

PREA Facility Audit Report: Final

Name of Facility: Kenosha Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 04/29/2019

| 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: D. Will Weir | Date of Signature: 04/29/2019 |

| AUDITOR INFORMATION | |
|-------------------------------------|------------------------|
| Auditor name: | Weir, Will |
| Address: | |
| Email: | prea.america@gmail.com |
| Telephone number: | |
| Start Date of On-Site Audit: | 03-20-2019 |
| End Date of On-Site Audit: | 03-20-2019 |

| FACILITY INFORMATION | |
|-----------------------------------|--|
| Facility name: | Kenosha Correctional Center |
| Facility physical address: | 6353 14th Avenue, Kenosha, Wisconsin - 53143 |
| Facility Phone | 262-653-7099 |
| 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: | Michelle Hoffman | Title: | Superintendent |
| Email Address: | MichelleJ.Hoffman@wi.gov | Telephone Number: | 262-653-7109 |

| Warden/Superintendent | | | |
|-----------------------|--|--------------------------|-----------------------|
| Name: | Quala Champagne/Michelle Hoffman | Title: | Warden/Superintendent |
| Email Address: | Quala.Champagne@wi.gov MichelleJ.Hoffman@wi.gov | Telephone Number: | 608-240-5320/ 262-65 |

| Facility PREA Compliance Manager | | | |
|----------------------------------|------------------|-----------------------|---------------------------------|
| Name: | Michelle Hoffman | Email Address: | michellej.hoffman@wisconsin.gov |

| Facility Health Service Administrator | | | |
|---------------------------------------|-------------------|--------------------------|-------------------|
| Name: | Lon Becher | Title: | Nurse Coordinator |
| Email Address: | Lon.Becher@wi.gov | Telephone Number: | 608-225-3521 |

| Facility Characteristics | | |
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| Designed facility capacity: | 120 | |
| Current population of facility: | 118 | |
| Age Range | Adults: 21- | Youthful Residents: |
| Facility security level/inmate custody levels: | Minimum and community custody | |
| Number of staff currently employed at the facility who may have contact with inmates: | 21 | |

| AGENCY INFORMATION | |
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| 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: | Kevin Carr | Title: | Secretary |
| Email Address: | Kevin.Carr@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.

Introductory communication with WIDOC to discuss the audit process, audit preparation, the Pre-Audit Questionnaire (PAQ), and supporting documents and elements of the on-site visit started early in 2018 when contract renewal with WIDOC was discussed, and the decision was made to use the Online Audit System (OAS). The contract between PREA America and WIDOC was renewed on, or about, June 20, 2018. The March 20, 2019, date for the on-site audit was finalized January 2, 2019. The Audit Notice Posting was sent, with instructions to print on color paper and regarding proper distribution of the posting. Alternative-language posting was also made available. Proof of posting was verified by emailed photos of the various locations in the facility where the postings were placed. The date of the email was used to verify the minimum posting requirements of six weeks, along with observations of the postings during the physical plant tour.

During the Pre-Audit Phase, an extensive desk audit of the facility/agency was conducted, including of PAQ, policies, and procedures, as well as of supporting documentation. Several emails were exchanged to clarify issues. This phase of the audit was used to collaborate with the facility staff on questions and concerns regarding how to document compliance. Communication with the facility staff facilitated understanding, not only of the policies and procedures unique to the facility, but also of how PREA was put into practice. Internet research was done on the facility. The desk audit began February 22, when the auditor was notified by the Online Audit System (OAS) that "A Pre-Audit Questionnaire has been submitted for Kenosha Correctional Center and is ready for your review." All documents in the system were reviewed, including logs, training files, and curriculum. Background checks were randomly selected of staff, contractors, and volunteers to verify the initial background check, as well as the 5-year recheck requirement. Inmates were randomly selected to verify PREA education and PREA Screenings. Phone calls were made to listed advocates, to verify the advocacy required by the standards.

The on-site audit was conducted March 20, 2019. The audit team consisted of PREA America DOJ Certified PREA Auditor Will Weir, MCJ, and PREA America Project Manager Tom Kovach, who assisted with interviews. The on-site audit started with a briefing, which included confirmation of current population, agenda and logistics review, discussion of mandatory reporting, and clarifying the need to allow any staff or resident who requests an interview to get one. The audit team checked to see if there were questions or concerns.

The Site Review included obtaining and studying the facility diagram of the physical plant. Staff and inmates were observed during the tour, and the audit team engaged in casual conversation to ascertain if observations made were of "normal" supervision and movement. Random checks were made to assure that doors intended to be secured were locked. Random checks of PREA Hotline phones for functionality were made. All housing units and bathroom facilities were inspected for compliance for cross-gender supervision. This included a camera review for those areas with cameras. All areas of the physical plants were observed, with attention to those areas which statistically are high risk for sexual abuse. PREA

Postings in the visitation area were checked, including those regarding third-party reporting. It was also part of the tour to confirm that hard copies of First Responder Duties are available to staff. Blind spots were identified, and procedures for checking them were verified. One of the laundry rooms had a mirror; another of the laundry rooms, in another wing, did not, and thus, a mirror was recommended for that laundry room. Cameras record for approximately 60 days.

