteer signatures, at the time the Volunteer Orientation is conducted. Facility now meets the standard.</p>

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	<p data-bbox="248 241 523 277">Auditor Discussion</p> <p data-bbox="248 322 1458 613">(a) Executive Directive #72, Section XI, B, stipulates that offenders shall receive, at intake, information detailing the Agency’s zero tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents or suspicions. The facility provided samples of educational material used to provide that information, including a booklet entitled, “Sexual Abuse and Sexual Harassment Prevention and Intervention, A Resource for Inmates,” that is given to all inmates during Orientation. In the last 12 months, all 92 inmates admitted to the Center were given this information.</p> <p data-bbox="248 667 1474 1039">Intake Staff said, in an interview, “During our Orientation we talk about the PREA video they recently viewed and if they have not seen it, I show it to them. I give them the red PREA handbook and I review where they can find the information on the units, and explain the 777 and 888 numbers. I also tell them how our posters have the local victim advocate agency contact information on them.” She went on to say, “I like to give them some time to get to know the staff and the environment a little before giving them orientation, but I always make sure it’s timely.” Random inmates interviewed said they were given orientation upon arrival, or the next day, and they described the prisoner handbook, a video, pamphlets and postings in the facility, all of which contained PREA information.</p> <p data-bbox="248 1093 1474 1254">(b) Executive Directive #72, also in Section XI, B, says that within 30 days of intake the facility shall provide a comprehensive education to offenders either in person or through video regarding offenders’ right to be free of sexual abuse, sexual harassment and disclosure-related retaliation, and the agency’s policies and procedures for responding to such incidents.</p> <p data-bbox="248 1308 1449 1509">(c) Executive Directive #72, in the same section, requires that all offenders, upon transfer to another facility, 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. All inmates at McNaughton Correctional Center have received the required education.</p> <p data-bbox="248 1563 1436 1724">(d) Inmate PREA education is available, at the McNaughton Correctional Center, in English and in Spanish in print and on video, and the PREA Office maintains a Braille transcription, and an audio recording of the inmate handbook, “Sexual Abuse and Sexual Harassment Prevention and Intervention: A Resource for Inmates” for use at the facilities when needed.</p> <p data-bbox="248 1778 1474 2024">(e) The agency uses the DOC-2777 form, the PREA Education Offender Participation Log, to document this education of offenders. In the past 12 months, 100% of offenders admitted to the McNaughton Center were appropriately educated and their education documented on the paper forms but, in October 2017, WIDOC will be transitioning to an electronic system of recordkeeping that will store an automated DOC-2777 in the agency’s offender database and will be part of the inmate record indefinitely.</p> <p data-bbox="248 2078 1452 2150">(f) During the tour of the facility, auditors noted that information about the agency’s PREA policies is continuously and readily available, or visible, on posters in all housing units, in the</p>

Visiting Room, the Library, in Health Care and in all other areas that prisoners frequent.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b)(c)(d) Executive Directive #72, Section XI, requires that staff who investigate incidents of sexual abuse and sexual harassment receive specialized training on techniques for interviewing sexual abuse victims, proper use of Miranda, Garrity and Oddsen warnings, evidence collection in confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral and that the Department will maintain documentation of training completion. A lesson training plan and training records were presented for review during the audit. Also presented as documentation was a WIDOC directory of staff trained to investigate reports of sexual abuse and sexual harassment. The listing showed all specialized investigators in the WIDOC by facility.</p> <p>The Security Director, verified, in an interview, that he had received specialized PREA Investigator training in addition to the general PREA training that all staff receive. He said that the training covered interview techniques, proper use of Miranda and Garrity warnings, evidence collection and proper investigative techniques. The Security Director was also able to describe the investigative process and confirmed that all allegations are investigated promptly, regardless of how the allegation is received.</p>

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b) Executive Directive #72, in Section XI, requires that all medical and mental health care practitioners who work regularly in a DOC facility be trained on how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how, and to whom, to report allegations or suspicions of sexual abuse and sexual harassment. Medical staff at the Center do not conduct forensic examinations but offenders requiring a forensic exam will be transported to a nearby hospital, in Rhineland, where a SANE will be made available. The facility has not received any allegations of sexual abuse, in the last 12 months, thus no requests for forensic examinations.</p> <p>(c) Copies of training completions and certifications were presented as documentation during the audit and interviews with medical health staff confirmed that the training was provided, by the agency, as a web based module, in addition to the general PREA training all employees receive A contracted nurse verified, in an interview, that she had received the Department's PREA Training for Health Care staff.</p> <p>(d) McNaughton Correctional Center does not have Mental Health Staff. Offenders who need Mental Health treatment are transported to the Stanley Correctional Institution. There are three nurses employed at the McNaughton Correctional Center, all of whom received the specialized training for health care workers. Documentation was provided demonstrating their completion of the required training. The facility also employs two Social Workers and documentation of their specialized training was presented as well.</p>

