

PREA Facility Audit Report: Final

Name of Facility: Black River Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/20/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Deborah Striplin	Date of Signature: 05/20/2022

AUDITOR INFORMATION	
Auditor name:	Striplin, Deborah
Email:	dstriplin@doc.nv.gov
Start Date of On-Site Audit:	04/11/2022
End Date of On-Site Audit:	04/11/2022

FACILITY INFORMATION	
Facility name:	Black River Correctional Center
Facility physical address:	W6898 East Staffon Road, Black River Falls, Wisconsin - 54615
Facility mailing address:	

Primary Contact	
Name:	Matthew Gerber
Email Address:	Matthew.Gerber@wisconsin.gov
Telephone Number:	715-333-5681

Warden/Jail Administrator/Sheriff/Director	
Name:	Quala Champagne
Email Address:	Quala.Champagne@wisconsin.gov
Telephone Number:	608-240-5310

Facility PREA Compliance Manager	
Name:	Matthew Gerber
Email Address:	matthew.gerber@wisconsin.gov
Telephone Number:	O: 715 333-5681

Facility Health Service Administrator On-site	
Name:	Paula Stelsel
Email Address:	Paula.Stelsel@wisconsin.gov
Telephone Number:	920 324-6335

Facility Characteristics	
Designed facility capacity:	62
Current population of facility:	74
Average daily population for the past 12 months:	82
Has the facility been over capacity at any point in the past 12 months?	Yes
Which population(s) does the facility hold?	Males
Age range of population:	21 - 72
Facility security levels/inmate custody levels:	Minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	30
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	1
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	1

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

Agency Chief Executive Officer Information:	
Name:	Kevin Carr
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

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-04-11
2. End date of the onsite portion of the audit:	2022-04-11

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	62
15. Average daily population for the past 12 months:	82
16. Number of inmate/resident/detainee housing units:	1
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	76
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	0
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	The facility did not have any offenders who reported sexual abuse while in this facility. They did have one offender who reported sexual abuse in a confinement setting that occurred many years ago.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	30
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The facility provided the audit team with a roster of offenders from each wing of the housing unit. The audit team reviewed the information provided and selected a diverse group of offenders by race and ethnicity from each wing.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	The auditor handbook required the audit team to select a minimum of 16 offenders, eight random and eight target/specialized interviews. The auditor handbook required the audit team to select a minimum of 16 offenders, eight random and eight target/specialized interviews. During the on-site review, BRCC did not have some of the target offenders. As such, the audit team increased the number of random offender interviews.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	2
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility stated they did not have any offenders with a physically disabled during the onsite review. The facility offender roster provided to the audit team did not reference any offenders who may have a physical disability. The audit team did not observe any offenders with a disability during the physical plant review.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility stated they did not have any offenders with cognitive or functional disabilities during the onsite review. The facility offender roster provided to the audit team did not reference offenders with cognitive or functional disabilities. During the interviews with random offenders, the audit team did not observe or identify any who may have had cognitive or functional disabilities.d.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility stated they did not have any offenders who were blind or visually impaired during the onsite review. The offender roster provided to the audit team did not reference any offenders who were blind or visually impaired. During the physical plant review and interviews with random offenders, the audit team did not observe or identify any who were blind or appeared visually impaired.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility stated they did not have any offenders who were deaf or hard of hearing during the onsite review. The offender roster provided to the audit team did not reference any offenders as deaf or hard of hearing. When the audit team was conducting interviews with random offenders, they did not observe any who were deaf or hard of hearing.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility stated they did not have any Gay, Bi-sexual, Transgender, or Intersex offenders during the onsite review. During the physical plant review and interviews with random offenders, the audit team did not observe or perceive Gay and Bi-Sexual.</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility stated they did not have any Gay, Bi-sexual, Transgender, or Intersex offenders during the onsite review. During the physical plant review and interviews with random offenders, the audit team did not observe or perceive any Transgender or Intersex Offender.</p>

67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	1
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility did not have any offenders who reported sexual victimization outside of confinement during the on-site review
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	This facility does not have administrative segregation housing.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The auditor handbook required the audit team to select a minimum of 16 offenders, eight random and eight target/specialized interviews. The auditor handbook required the audit team to select a minimum of 16 offenders, eight random and eight target/specialized interviews. During the on-site review, BRCC did not have some of the target offenders. As such, the audit team increased the number of random offender interviews.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	9

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>18</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Agency contract administrator <input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment <input type="checkbox"/> Line staff who supervise youthful inmates (if applicable) <input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable) <input checked="" type="checkbox"/> Medical staff <input checked="" type="checkbox"/> Mental health staff <input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches <input checked="" type="checkbox"/> Administrative (human resources) staff <input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff <input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations <input type="checkbox"/> Investigative staff responsible for conducting criminal investigations <input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness <input type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation <input checked="" type="checkbox"/> Staff on the sexual abuse incident review team <input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation <input type="checkbox"/> First responders, both security and non-security staff <input checked="" type="checkbox"/> Intake staff <input checked="" type="checkbox"/> Other
<p>If "Other," provide additional specialized staff roles interviewed:</p>	<p>The auditor conducted an interview with the Facility Victim Coordinator</p>
<p>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the total number of CONTRACTORS who were interviewed:</p>	<p>1</p>