Interviews were selected in accordance with the guidance of the PREA Auditor Handbook, with random selections of inmates to ensure diversity of geographic location (from each housing unit), race, and those with risk factors. Random Staff interviews were made to include gender, shift, and posting diversity. Interviews were in a conversational manner, to gain the confidence of those interviewed and to put them at ease, so that the audit team could better understand their comprehension of PREA and the practice thereof in the facility.

21 of 117 inmates were interviewed. KCC does not house a high percentage of inmates that have clear risk factors for sexual victimization as defined in the PREA Auditor Handbook. However, by interviewing the youngest and oldest inmates, and inmates from each race and custody status, in addition to identified risk factors, the auditor feels he conducted 9 interviews that can be considered "targeted". Also, inmates were selected randomly to make sure some were interviewed from each housing unit. Inmates were overwhelmingly positive regarding KCC, at least in comparative terms. For example, they indicate that they believe that risk of sexual victimization is low because of an (unwritten) agreement among inmates to let each other work their programs and proceed to release, not distracting each other with sexual stuff or rule violations. In addition, the staff and inmate population are managed in such a way that individual inmates are not alone with individual staff members. Even though the facility has not had complaints alleging sexual abuse or sexual harassment during the past 12 months, the inmates are generally confident the facility will handle the complaints well, because less serious complaints are handled well. Some inmates were not as confidently trusting of staff, but the overwhelming number of inmates interviewed stated that if an inmate complains about something, the staff are quick to respond, but discrete, not singling out any inmates, nor trying to retaliate against them for complaining. Staff discretely get back with inmates to let them know the status of their question, grievance, or concern.

Interviews were conducted with the staff and administrators holding the following roles: Agency Head Designee, Agency PREA Administrator, Superintendent, Agency Human Resources, Agency Contract Administrator, Local Investigator, PREA Compliance Manager, Higher-Level Staff for Unannounced Rounds, Medical, Volunteer, Staff who perform Screening and Intake, Staff who monitor for Retaliation, and the Incident Review Team. An additional seven staff were selected, representing various stations, housing units, shifts, and both genders. All staff working during the on-site audit were interviewed. Since some specialized staff perform multiple duties, they were interviewed regarding all their PREA-related duties. This adds to a total of 15 unique interviews, in addition to interviews conducted to confirm advocacy and sexual assault services in the community.

The Exit Briefing addressed all aspects of the audit to date. No determination of compliance was given. The recap of the aggregated information obtained and observed was summarized. The format of the summary included a SWOT briefing: a review of the Strengths, Weaknesses, Opportunities, and Threats. The SWOT was included at the request of the facility staff, to assist in furthering the efforts of the facility to prevent and detect sexual abuse and harassment. The First Responder Duties were known well, except some staff confused the subtle difference in the wording when it came to destroying evidence after an alleged incident. They are to "Request" the victim and "Require" the aggressor to not to destroy evidence.

Superintendent Hoffman held a training, subsequent to the on-site audit, to review this distinction. Also, a DOC-wide "PREA Page" was sent out by the PREA Office with a similar reminder involving First Responder Duties and regarding LGBTI terms. Staff already carry First Responder Cards with the proper instructions. Also, a mirror was installed as recommended.

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 Wisconsin Department of Corrections (WIDOC) website lists the following for the Kenosha Correctional Center (KCC), which appears to be current and accurate:

"Center Information

Kenosha Correctional Center (KCC) is located in a mixed residential and commercial area of Kenosha. The center, which sits on 7.62 acres, first opened in 1990. Its current operating capacity is 115 adult male inmates. KCC 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.

Programs Offered

KCC offers work release programs with local employers through which employment is provided for qualified inmates, with an emphasis made on maintaining that employment placement after the inmate's release. Funds earned through work release help to pay fees, restitution and other obligations. Offsite opportunities are determined based on an evaluation of risk and of each individual's case. Placements cannot be guaranteed for all eligible inmates. Work release and offsite opportunities are a privilege, not a right, and are provided at the discretion of the center superintendent and warden.

KCC offers individual tutoring for inmates as they work towards earning a High School Equivalency Diploma. Additional programs are available for inmates with identified needs, based on available volunteers and community partners. These programs vary.

Community Enhancement

The KCC project crew assists local government agencies and non-profit organizations on a variety of work projects which incorporate a positive work experience, build new skills, and give back to the community. Community service opportunities are also offered with staff or agency supervision."

KCC is one "U" shaped building with three levels. The first floor contains two (all-male) housing wings, control center, a health services unit, a food service area, recreation room, TV room, resource/property room, state laundry room, two personal laundry rooms and an administration area. The basement has a food storage/tornado shelter area, clothing room, utility room and maintenance office. The second floor has maintenance facilities to include HVAC. All areas with inmate access are outfitted with video monitoring, locked and controlled doors, and mirrors.

Inmates are housed two bunks to a cell. A blue light and tone are in place to announce cross-gender supervision. Outside there is a large recreation area next to the parking lot. Entrance into the building is through an atrium, and the office, with a window and sign-in, is immediately adjacent to the lobby.