115.41	Screening for risk of victimization and abusiveness
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1469 488">(a)(b)(h) Executive Directive #72, Section XII, requires that offenders be assessed, during an Initial screening, within 72 hours of arrival at the facility and upon transfer to another facility. This same agency policy prohibits disciplining offenders for refusing to answer or for failing to disclose information in regards to the assessment questions.</p> <p data-bbox="252 539 1477 1173">(c)(d 1-10)(e) Initial screenings are done by Intake staff using an appropriate PREA Screening Tool that includes consideration of the inmate’s criminal history, the inmate’s appearance, questions based on inmates’ self-report of variables such as the presence of a mental, physical of developmental disability, age, height, and weight, previous incarcerations, exclusively nonviolent criminal history, prior convictions for sex offenses, whether the offender is, or is perceived to be gay, lesbian, bisexual, transgender or whether they have an intersex condition. It also contains questions about their history of having been abused in the community or in confinement, their history of any of their own abusive behavior, their perception of their safety in the facility, and whether they are detained solely for civil immigration purposes. A copy of the PREA Screening Tool, DOC-2781 B was presented and auditors were able to review completed screenings. The facility documented that of the 82 inmates, who arrived at the facility in the last 12 months, due to a staffing problem, only 89% of them were initially screened within 72 hours of arrival as required by policy. Facility Superintendent assured auditors that this was an anomaly and that a process has been put in place, by identifying and training backup staff, to prevent it from happening again.</p> <p data-bbox="252 1225 1477 1599">(f)(g) Executive Directive #72, in Section XII, D, calls for the facility to reassess offenders’ risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the initial screening. The agency policy does not currently stipulate that each offender will be reassessed within 30 days of arrival at the facility but a revision of the policy is in process and the WIDOC is working to implement an agency-wide rescreening process, which will begin in October 2017. The screening process will be automated and will include the ability to rescreen inmates within 30 days of admission. The facility does not currently meet this standard but will be able to submit documentation of the rescreening after the new process is in place.</p> <p data-bbox="252 1650 1477 1861">(i) Housing assignments are made using Information discovered during the intake assessment. Staff who perform screening of inmates explained that the information is only accessed by staff who need the information to do their jobs. The Agency PREA Coordinator said, in an interview, " There is limited access to that information. We are moving to a process where the screening tool will be electronic only and that will offer greater security."</p> <p data-bbox="252 1912 1442 2029">Corrective Action Required – The facility will need to submit documentation verifying that all offenders received at the facility are screened within 72 hours of arrival and that they are reassessed within 30 days of arrival.</p> <p data-bbox="252 2080 1406 2154">Corrective Action Completed: During the Corrective Action Period, PREA Analyst, Leigha Weber, submitted documentation demonstrating that the Wisconsin Department of</p>

Corrections, as of October 1, 2017, requires that all offenders be reassessed within 30 days of their arrival at the facility. The screening tool that is used requires staff to assess whether offenders' answers to previously asked questions have changed or if the screener has received any additional, relevant information, since the admission screening, that bears upon the inmate's risk of victimization or abusiveness. The screening tool bears the electronic signature, including employee ID number, of the staff who completes the reassessment and the date of completion. Documentation that was submitted verifies that the facility now meets the standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72, Section XIII, A, Page 10 requires that information obtained from the screenings be used to assign housing, bed, work, education and program assignments with the purpose of keeping offenders at high risk of being sexually victimized separated from those at high risk of being sexually abusive. Currently, the Sergeant who makes housing assignments uses information obtained by intake staff with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. In October, a new system will go into effect that will enable the system to notify the user (security/housing staff) if they are attempting to house an inmate determined to be at risk of victimization with an inmate at risk of abusiveness. The Facility PREA Compliance Manager said, in an interview, "We look at the PREA screening and if we get someone that registers as either a victim, or a victimizer, we make sure we house them appropriately, away from each other."</p> <p>(b)(c) Facility staff also make individualized determinations about how to ensure the safety of each inmate. Because the facility is so small, and has a low offender population, staff interact with each other multiple times throughout the shift and information is easily exchanged.</p> <p>(d)(e)(f) The agency does not have dedicated facilities, or wings of facilities, for transgender or intersex inmates but considers each inmate's health and safety needs on a case-by-case basis. McNaughton Correctional Center does not currently house any transgender inmates, or inmates who have been diagnosed with an intersex condition. However, Facility PREA Compliance Manager said, "we don't have any right now but the Department lays out the guidelines and we follow them." He also said, "All our inmates have the opportunity to shower separately. All our shower stalls are single person and all have shower curtains."</p>