<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>No text provided.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

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

Documentation Sampling

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

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

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	This facility did not have any reported incident of sexual abuse or sexual harassment within this audit time frame including going back to the last PREA audit.
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0

<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>This facility did not have any reported incident of sexual abuse or sexual harassment within this audit time frame including going back to the last PREA audit.</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files) </p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) </p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) </p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) </p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) </p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>This facility did not have any reported incident of sexual abuse or sexual harassment within this audit time frame including going back to the last PREA audit.</p>
<p>SUPPORT STAFF INFORMATION</p>	

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- Yes
 No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- Yes
 No

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

2

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- The audited facility or its parent agency
 My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
 A third-party auditing entity (e.g., accreditation body, consulting firm)
 Other

Identify your state/territory or county government employer by name:

Nevada Department of Corrections

Was this audit conducted as part of a consortium or circular auditing arrangement?

- Yes
 No

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency PREA Director position description • Agency Organizational Chart • WIDOC Facility PREA Compliance Managers and Victim Services Coordinator <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized interview with the Agency PREA Director • Specialized interview with the PREA Compliance Manager • Specialized staff interviews • Interviews with random staff <p>(a) ED #72 states “The Wisconsin Department of Corrections has zero-tolerance for sexual abuse, sexual harassment and report-related retaliation in its facilities, including those with which it contracts for the confinement of offenders.</p> <ul style="list-style-type: none"> ▪ The DOC provides a coordinated victim-centered response to reports of sexual abuse and sexual harassment. This includes providing medical and mental health services to victims of sexual abuse and sexual harassment while investigating all allegations. ▪ The DOC provides multiple avenues to report allegations of sexual abuse and sexual harassment and, further, recognizes the right of employees and offenders to be free from retaliation for reporting sexual abuse and sexual harassment. ▪ The DOC trains all staff members, contractors, and volunteers to recognize, respond to and report sexual abuse and sexual harassment. ▪ The DOC provides offenders with a comprehensive orientation that details their right to be free from sexual abuse, sexual harassment, and report-related retaliation. ▪ The DOC employs a data collection method to accurately track and aggregate sexual abuse and sexual harassment incidents, identify core causal factors and take corrective action so as to align with a zero-tolerance environment <p>(b) ED #72 states “The DOC shall employ or designate a PREA Director to oversee department efforts to comply with PREA standards. This position shall have sufficient time and authority to develop, implement and oversee DOC’s efforts to comply with PREA standards in all of its facilities.” The agency policy, agency PREA Director position description, and specialized interview with the Agency PREA Director supported compliance with this provision to include the guidance posted on the PREA Resource Center under the Frequently Asked Questions (FAQ) dated December 18, 2015, which reads in part:</p> <p>In terms of authority, PREA Directors at the agency level must, at a minimum, have:</p> <ul style="list-style-type: none"> • Direct access to the agency’s most senior leader or chief executive officer (e.g., Director, Secretary, Commissioner, Administrator, • Direct access to the agency’s executive or senior leadership team; and • The influence necessary to create and implement agency-wide policies, procedures, and practices, without any interference from other levels of bureaucracy or supervision, and in accordance with the PREA standards and interpretative guidance issued by DOJ. <p>*The agency PREA Director reports to the Assistant Deputy Secretary with direct access to the Secretary.</p> <p>PREA Director pre onsite interview: While the PREA Standards references and defines “PREA Coordinator”, WI DOC policy defines this position as the “PREA Director.” The PREA Director is assigned to the PREA Office in Madison (Headquarters) and supervises four staff who provide additional support and assist in monitoring the designated facility's</p>

PREA Compliance. The PREA Director stated that she has time and authority to oversee the agency's efforts to comply with the PREA standards with direct access to the agency's Executive Leadership. In coordinating the agencies and facility's efforts to comply with the PREA standards, the PREA Office staff conducts quarterly status checks with the facility PREA Compliance Managers (PCM). This is completed through email, telephonic, virtual meetings, and on-site visits. If an issue is identified the PREA Director and the facility PCM brainstorm solutions and ensure there is open communication to discuss and resolve issues which could include but are not limited to: policy and procedure revisions and looking at other facilities on how they are meeting compliance.

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

PREA Compliance Manager (PCM) pre onsite interview: The facility Superintendent is designated as the PREA Compliance Manager and has held this position for ten years. He has direct access to the Warden, Corrections Security Director, and PREA Director and has regular communication with them. During the interview, he stated that he has enough time and the authority to manage PREA responsibilities. The facility Captain is his backup and supports him in maintaining compliance. During the morning staff briefings, they will discuss any concerns or deficiencies that may have been identified and work together to determine what actions need to be taken.