Some maintenance areas have a restricted key system. The food storage area has increased security sergeant rounds. State and personal laundry rooms are locked and only open during specific staff monitoring. In the event of an emergency, all volunteers and staff may also take the phone off the hook for staff response to the off-hook alarm. There are 22 cameras at this time, and more are anticipated.

Transporting inmates to jobs and interviews is an integral part of the facility's mission.

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.

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

The facility has shown compliance with all 45 standards.

None were shown to exceed standards.

| Standards |
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| <p>Auditor Overall Determination Definitions</p> <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) |
| <p>Auditor Discussion Instructions</p> <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 |
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| | <p>Auditor Overall Determination: Meets Standard</p> |
| | <p>Auditor Discussion</p> <p>KCC policy outlines how it will implement the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.</p> <p>Analysis: The Pre-Audit Questionnaire and accompanying documentation indicate the agency has zero tolerance toward all forms of sexual abuse and sexual harassment in the facility, and has policy covering all the minimum requirements of this standard. PREA Coordinator Leigha Weber answers to the Assistant Deputy Secretary of the Agency. The facility Superintendent, Michelle Hoffman, is the on-site PREA Compliance Manager, and she answers to Warden Quala Champagne. The auditor reviewed the PREA policies (known as Executive Directive 72), the Organizational Chart, and the PREA definitions. The facility is compliant with this standard.</p> |

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| 115.12 | Contracting with other entities for the confinement of inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The Wisconsin Department of Corrections (WIDOC) contracts with outside entities for the confinement of its inmates. Contract monitoring has occurred in the past year. Documentation was provided regarding each facility.</p> <p>Analysis: All contract facilities either had their PREA audits, or have submitted evidence of a scheduled audit, or a commitment to be audited, by the close of the current audit cycle. The facility is compliant with this standard.</p> |

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| 115.13 | Supervision and monitoring |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>During the onsite audit it was found that the facility has developed, documented, and started making its best efforts to comply on a regular basis with, a staffing plan that provides for adequate levels of staffing and video monitoring to protect inmates against abuse, taking into account all parts of this standard, including an annual review to see if adjustments are needed.</p> <p>Analysis: The Staffing Plan, Staffing Plan Review, and logs of unannounced rounds were reviewed during the audit process. Interviews with the PREA Coordinator (along with email clarifications), as well as interviews with supervisors, staff, and inmates also indicated compliance. Policies relating to this standard are found in DAI Policy 300.00.43, Chapter 300 Administrative: Institution Administrative Duty Coverage. The facility is compliant with this standard.</p> |

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| 115.14 | Youthful inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The facility does not house inmates who are under the age of 18. This was verified by interviews and documentation reviews.</p> <p>Analysis: This evidence is divided as follows: facility schematic; site review; population reports; policy (Executive Directive 72, Section XIII. C.; and DAI Policy 302.00.20, updated 03-01-2018, Chapter 302, regarding the placement of juveniles); and December 19, 2016 letter from the Administrator of the Division of Adult Institutions stating that from that date forward all youthful inmates will be housed within the Division of Juvenile Corrections. The facility is compliant with this standard.</p> |

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| 115.15 | Limits to cross-gender viewing and searches |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>During the onsite audit, it was verified that the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of inmates, and there have been no exceptions known in the past year. If exceptions occur, documentation is required. An Executive Directive and procedures had been implemented that enabled 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 (this includes viewing via video camera). Also, this Standard requires staff of the opposite gender to announce themselves when entering an inmate housing unit. There is a specific tone broadcast over the facility's public address system to announce the presence of cross-gender staff. This is accompanied by a light to assist the hearing impaired and those who miss the announcement. The agency has had a longstanding policy in place prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. None of these searches have occurred, and all staff have been trained on this policy.</p> <p>Analysis: The evidence reviewed is divided as follows: All interviews conducted during the audit, including inmate interviews, verify that no cross-gender searches are being performed. Staff agree that if a cross-gender search had to occur due to exigent circumstances, they would document. Interviews and observations during the tour also verify that inmates can perform bodily functions out of view of staff of the opposite gender. The audit team reviewed policies, training logs and curriculum, as well as conducting a site review. Policies regarding this standard can be found in Executive Order 72, Section IX & X; DAI Policy 306.17.02, Chapter 306 Security: Searches of Inmates; and DAI Policy 500.70.27, Chapter 500 Health Services: Transgender Inmates. Training reviewed included the Introduction to Body Searches and the Unit Manager Orientation. The facility does not house female inmates, and the inmates interviewed state that they are typically supervised by male staff. In addition, inmates stated that cross-gender supervision is not a concern for them. The facility is compliant with this standard.</p> |