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72, Section XIII, B, says that offenders at high risk for sexual abuse will not be involuntarily separated from the general population unless there is no available means of separation from likely abusers and that, if an offender is involuntarily separated from the general population, the facility will document the basis for the facility’s concern for the offender’s safety and the reason an alternate placement cannot be arranged.</p> <p>(b)(1-3)(c)(d)(e) The policy stipulates that inmates placed in segregated housing shall have access to programs, privileges, education and work opportunities, to the extent possible, and that if it is necessary to limit those things, the facility will document the opportunities that have been limited, the duration of the limitation, and the reasons for the limitation. By policy, the agency will review the circumstances of offenders separated from the general population, every 30 days, to determine if there is a continuing need for the separation and will document that review.</p> <p>McNaughton Correctional Center did not hold any inmates in involuntary segregated housing in the past 12 months. Correctional Centers are small population facilities that house minimum-security offenders who have been screened and determined appropriate for the setting. The purpose of the Correctional Center System is to prepare inmates for safe and successful reintegration into their communities and to provide the opportunity for offenders to participate in programming, including work-release, that is directed toward release and living in the community.</p> <p>The Warden said, in an interview, “we do not place prisoners in segregated housing.”</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72, Section XIV, identifies multiple ways, including third party reporting, for offenders to privately report sexual abuse and sexual harassment, retaliation for reporting, and instances of employee neglect or violation of responsibilities that may have contributed to such incidents. Inmates are made aware at Intake, at Orientation, and throughout their stay, of the reporting mechanisms available to them. This information is printed in the Inmate Handbook that is given to all inmates at Orientation.</p> <p>(b) During the tour, it was noted that there are many postings in the facility providing prisoners phone numbers they can call to report sexual abuse. Phone numbers are available, 777 and 888, on the inmate phones, to report to facility officials and to an outside agency as well. These phone calls do not require an Inmate Pin, and are free, and that information is included on the postings, which are posted in both English and Spanish. Auditors were able to dial both 777 and 888, from the housing unit phones, successfully.</p> <p>Prisoners who were interviewed described the various methods they can use to report sexual abuse. All of the interviewed prisoners were familiar with all methods of reporting, including third party reporting and the free phone numbers they can call. They also referred to the postings and the information on them.</p> <p>(c) Executive Directive #72, Section XIV, outlines that employees are, by policy, obligated to accept reports made verbally, in writing, anonymously, and from third parties, to promptly document any verbal reports, and immediately report to supervisory staff any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the WIDOC. Staff are also obligated to report any incidents of retaliation against offenders or employees who reported such an incident, and/or any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff interviewees were all aware of their obligation to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation or staff neglect or violation of responsibilities that may contribute to an incident.</p> <p>(d) Executive Directive #72, Section XIV, C, 3 calls for the DOC to provide a method for employees to privately report sexual abuse and sexual harassment of offenders.</p> <p>The Wisconsin Department of Corrections does not detain solely for civil immigration purposes.</p>

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(d) Executive Directive # 72, Section XV, outlines that all sexual abuse and sexual harassment complaints filed through the Inmate Complaint Review system are to be immediately redirected and referred for investigation, and that inmates will be notified within 30 days that the investigation has been commenced and the Inmate Complaint Review Process has ended.</p> <p>(b)(c) The Executive Directive also says that a time limit may not be imposed on when an inmate may file a complaint regarding an allegation of sexual abuse or sexual harassment, that the complaint process shall not include a mandatory informal resolution requirement, that each facility shall ensure that an offender who alleges sexual abuse or harassment may submit a complaint without submitting it to an employee who is the subject of the complaint and that any such complaint is not referred to an employee who is the subject of the complaint.</p> <p>(e)(f) The agency does not have an emergency grievance procedure but the Executive Directive provides that an inmate who is at risk of imminent sexual abuse may contact any employee, who is not the subject of the complaint, to make a report and that staff is, by policy, obligated to, immediately, forward the complaint to facility leadership for immediate corrective action and requires facility leadership to provide an initial response within 48 hours and a final decision within five calendar days. The facility has not received any allegations of substantial risk of imminent sexual abuse within the last 12 months.. In addition, third parties may, by policy, assist an inmate in filing complaints.</p> <p>(g) Agency policy also requires that an offender not be disciplined for filing a complaint alleging sexual abuse or sexual harassment unless the complaint was filed in bad faith and allows for third parties, including fellow offenders, employees, family members, attorneys and outside advocates to assist an offender in filing complaints of sexual abuse or sexual harassment. McNaughton Correctional Center has not received any allegations of sexual abuse or sexual harassment, in the last 12 months, and has not disciplined any inmates for filing sexual abuse complaints in bad faith.</p>