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| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Very few inmates at KCC have disabilities, limited English proficiency, and/or impairments. The audit team verified that the policies and services are in place to assist inmates with disabilities and those with limited English proficiency during the booking process, PREA Education, and during responses to sexual abuse and harassment allegations.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. Relevant policies include Executive Directive 72, sections V, XI and XVI; DAI Policy 300.00.35 Chapter 300 Administrative: Americans with Disabilities Act; and DAI Policy 300.00.61 Chapter 300 Administrative: Language Assistance for Limited English Proficiency (LEP) Inmates. Also reviewed were the Language Translation/Interpretation Services Contract, the Inmate Handbook, and bilingual posters observed during the site tour. Also considered were the interviews with inmates with disabilities and interviews with random staff. One bilingual inmate recommended that the Spanish version of a bilingual posting be improved for clarity, prompting a review of the verbiage and a plan to change that particular posting, agency-wide.</p> |

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| 115.17 | Hiring and promotion decisions |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>WIDOC policy prohibits hiring or promoting anyone who may have contact with inmates, and prohibits enlisting the 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; 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; or has been civilly or administratively adjudicated to have engaged in any of these activities. Any incidents of sexual harassment must be considered in determining whether to hire or promote anyone, or to enlist the services of any contractor who may have contact with inmates. Policy also requires that before the facility hires any new employees who may have contact with inmates, it conducts criminal background record checks and, consistent with federal, state, and local law, makes 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. Criminal background record checks are conducted at least every five years. Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. The audit team reviewed the Background Check Policy (Executive Directive 72: Section VI. A. 1) and conducted interviews with the PREA Coordinator and Human Resources. The audit team reviewed the files of 11 employees, volunteers, and contractors and found them to be in compliance with the minimum requirements of this standard. This includes 3 background checks performed as "seniority checks" after 5 years of service. In addition, the team interviewed several administrators involved in the process.</p> |

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| 115.18 | Upgrades to facilities and technologies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>KCC has not acquired a new facility or made significant changes since the last audit. Also, the facility has not installed a new video monitoring system or updated their existing video monitoring system.</p> <p>Analysis: Interviews with administrators; the audit tour; and reviews of documentation, and camera plan schematic, indicate compliance with this standard.</p> |

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| 115.21 | Evidence protocol and forensic medical examinations |
| | <p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 1476 616">The facility has provided a Memorandum of Understanding (MOU) for outside advocacy through Women’s and Children’s Horizons and has provided verification of staff being trained as advocates. The audit team verified the MOU. Forensic exams are conducted at Aurora Hospital System Kenosha, who also offer access and referral services for advocates. Criminal investigations are completed by the Kenosha Police Department or Kenosha County Sheriff’s Office. The Inmate Handbook provides basic information to inmates about responding to sexual abuse, including medical exams, protecting evidence and advocacy.</p> <p data-bbox="252 660 1476 1220">Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: DAI Policy 306.00.14, Chapter 306 Security: Protection, Gathering and Preservation of Evidence; DAI Policy 500.30.19, Chapter 500 Health Services: Sexual Abuse – Health Services Unit Procedure in the Event of Sexual Abuse; and interviews with the PREA Coordinator and with administrators. Agency policies are based on Standards for Health Services in Prisons (2014 ed), Chicago, Illinois: National Commission on Correctional Health Care. Policies reviewed also include Executive Directive 72 Section XVI. The auditor also reviewed the WIDOC Victim Services Coordinator Sexual Abuse and Sexual Harassment in Confinement Reference Guide (with VSC Agenda and Checklist), as well as training provided to medical staff. Also pertinent to this standard is the letter sent to the Kenosha Police Department and to the Kenosha County Sheriff’s Office, requesting that they follow the PREA Standards when conducting investigations.</p> |

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| 115.22 | Policies to ensure referrals of allegations for investigations |
| | <p data-bbox="252 1417 896 1451">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 1496 523 1529">Auditor Discussion</p> <p data-bbox="252 1574 1452 1736">The PAQ states that KCC has not had an allegation of sexual abuse or sexual harassment since January 2015. The audit team checked the reporting system, reviewed allegations received at other facilities operated by this agency, and reviewed policies and protocols that are in place to handle allegations.</p> <p data-bbox="252 1780 1460 1904">Analysis: Evidence showing compliance is divided as follows: agency website; interviews with the PREA Coordinator and investigative staff; and policies such as Executive Directive 72, Section XVII and DAI Policy 303.00.05. The facility is in compliance with this standard.</p> |

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| 115.31 | Employee training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>All new staff are required to take the module, "PREA," as part of their initial training academy. All existing staff were required to take this module in the fall of 2015, and they receive refresher training. All employees have read Executive Directive 72 and signed acknowledgement form DOC-1558 to affirm their understanding. When new policies/directives regarding sexual abuse and sexual harassment are released, all employees who may have contact with inmates are informed using established WIDOC training protocols called "myDOC," "PREA PAGE," email notifications, and/or via classroom training. A new PREA PAGE came out during the 30 days after the on-site audit.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: Interviews with random employees; training policy (Executive Directive 72, Section XI) and curriculum; training logs including all employees; and randomly selected employee training acknowledgements for 10 employees.</p> |

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| 115.32 | Volunteer and contractor training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>All 7 volunteers and contractors who have contact with inmates are trained as required by this standard. They have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response. The level and type of training provided to volunteers and contractors is based on the services they provide and the level of contact they have with inmates. All volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed about how to report such incidents. The agency maintains documentation confirming that volunteers and contractors who have contact with inmates understand the training they have received.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: Interviews with administrators who manage and supervise contractors; interviews with a volunteer and a contractor; review of the training curriculum and acknowledgement documentation; and review of random files of volunteers and contractors. The audit team reviewed Sexual Abuse and Sexual Harassment in Confinement: A Guide for Volunteers and Contractors; and Volunteer Training, with Volunteer Training Acknowledgements; DAI Volunteer Orientation Manual; and DAI Volunteer, Pastoral Visitor, Program Guest & Intern Orientation.</p> |

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| 115.33 | Inmate education |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>During the intake process, inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The policies and curricula reviewed all seem to indicate full compliance with all subsections of this standard. Documentation is done on-line as 100% of inmates are educated.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: Site review; interviews with staff and inmates; logs of inmate education, and 10 examples of acknowledgements of inmate education. Policy includes WIDOC PREA Education Facilitator Guide; and Executive Directive 72 Section XI.</p> |

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| 115.34 | Specialized training: Investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency performs its own administrative investigations, and investigators have received training on conducting such investigations in confinement settings. Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency has documented the training, and it was reviewed by the audit team.</p> <p>Analysis: Through a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. The audit team reviewed Training Policy (Executive Directive 72, Section XI) and the Sexual Abuse and Sexual Harassment Investigations Training curriculum. In addition, the auditor interviewed investigators.</p> |

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| 115.35 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. All medical and mental health care practitioners who work regularly at this facility received the training required by agency policy, and the training is documented, but they do not conduct forensic medical exams. There are 4 medical and mental health care practitioners who work at KCC.</p> <p>Analysis: Through a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. The audit team reviewed Training Policy (Executive Directive 72, Section XI); the Healthcare Module (PREA for Healthcare Workers); and logs of medical and mental health care practitioners who completed the training. In addition, the audit team interviewed a random selection of medical and mental health staff.</p> |

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| 115.41 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates. The policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. Risk assessment is to be conducted using an objective screening instrument, which considers all the risk factors required by this standard. The policy requires that the facility reassess each inmate’s risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate’s arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. The agency has 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.</p> <p>Analysis: Policies regarding this standard are found in Executive Directive 72, Section XII and DAI Policy 410.30.01, Chapter 410 PREA: Screening for Risk of Sexual Abusiveness and Sexual Victimization. The auditor reviewed 20 screenings and reassessments, as well as documentation that indicates 100% of inmates are screened, then reassessed as appropriate.</p> |

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| 115.42 | Use of screening information |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency/facility uses information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The agency/facility makes individualized determinations about how to ensure the safety of each inmate. The agency/facility makes housing and program assignments for transgender or intersex inmates in the facility on a case-by-case basis. Placement and programming assignments for each transgender or intersex inmate are reassessed at least twice each year, to review any threats to safety experienced by the inmate. A transgender or intersex inmate’s own view with respect to his or her own safety shall be given serious consideration. Transgender and intersex inmates are given the opportunity to shower separately from other inmates.</p> <p>Analysis: Policies regarding this standard are found in Executive Directive 72, Section XII & XIII; DAI Policy 410.30.01, Chapter 410 PREA: Screening for Risk of Sexual Abusiveness and Sexual Victimization; DAI Policy 306.00.72, Chapter 306 Security: Screening for Risk of Sexual Abusiveness and Sexual Victimization; Chapter 306: Searches of Inmates; DAI Policy 500.70.27; and Chapter 500 Health Services: Transgender Inmates. These policies, along with interviews and screenings conducted that indicate proof of practice, verify that the facility has shown compliance with this standard.</p> |

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| 115.43 | Protective Custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has a policy prohibiting the placement of 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.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. Policies reviewed include Executive Directive 72, Section XIII. A, B & E; DAI Policy 306.00.72; and Chapter 306 Security: Screening for Risk of Abusiveness and Sexual Victimization. A review of policy and documentation related to isolation, as well as interviews with inmates and staff, indicate the facility does not use segregation to protect victims of abuse.</p> |

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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about: sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. The agency has a policy mandating that staff promptly accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties, and give these reports promptly to their supervisor, who will notify statewide PREA Investigators; and to appropriate official(s), for investigation. Staff and inmates are informed of these procedures in writing, in training, verbally, and through signs posted in the facility. Inmates interviewed indicated they remember their options for reporting and that they can get help reporting. Inmates dial 777 to make reports to WIDOC and 888 to report to an outside law enforcement agency.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. In addition to testing the reporting system and reviewing reports from inmates, the audit team observed notices in English and Spanish regarding how to make reports during the audit site tour. Also, the auditor found agency policies (Executive Directive 72, Section XIV) to be compliant with this standard. The auditor also reviewed the inmate handbook and interviewed random inmates and staff regarding this standard and whether there are barriers to reporting.</p> |