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72, Section XVI, outlines the facility's responsibility to provide offenders with access to outside victim advocates, at the local, state and national level, by providing mailing addresses and phone numbers, and to enable reasonable communication between offenders and agencies in as confidential a manner as possible, meaning the phone calls are not recorded.</p> <p>(b) The facility is also responsible for notifying inmates, in advance of their contacting any such agency, the extent to which reports of abuse will be subjected to mandatory reporting laws.</p> <p>(c) The agency has entered into an MOU with a local sexual assault service provider, Tri-County Council on Domestic Violence and Sexual Assault, Inc., located in nearby Rhineland, WI, and uses form POC-41B to inform inmates about this service. In addition, the information is included in Orientation materials and is posted around the facility, in the Housing Units and in the Visiting Room. The information includes mailing addresses and telephone numbers for local organizations and toll-free hotline numbers for national victim advocacy organizations.</p> <p>Auditors were able to call the local advocacy agency, from prisoner phones, to ensure that the call was free and appropriately routed. A staff person there said that the facility calls the agency, at least twice monthly, to ensure that the phone line is working and that someone answers on the other end. Contact Information for the Tri-County Council on Domestic Violence and Sexual Assault, Inc. is on PREA postings that were seen throughout the facility. A copy of the MOU was also provided as documentation. Postings in the facility also provide a number for national rape crisis line that prisoners can call.</p> <p>All of the inmates interviewed said they were aware of a local advocacy agency, and the hotlines that they could call, because the information was presented to them at Orientation and was posted on bulletin boards in days rooms, in the Health Services area, and in the Library. All of them were aware of the 777 and 888 numbers and that they were free calls. Auditors also called the numbers, from the Housing Unit, and were able to verify that the service exists and works well for prisoners.</p>

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

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72, Section, XIV, C requires all staff to accept reports of sexual abuse, sexual harassment and retaliation made verbally, in writing, anonymously, and from third parties and to 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 agency, to report any incidents of retaliation against offenders or employees who reported such an incident, and/or any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>(b) The Directive also requires that staff not reveal any information to anyone other than to supervisors, investigators and designated officials and that such information be limited to information necessary to make treatment, investigation and other security and management decisions.</p> <p>(c)(e) All staff interviewed understood their duty to report all allegations immediately and to protect the confidentiality of all such reports from anyone other than their supervisor and staff designated to investigate, and those charged with security and the making of management decisions. They indicated that complaints would only be shared with staff as necessary to respond to the allegation. In an interview, a Nurse said she has not had any instances, at McNaughton Correctional Center, but said that she is obligated to explain the process and what is going to happen to all inmates. A Social Worker said, "I go over the limits to confidentiality with them prior to the screening."</p> <p>(d) There are no inmates under the age of 18 housed at McNaughton Correctional Center.</p>

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Executive Directive #72, Section XVI requires department and facility staff to take immediate action to protect an offender when they learn that an offender is subject to a substantial risk of imminent sexual abuse. In the last 12 months, this situation has not occurred at the McNaughton Correctional Center but staff were very well versed in what to do should this type of situation occur. Staff interviewed said that if they had received information, or for any reason believed, that a prisoner was subject to imminent sexual abuse, they would separate the inmate from the perpetrator if known, and/or place the potential victim in a safe spot where they could be closely monitored by staff.</p> <p>The facility has housing options to separate a victim from a potential known abuser. In an interview, the Warden identified that any prisoner believed to be in immediate danger of sexual abuse would be placed where he could be closely observed if the perpetrator was unknown. If the believed perpetrator was known, that person would be moved to separate the two and to provide a safe environment for the intended victim. The Warden identified different options available when it is necessary to protect prisoners and said that a prisoner could be transferred to another facility or staff might be placed on Administrative Leave. Regardless, the facility would take immediate action to protect the inmate.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b)(c)(d) Executive Directive #72, Section XIV requires that within 72 hours of receiving an allegation that an inmate was sexually abused at another facility, staff will report the information to the head of the facility where the alleged abuse occurred and will document that notification. It also requires that reports received from other facilities and agencies, of incidents of sexual abuse, that allegedly took place while a prisoner was housed at the McNaughton Correctional Center, will be investigated in accordance with the PREA standards. The Executive Directive also requires that the appointing authority who receives the notification will document it and ensure that the allegation is investigated.</p> <p>In the last 12 months, the facility has not received any reports from prisoners that they were sexually abused while confined at other facilities.</p> <p>In the past 12 months, the facility has not received any reports, from other facilities, of any prisoners having reported any incidents of sexual abuse that allegedly occurred while they were housed at the McNaughton Correctional Center.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(1-4) Executive Directive #72, Section XVI, identifies that the first security staff member to respond to an allegation of sexual abuse must separate the alleged victim and abuser, preserve and protect any crime scene, collect any physical evidence possible by requesting that the victim and abuser not change clothes, use the bathroom, smoke, drink or eat or take any other actions that could destroy physical evidence.</p> <p>(b) If the first responder is not a security staff, the Executive Directive requires them to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.</p> <p>In the last 12 months, there were no allegations of sexual abuse or sexual harassment made at the McNaughton Correctional Center. All staff interviewed were well versed in the agency's policy regarding First Responder responsibilities, and some staff carry First Responder pocket cards to be used as a quick refresher. Interviews with all random staff demonstrated that knowledge of these requirements is consistent throughout the facility.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The facility has a Coordinated Response Plan that gives step by step directions to be followed, by staff First Responders, Security Supervisors or the Security Director, non-staff First Responders, Medical Staff, the PREA Compliance Manager, the Victim Services Coordinator, Investigators, the Appointing Authority/Designee, and the Sexual Incident Review Team. A copy of the Coordinate Response Plan and the Sexual Harassment and Sexual Abuse Incident flowchart were submitted as documentation.</p>