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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>KCC has an administrative procedure for dealing with inmate grievances regarding sexual abuse. An inmate is allowed to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Inmates are not required to use an informal grievance process or to otherwise attempt to resolve with staff an alleged incident of sexual abuse. An inmate may submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint, and it will not be referred to the staff member who is the subject of the complaint. A review of written policies, and an examination of procedures in place, indicates compliance with this standard. Investigative and grievance documentation indicate that any allegations of sexual abuse or harassment reported through the grievance system diverted so that they go through the established PREA investigative processes. In addition, the response times and protocols for emergency grievances are consistent with this standard.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: Policies reviewed include Executive Directive 72, Sections XV & XVI, interviews with staff and administrators, and interviews with inmates that verify the grievance system is in place and taken seriously at the facility.</p> |

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| 115.53 | Inmate access to outside confidential support services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The facility provides inmates with access to outside and facility staff victim advocates for emotional support services related to sexual abuse by giving inmates the mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. No inmates are detained solely for immigration purposes, so portions of this standard relating to this population are not applicable. Interviews at the facility indicate that the facility is invested in enabling reasonable communication between inmates and these organizations, in as confidential a manner as possible.</p> <p>Analysis: In addition to interviewing inmates, the auditor reviewed agency policies, such as Executive Directive 72, Section XVI. The handout, "Sexual Abuse in Confinement: A Resource for Offenders" providing details regarding confidential access to advocates was reviewed. Also, the audit team verified the MOU with Women's and Children's Horizons. Access to outside victim advocates and reporting methods and forms are available at https://doc.wi.gov/Pages/AboutDOC/PrisonRapeEliminationAct.aspx.</p> |

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| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency provides methods to receive third-party reports of inmate sexual abuse or sexual harassment. The methods for reporting are available on the agency website. Third-party reporting postings are located in the visitation areas of the facility.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: postings in visitation areas; a review of the agency website, and interviews with staff and inmates.</p> |

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| 115.61 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency requires all staff to report immediately and according to agency policy the following: any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; any retaliation against inmates or staff who reported such an incident; and/or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Apart from reporting to designated supervisors or officials and designated state or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. The auditor reviewed Executive Directive 72, Section XIV; forms and methods used for reporting; and reports that have been made at other facilities operated by the agency. The requirements of this standard are in policy and in the training reviewed by the auditor. Also, interviews indicate that staff understand their responsibilities and reporting methods.</p> |

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| 115.62 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate, as required in WIDOC Executive Directive 72. In the past 12 months, there were no incidents where the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: Interviews with randomly selected staff indicate a commitment to take immediate action when there are indications of risk of imminent abuse. Policies consistent with this standard include Executive Directive 72, Section XVI. Interviews with Correctional Officers and administrators indicate an understanding of this standard. Inmates indicated they feel staff would take steps to protect them, but also said that the inmates at KCC are trying to complete their sentences and programs so they can go home and are unlikely to engage in sexually abusive behaviors.</p> |

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| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the external facility, or the appropriate office of the agency or facility where sexual abuse is alleged to have occurred. Agency policy requires the facility head to provide such notification as soon as possible, but no later than 72 hours after receiving the allegation. The facility documents that it has provided such notification within 72 hours of receiving the allegation. The agency policy requires that allegations received from other facilities/agencies are investigated in accordance with PREA standards.</p> <p>Analysis: Through a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. Policies and training indicate compliance with this standard. Policy relating to this standard is found in Executive Directive 72, Section XIV. The agency head and facility administrator state they understand this policy, and that it is followed.</p> |

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| 115.64 | Staff first responder duties |
| | <p data-bbox="247 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="247 246 526 280">Auditor Discussion</p> <p data-bbox="247 324 1484 1086">The agency has a first responder policy for allegations of sexual abuse. The agency policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report is required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. In the 12 months prior to the onsite audit, there has been no allegation that an inmate was sexually abused. Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to: request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. Staff interviews indicated that staff have a basic understanding of the first responder protocols, although some staff confused the “request” and “ensure” instructions referenced above. They received refresher information on these duties during the 30 days after the on-site audit.</p> <p data-bbox="247 1131 1460 1265">Analysis: The audit team reviewed Executive Directive 72, Section XVI; Healthcare Staff First Responder Action Steps; and Non-Security Staff First Responder Action Steps, all indicating compliance with the standard, along with the interviews conducted.</p> |

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| 115.65 | Coordinated response |
| | <p data-bbox="247 1458 901 1491">Auditor Overall Determination: Meets Standard</p> <p data-bbox="247 1536 526 1570">Auditor Discussion</p> <p data-bbox="247 1615 1452 1738">The CRP coordinates actions among staff First Responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse.</p> <p data-bbox="247 1783 1476 1906">Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: The CRP; information from administrators and staff; and relevant training and policies.</p> |

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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has not entered into or renewed any collective bargaining agreement or other agreement since the last audit. This agency maintains the ability to protect inmates from contact with abusers.</p> <p>Analysis: Polices, Pre-Audit Questionnaire documentation, and interviews with administrators verify that there are no agreements in place that would pose a barrier to protecting inmate victims.</p> |