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

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72, Section XVIII, requires each facility to designate staff to monitor retaliation to ensure that all offenders and employees involved in the reporting or investigation of sexual abuse and/or sexual harassment are protected.</p> <p>(b)(c)(d) It also requires the monitoring to continue for at least 90 days, following a report of sexual abuse, and to include monitoring the conduct and treatment of the offender or employee who reported the sexual abuse, and the offender who was reported to have experienced sexual abuse, to determine if retaliation occurred. The monitoring, by policy, is to include periodic status checks and to continue beyond 90 days if needed.</p> <p>Departmental form DOC-2767, SEXUAL ABUSE AND SEXUAL HARASSMENT INCIDENT VICTIM SERVICES COORDINATOR RESPONSE CHECKLIST, identifies actions to be taken by staff assigned as a Victim Services Coordinator. The checklist details all actions to be taken, starting with the initial meeting and continuing on through the monitoring. The form provides for documentation of monitoring at 30, 60 and 90 days following an allegation, and continuing on after 90 days if needed. Form DOC-2805, SEXUAL ABUSE ALLEGATION STAFF RETALIATION MONITORING, a similar document, is used to document retaliation monitoring of staff who report staff-on-offender or offender-on-offender sexual abuse.</p> <p>(e)(f) Executive Directive #72 says, in Section XVIII, C, "For offenders or employees who express fear of realiation, the facility shall take appropriate protective measures," and goes on to identify that the agency's obligation to monitor terminates if they find that the allegation is unfounded.</p> <p>A Social Worker is designated to monitor retaliation at McNaughton Correctional Center. She said, in an interview, "We did do retaliation monitoring with an inmate who had filed an allegation at another facility and we picked up the monitoring where the other facility left off. I did face to face meetings with him in my office, on at least a weekly basis, sometimes twice weekly. I asked him if he was having any issues and offered a referral for outside services which he declined. I checked for targeting from staff in terms of misconducts or any written work reports. I closed out the services with him, at the appropriate point, based on what monitoring had happened at the previous facility. I have an end date on the outside of the envelope."</p> <p>The Agency Director, said in an interview, "The time frame is 90 days but it could be longer than that depending on the status review with the inmate victim, making sure there are no conduct reports, housing moves, or anything that looks like there may have been retaliation and these efforts are documented."</p>

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Executive Directive #72, Section XVI, requires that an inmate who is alleged to have suffered sexual abuse shall be separated involuntarily from the general population only if no other suitable alternatives exist. The separation will only be until an alternative becomes available and will ordinarily not last longer than 30 days. Any such placement that does last longer than 30 days will require an evaluation every 30 days using Wisconsin DOC Form 30, the Review of Inmate in Restrictive Housing form. Agency policy also identifies that 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 Standard 115.43.</p> <p>In the past 12 months, no allegations of sexual abuse were made and no inmates were involuntarily separated from the general population. In interviews, both the Warden and the Facility PREA Compliance Manager said that the McNaughton Correctional Center does not involuntarily segregate a prisoner for protection and identified alternative measures they would use including moving a prisoner to another housing unit and even to another facility.</p>

115.71	Criminal and administrative agency investigations
	<p data-bbox="252 170 928 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1481 875">(a)(b)(h) Executive Directive #72, Section XVII, requires staff who have received specialized training to conduct an investigation, for all allegations of sexual abuse and sexual harassment, regardless of how the allegation was received, and stipulates that allegations that involve potentially criminal behavior will be referred to local law enforcement for investigation. An interview with investigative staff confirmed that McNaughton Correctional Center has not had any allegations of sexual abuse or sexual harassment, in the last 12 months, but that all allegations will be investigated and that investigations will begin as soon as the report is received with staff conducting initial interviews, preserving evidence, sending the offender to be examined by a SANE, reviewing video footage and reviewing all available facts pertinent to the case. The policy requires staff to gather and preserve direct and circumstantial evidence, including any physical and DNA evidence, and requires them to interview alleged victims, suspected perpetrators, and witnesses, and to review any prior complaints and reports of sexual abuse involving the suspected perpetrator.</p> <p data-bbox="252 927 1461 1128">(e) The Executive Directive also says that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as offender or employee. The Department also shall not require an offender who alleges sexual abuse to submit to a polygraph or other truth-telling device as a condition for proceeding with the investigation of the allegation.</p> <p data-bbox="252 1180 1469 1644">(f)(1-2)(g) The Executive Directive requires that administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse and shall be documented in a written report that include a description of all evidence and that criminal investigations shall be documented in a similar report and that all reports shall be retained for as long as the alleged abuser is incarcerated or employed by the Wisconsin Department of Corrections plus 10 years. Administrative investigations must include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and the investigative facts and findings. The departure of an alleged abuser or victim from employment or incarceration with the facility or the recantation of the allegation, will not constitute a basis for terminating any investigation. When outside agencies investigate an allegation of abuse, the facility will cooperate with the investigation.</p> <p data-bbox="252 1695 1477 1944">Following an investigation of an allegation of sexual abuse, the facility is responsible for informing the alleged victim and documenting the notification, as to whether the allegation has been substantiated, unsubstantiated, or unfounded. If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the complainant. The WIDOC's obligation to report terminates if the alleged victim is released from custody.</p> <p data-bbox="252 1995 1485 2157">If an offender brings an allegation of sexual abuse against an employee, the agency will, after investigation, notify the offender when the staff person is no longer posted in the offender's housing unit, when the employee is no longer employed at the facility, or when the agency learns that the employee has been indicted on, or convicted of, a charge related to the original</p>

allegation of sexual abuse.

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

McNaughton Correctional Center will conduct administrative investigations on all allegations of sexual abuse and sexual harassment and will refer allegations of situations that may involve criminal behavior to the Oneida County Sheriff's Department. The facility will retain records as long as the alleged abuser is employed by the WIDOC, or is incarcerated by the WIDOC, plus 10 years, which exceeds the requirement of the standard.

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

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72, XVII, requires that alleged victims be informed of the outcome of all investigations done by the facility whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. Staff presented templates of memos that are used to notify alleged victims. The templates include information about available advocacy services, how to access those services and how to report any retaliation that an inmate might experience. There were no allegations of sexual abuse made, at McNaughton Correctional Center, in the last 12 months.</p> <p>(b) The Executive Directive also requires the agency to request relevant information from any investigation that was investigated by another agency in order to inform the alleged victim. This reporting is required, by policy, to be documented.</p> <p>(c)(1-4) If an offender brings an allegation of sexual abuse against staff, the agency will, by policy and after investigation, notify the offender when the staff person is no longer posted in the offender's Housing unit, when the employee is no longer employed at the facility, or when the agency learns that the employee has been indicted on, or convicted of, a charge related to the original allegation of sexual abuse.</p> <p>(d)(1-2) Also by policy, following an offender's allegation of sexual abuse by another offender, the agency shall inform the offender when it is learned that alleged abuser has been indicted on, or convicted of, a charge related to sexual abuse.</p> <p>(e)(f) Executive Directive #72 says, in SectionXVII, K, that the DOC will document all notifications and that this obligation shall terminate if the alleged victim is released from custody.</p>

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b)(c)(d) Executive Directive #72, Section XIX, provides that any staff who are found to be in violation of the WIDOC’s sexual abuse, sexual harassment, and retaliation policies will be subject to sanctions up to and including termination, that 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, that termination is the presumptive disciplinary action for such a violation, and that all terminations, including resignations that would have resulted in termination, will be reported to any relevant licensing bodies. The same Executive Directive requires that any terminations for violations for agency sexual abuse or harassment policies would be reported to local law enforcement, unless the activity was clearly not criminal.</p> <p>In the past 12 months, McNaughton Correctional Center has not received any allegations of sexual abuse or sexual harassment by staff, nor has it terminated or disciplined any employees short of termination, for violating the Department’s sexual abuse or sexual harassment policies.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Executive Directive #72 holds that any volunteer or contractor who engages in sexual abuse will be prohibited from contact with inmates and will be reported to relevant licensing bodies and that any allegations of sexual abuse or sexual harassment that involve potentially criminal behavior will be referred to law enforcement.</p> <p>(b) It also says, in Section XIX, A, 4, that appropriate remedial measures shall be taken by the facility to ensure the safety of offenders in contact with volunteers and contractors.</p> <p>There have been no allegations of sexual abuse or sexual harassment involving volunteers or contractors reported to local law enforcement, or relevant licensing bodies, for violations of the agency’s sexual abuse policies within the last 12 months. Interviews with staff confirmed their understanding and willingness to take required action according to this standard.</p>