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| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>According to the PAQ, the Social Worker who is the Victim Services Coordinator monitors inmates for retaliation. Retaliation monitoring is required in policy, and forms have been developed. Blank forms were provided to the auditor. Administrators, investigators, and the Social Worker indicate an understanding of this standard and the policies that would be followed in the event of an allegation.</p> <p>Analysis: Evidence is divided as follows: Executive Directive 72, Section XVIII; VSC forms; interviews with alleged victims; and interviews with administrators.</p> |

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| 115.68 | Post-allegation protective custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed appears to show that the facility does not use involuntary segregation to protect alleged victims and would not be able to do so at this facility. Inmates would have to be moved to another facility if they needed this level of security.</p> <p>Analysis: The facility has shown compliance with this standard. The audit team reviewed Executive Directive 72, Section XVI, and interviewed inmates and staff regarding practices at the facility. These interviews included the facility administrator and medical and mental health staff. The policy, and interviews, suggest that the policy is being followed, although there have been no known incidents during the past 12 months that required an inmate to be protected after making an allegation.</p> |

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| 115.71 | Criminal and administrative agency investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has a policy related to criminal and administrative agency investigations. Substantiated allegations that appear to be criminal are referred for prosecution. There has been no allegation of sexual abuse or harassment in the 12 months prior to the onsite audit. Where sexual abuse is alleged, the agency will use investigators who have received special training in sexual abuse investigations. These investigations will be conducted promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. Where the evidence seems to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and will not be determined by the person's status as inmate or staff. The agency will not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and documents in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence. The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The departure of the alleged abuser or victim from the employment or control of the facility or agency is not a basis for terminating an investigation. When outside agencies investigate sexual abuse, the facility will request they follow PREA standards for conducting the investigation, and the facility will cooperate with outside investigators and endeavor to remain informed about the progress of the investigation.</p> <p>Analysis: The audit team interviewed the PREA Coordinator, investigative staff, facility administrators, and inmates. Also, the audit team reviewed documents such as Executive Directive 72, Section XVII; and the Pre-Audit Questionnaire. All these sources of information indicate the facility is compliant with the standard.</p> |

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| 115.72 | Evidentiary standard for administrative investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>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.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard, as required in policy (Executive Directive 72, Section XVII.G.). Interviews conducted with investigators and administrators also show compliance with this standard.</p> |

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| 115.73 | Reporting to inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. If an outside entity conducts such investigation, the agency requests the relevant information from the investigative entity in order to inform the inmate of the outcome of the investigation. In the 12 months prior to the onsite audit, there has been no allegation to investigate. Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently informs the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate’s unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. Following an inmate’s allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or, The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. The agency has a policy that all notifications to inmates described under this standard are documented.</p> <p>Analysis: By a triangulation of evidence, the auditor is able to determine that the facility has shown compliance with this standard. This evidence is divided as follows: reviews of investigations completed in the past 12 months at other WIDOC facilities (which includes documentation of notification of inmate victims); and interviews with the PREA Coordinator and with investigative staff. Policy related to this standard is found in Executive Directive 72, Section XVII.</p> |

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| 115.76 | Disciplinary sanctions for staff |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and with the sanctions imposed for comparable offenses by other staff with similar histories. The agency head, as well as the PREA Coordinator and others interviewed, verify that 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, will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: interviews with investigators and administrators; review of selected investigations completed in the past 12 months in a sister facility (KCC had no investigations); and policy relating to this standard found in Executive Directive 72: Section XIX. A & XIV. C. 1.</p> |

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| 115.77 | Corrective action for contractors and volunteers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The auditor has reviewed the agency policy, which requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Agency policy also requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: interviews with investigators and administrators; and a review of policy found in Executive Directive 72, Section XIX, along with training provided to contractors and volunteers.</p> |

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| 115.78 | Disciplinary sanctions for inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Inmates are subjected to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding, or criminal finding, that the inmate engaged in inmate-on-inmate sexual abuse. The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact. The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. The agency prohibits all sexual activity between inmates, but it does not deem such activity to constitute sexual abuse, unless it determines that the activity is coerced.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. Compliance with this standard was verified through interviews with inmates, the PREA Coordinator and with investigative staff; along with a review of policies (Executive Directive 72, Section XIX).</p> |

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| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>According to policies and documentation provided, when there are inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41, the facility is required to offer a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. The screenings provided to the audit team show that the screening completed pursuant to §115.41 triggers medical and mental health screenings when there is a history of abuse, and the system documents when those screenings are completed. Electronic records of several of these screenings were provided. No inmates in the past 12 months disclosed prior victimization to KCC screeners.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: Executive Directive 72, Section XII; review of screenings for risk of abusiveness and/or risk of victimization; interviews with staff who perform screenings; and interviews with inmates who reported various risk factors.</p> |

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| 115.82 | Access to emergency medical and mental health services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Emergency services are provided at Aurora Hospital System Kenosha.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: interviews with the nurse, First Responders, and facility administrator; a review of Executive Directive 72, Section XVI. B. 2; and verification of availability of emergency care.</p> |