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

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b)(c) Executive Directive #72 provides that if either the initial or follow-up screening indicates an offender has previously experienced prior sexual victimization or has perpetrated sexual abuse, whether it occurred in an institutional setting or in a community setting, employees shall ensure the offender is offered a follow-up meeting with a mental health provider within 14 days of the initial or follow-up screening. McNaughton Correctional Center reports that 100% of all inmates who disclosed, in the last 12 months, prior victimization during screening, were offered a follow-up meeting, with a medical or mental health practitioner, within 14 days of the intake screening. The same service is offered to inmates who disclose during screening that they previously perpetrated sexual abuse. McNaughton Correctional Center reports that 100% of all inmates who disclosed during screening, in the last 12 months, prior sexual abuse perpetration, were offered a follow-up meeting, with a medical or mental health practitioner, within 14 days of the intake screening.</p> <p>(d) Agency policy, Executive Directive #72, requires that 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 decision, including housing, bed, work, education and program assignments or as otherwise required by law.</p> <p>(e) The directive also requires that agency medical and mental health practitioners obtain informed consent from inmates before reporting any prior sexual victimization that did not occur in an institutional setting. The facility does not house any offenders under the age of 18. Forms used to educate prisoners about their rights to privacy and to obtain their authorization for reporting of information include DOC 1163 Authorization for Disclosure of Non-Health Confidential Information, DOC 1923 Limits of Confidentiality of Health Information, and DOC 1163A Authorization for Use and Disclosure of Protected Health Information.</p> <p>A Nurse said that nursing staff do obtain informed consent from inmates before reporting about prior sexual victimization that did not occur in an institutional setting. McNaughton Correctional Center does not have mental health staff so inmates who request mental health services are transferred to the Stanley Correctional Facility and may stay there, depending on the findings, or may be returned to McNaughton.</p>

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b) Executive Directive #72, Section XVI, dictates that victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services and that if no qualified medical or mental health staffs are on duty, security staff first responders shall take the first steps to protect the victim and immediately notify the appropriate medical and mental health staff. Because there have been no allegations of sexual abuse at McNaughton Correctional Center, at least in the last 12 months, no documentation was available to demonstrate first responder actions and notification of health care staff.</p> <p>(c)(d) In an interview, a Nurse said that the McNaughton Correctional Center has not had any instances where inmates were in need of access to emergency medical treatment and crisis intervention services but, if that were to happen, offender victims would receive timely and unimpeded access to emergency medical treatment and crisis intervention services and would be provided timely access to sexually transmitted infection prophylaxis. She also said that the nature and scope of the services provided by qualified medical or mental health staff would be deemed appropriate based on the professional judgment of staff, and that all such services would be provided at no cost to the inmate. When asked if she felt the services provided at the facility are consistent with the community level of care, she said, "I would say, yes, very much so. They have very easy access, daily and even 24 hour if needed, so yes, certainly consistent, maybe even better."</p>

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b) Executive Directive #72 says, “The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse in any confinement setting. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities or their release from custody.”</p> <p>(c) The Directive also outlines that the facility will attempt to conduct a mental health evaluation of any inmate-on-inmate abuser within 60 days of learning of the incident of abuse. Because there is no mental health staff assigned to McNaughton Correctional Center, offenders would be transferred to the Stanley Correctional Facility for mental health services. All medical and mental health services offered are consistent with the community level of care. The facility does provide education and testing for sexually transmitted diseases, as necessary, depending on the circumstances. Agency policy dictates that all such treatment service would be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>(d)(e) There are no females incarcerated at the McNaughton Correctional Center.</p> <p>(f) An interview with a Nurse revealed that McNaughton has not had any allegations of sexual abuse but that if that were to happen, any victim would be offered timely sexually transmitted infection prophylaxis, including follow-up education and treatment.</p> <p>(g)(h) Agency policy stipulates, in Executive Directive #72, Section XVI, B, 2 that all such medical and mental health treatment services shall be provided to victims without financial cost and that facilities shall attempt to conduct a mental health evaluation of all known offender-on-offender abusers within 60 days of learning of such abuse history an doffer treatment when deemed appropriate by mental health practitioners.</p>

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b)(c) Executive Directive #72 says that, "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 Directive requires that upper level management officials, with input from supervisors, investigators and medical and mental health practitioners, consider possible needed changes to policy or practice, whether the incident may have been motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender or intersex identification, status or perceived status, gang affiliation or was motivated by other group dynamics at the facility.</p> <p>(d)(1-6) The Directive requires the team to examine the area of the facility where the incident allegedly occurred to identify any physical barriers that may exist, to assess the adequacy of staffing levels in that area during different shifts, to assess whether monitoring technology in that area is sufficient or should be augmented, and to write a report of the findings, including determinations made and recommendations for improvement, and submit that report to the facility head and to the Facility PREA Compliance Manager.</p> <p>(e) Agency policy, in Executive Directive #72, Section XX, B, requires facilities to implement the recommendations for improvement or document the reasons for not doing so.</p> <p>McNaughton Correctional Center has not had any allegations of sexual abuse or sexual harassment, in the last 12 months, thus no sexual abuse incident reviews were conducted.</p>

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(b)(c)(d)(e)(f) Executive Directive #72 Section requires the agency to collect accurate, uniform data from incident-based reports, investigation files and sexual abuse incident reviews for every allegation of sexual abuse within facilities, including any facilities it contracts with for the confinement of offenders, using a standardized instrument and set of definitions. The data includes the information to answer all questions from the Department of Justice Survey of Sexual Victimization. The data, aggregated annually, is reported to the Department of Justice and is posted to the agency website annually. Public identifiers are removed prior to posting to the web site.</p> <p>In an interview, the Agency PREA Coordinator said, "We have a layered approach. We collect data and aggregate that data, respond, compile years, identify problem areas and things that can be corrected, and that's reflected in our annual reports."</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a)(1-3)(b)(c)(d) Executive Directive #72 calls for the data collected and aggregated to be analyzed to assess and improve effectiveness of the agency's policies regarding sexual abuse prevention, detection and response, to improve training efforts by identifying problem areas, and to take corrective action on an ongoing basis. It also calls for an annual report to be prepared of findings and of corrective actions for facilities and for the department as a whole, for the data to be compared to previous years' findings and for the report to be posted on the agency website with material redacted that may present a clear and specific threat to the safety and security of the facility.</p> <p>The Agency head said in an interview, "We do an after action on every incident. Investigators and health team victim services coordinators look at the factors to see if there is something we can do with policy, cameras, more staffing in these areas, or even physical plant modification in the area. The data is compiled and kept by our PREA office. "</p> <p>A copy of the annual report was presented as documentation and the report is published on the agency website. Review of the agency website demonstrated the multi-year practice of posting an annual PREA statistical report, including information related to the Survey on Sexual Victimization.</p>

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

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) Agency policy requires the WIDOC to conduct audits pursuant to 115.401.</p> <p>The McNaughton Correctional Center was audited in October of 2015. The current audit was conducted on September 20 and 21, 2017. The report from the October 2015 audit is available on the agency website. All facility PREA audit reports are published on the web site.</p> <p>Auditors reviewed all relevant agency-wide policies, procedures, reports internal and external audits, and accreditations for the facility. Auditors reviewed a sampling of relevant documentation and other records for the past 12 months. Much of the documentation was provided electronically, prior to the audit and staff provided all documentation asked for during the audit. A representative sample of inmates, staff and supervisors was interviewed. Random inmates were chosen for interview, selecting two from each housing unit, and by interviewing prisoners randomly during a tour of the facility. Staff were chosen randomly from daily assignment sheets and during the tour of the facility. Interviews were private and inmates were provided an address to send confidential information or other correspondence to the auditor. No correspondence from inmates was received.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Wisconsin Department of Corrections publishes all completed facility PREA Audit Reports on the Agency website.

Appendix: Provision Findings

115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes

115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes

115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)	yes

115.13 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?	no
	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into	yes

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

115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na

115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.)	yes

115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates?	yes

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes

115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all	yes

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

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency: perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

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

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

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

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na

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

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

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes

115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.)	na

115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

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

115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes

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

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes

115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.33 (c)	Inmate education	
	Have all inmates received such education?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

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

115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?	yes

115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)	yes

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?	yes

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

115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes

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

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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes

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

115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	no

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

115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

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

115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes

115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

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

115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?	yes

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

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

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes

115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes

115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

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

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

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

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes

115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

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

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes

115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes

115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

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

115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes

115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

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

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

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

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

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

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes

115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes

115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes

115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.78 (g)	Disciplinary sanctions for inmates	
	Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes

115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

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

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

115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	na

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

115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

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

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

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

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

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes

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

115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes

115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes

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

115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

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

115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

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

115.401 (b)	Frequency and scope of audits	
	During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited?	yes

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

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

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

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)	yes