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| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1485 786">According to documentation reviewed, the facility offers 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. The evaluation and treatment of such victims includes, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The facility provides such victims with medical and mental health services consistent with the community level of care. Inmates who are victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Treatment services are 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. Providers in the community verify services are available.</p> <p data-bbox="252 842 1477 999">Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: interviews with inmates, the nurse, and facility administrator; review of health services and psychological services forms; and review of policy found in Executive Directive 72, Section XVI. B.</p> |

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| 115.86 | Sexual abuse incident reviews |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The warden, PREA Coordinator, and facility Superintendent, verify that the facility, according to policy, conducts a sexual abuse incident review, at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. According to policy, the facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation. The Sexual Abuse Incident Review (SAIR) team is to include upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. The review team will: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. The facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to this section, and any recommendations for improvement, and submits such report to the facility head and PREA Compliance Manager. There have been no allegations of sexual abuse received in the past 12 months; so, no incident reviews have been conducted.</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. The audit team reviewed the policy relating to Incident Reviews; Executive Directive 72, Section XX, and interviewed members of the Sexual Abuse Incident Review Team.</p> |

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| 115.87 | Data collection |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The 2017 Annual Report can be read at: https://doc.wi.gov/Documents/AboutDOC/PREA/Annual%20Reports/2017DOCAnnualPREAREport.pdf</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: interviews with administrators; data collection; and the agency's annual report for 2017. Policy compliant with this standard is found in Executive Directive 72, Section XXI.</p> |

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| 115.88 | Data review for corrective action |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The Agency reports to their state office in Madison, and the numbers are collected and reported. Each month, the numbers are updated, showing the total for the year to that point. The agency reviews 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, and training, including: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for the facility. The recently completed 2017 Annual Report can be found at: https://doc.wi.gov/Documents/AboutDOC/PREA/Annual%20Reports/2017DOCAnnualPREAREport.pdf</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: interviews with administrators; corrective actions taken; and the published annual reports for 2015, 2016, and 2017.</p> |

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| 115.89 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy and procedure ensure that incident-based and aggregate data are securely retained, requiring that aggregated sexual abuse data be made readily available to the public, at least annually. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise. Verified policy and practice protect the retention of these data. Reports can be reviewed at: https://doc.wi.gov/Pages/AboutDOC/PrisonRapeEliminationAct.aspx</p> <p>Analysis: By a triangulation of evidence, the auditor can determine that the facility has shown compliance with this standard. This evidence is divided as follows: interviews with administrators; the agency’s website; and the annual report. Also, the auditor reviewed Executive Directive 72, Section XXI.</p> |

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| 115.401 | Frequency and scope of audits |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Analysis: The agency is ensuring that each facility operated by the agency is audited at least once every 3 years. Any contract facility that has not been audited has provided proof that an audit is scheduled.</p> |

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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Reports can be reviewed, along with other PREA reports and policies, at: https://doc.wi.gov/Pages/AboutDOC/PrisonRapeEliminationAct.aspx</p> <p>Analysis: The agency has faithfully made Audit Reports available to the public on its website.</p> |

Appendix: Provision Findings

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

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

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

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

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

| 115.13 (a) | Supervision and monitoring | |
|------------|---|-----|
| | Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into | yes |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

| 115.41 (f) | Screening for risk of victimization and abusiveness | |
|------------|---|-----|
| | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

| 115.52 (a) | Exhaustion of administrative remedies | |
|------------|--|----|
| | Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | 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 |

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|-------------------|---|-----|
| 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 |

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| 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 |

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|-------------------|---|-----|
| 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 |

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

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|-------------------|--|-----|
| 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 |

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|-------------------|---|-----|
| 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 |

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

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

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

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

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

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|-------------------|---|-----|
| 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 |

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|-------------------|--|-----|
| 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 |

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| 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 |

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|-------------------|--|-----|
| 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 |

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|-------------------|--|-----|
| 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 |

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

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|-------------------|--|-----|
| 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 |

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|-------------------|--|-----|
| 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 |

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| 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 |

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

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

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

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

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| 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 |

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

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|-------------------|---|-----|
| 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 |

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|-------------------|--|-----|
| 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 |

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|-------------------|---|-----|
| 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 |

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|-------------------|---|-----|
| 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 |

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|-------------------|---|-----|
| 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 |

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|-------------------|---|-----|
| 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 |

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|-------------------|---|-----|
| 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 |

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| 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 |

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|-------------------|--|----|
| 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 |

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|-------------------|--|----|
| 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 |

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|-------------------|--|-----|
| 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 |

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|-------------------|---|-----|
| 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 |

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| 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 |

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

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|-------------------|---|-----|
| 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 |

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|-------------------|--|-----|
| 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 |

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| 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 |

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| 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 |

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|-------------------|--|-----|
| 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 |

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| 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 |

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| 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 |

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|-------------------|--|-----|
| 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 |

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|-------------------|---|-----|
| 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 |

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

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| 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 |

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

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|-------------------|---|-----|
| 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 |

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| 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.) | no |

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| 115.401 (b) | Frequency and scope of audits | |
| | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.) | no |
| | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.) | no |
| | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | yes |

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| 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 |

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| 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 |

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

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| 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 |

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| 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 |