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

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

115.12	Contracting with other entities for the confinement of inmates
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1177 300">In determining compliance the auditor triangulated available evidence related to this standard:</p> <p data-bbox="240 331 743 358"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 409 1358 568" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions (DAI) policy 410-00-01, effective 1/22 • Contract Compliance Review Report – Prison Rape Elimination Act • Thirteen contracts for housing WIDOC offenders <p data-bbox="240 600 459 627"><u>Interviews conducted</u></p> <ul data-bbox="282 678 627 705" style="list-style-type: none"> • Agency Contracts Administrator <p data-bbox="240 736 1481 965">Pre-on-site documentation and contract agency public website review: The PAQ reflected a total of thirteen agency contracts. Documentation uploaded into the OAS included fourteen active and one dissolved contract within the audit time frame to house WIDOC offenders. The contract with the Forest County Sheriff's office was terminated effective February 1, 2022. The agency policy, contract agreements, and contracted facility public websites were reviewed. This auditor identified only two contract agencies have received National PREA audits, some agencies did not have annual agency PREA reports, and/or PREA information on their public website. On April 6, 2022, the auditor received a copy of the letter sent by the Secretary to the agencies regarding compliance with standards and agency agreements.</p> <p data-bbox="240 996 459 1023"><u>Contracted agencies:</u></p> <ol data-bbox="263 1072 767 1503" style="list-style-type: none"> 1. Bayfield County - Terminated contract 5/2022 2. Fond Du Lac County 3. Milwaukee County House (MCH) 4. Jefferson County 5. Juneau County 6. Marquette County 7. Oneida County 8. Ozaukee County 9. Racine County 10. Rock County 11. Sauk County 12. Vernon County 13. Vilas County <p data-bbox="240 1534 884 1561"><u>Contracted agencies who have received a National PREA Audit:</u></p> <ul data-bbox="282 1612 914 1673" style="list-style-type: none"> • Sauk County Jail: Final PREA audit report dated 12/17/2018 • Vilas County Jail: Final PREA audit report dated 12/13/2018 <p data-bbox="240 1704 1129 1731"><u>Contracted agencies with some level of PREA information posted on their public website:</u></p> <ul data-bbox="282 1783 1123 2040" style="list-style-type: none"> • Fond Du Lac County: PREA information and annual report 2018-2020 • Milwaukee County House (MCH): PREA information and annual report 2018-2020 • Oneida County: PREA information and annual reports 2019 – 2021 • Ozaukee County: PREA information and annual reports 2019 - 2020 • Rock County: PREA information, and annual reports 2015-2020 • Sauk County: PREA information and 2020 Annual report • Vernon County: PREA information and annual reports 2017-2021 • Vilas County: PREA information and annual reports 2018 – 2021 <p data-bbox="240 2072 1023 2098"><u>Contracted agencies with no PREA information posted on their public website:</u></p>

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

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

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

1. The Sheriff agrees to comply with the Federal Prison Rape Elimination Act of 2003 and any subsequent standards imposed by the United States Attorney General. If the Sheriff is not in full compliance with the Federal Prison Rape Elimination Act of 2003, the Sheriff shall take all feasible and necessary steps to work toward full compliance, shall continue to do so until full compliance is achieved, and shall continue to maintain full compliance. The Sheriff shall have policies and procedures in place for responding to sexual abuse and sexual harassment allegations as defined by PREA, in addition to report-related retaliation allegations, and shall further have procedures or policies for maintaining reports and records necessary for reporting data consistent with PREA. The Sheriff shall provide training for its staff, contractors, interns, volunteers, and any others who may have contact with inmates pursuant to its policy, procedures, and PREA standards. See 28 C.F.R. § 115.12
2. The Sheriff shall schedule and subject itself to a Department of Justice (DOJ) PREA Audit pursuant to 28 C.F.R. § 115.401-405 at least once every three years beginning August 20, 2013. The Sheriff shall bear the costs of conducting the audit. The Sheriff shall forward all interim and final facility PREA audit reports within 30 days of receipt to DOCPREData@wisconsin.gov.
3. The Sheriff agrees to timely completion of the Bureau of Justice Statistics Annual Survey of Sexual Victimization (SSV) and/or its current equivalent survey. The Sheriff will forward a copy of the SSVIAAdult Incident Form and/or SSVIJ-Juvenile Incident Form for each incident involving DOC inmates in the prior calendar year to the DOC within 30 calendar days of the date the Bureau of Justice Statistics publishes the Annual Survey on Sexual Victimization. These forms shall be forwarded to the DOC PREA Office at OCPREData@wisconsin.gov. See 28 C.F.R. § 115.87.
4. During the years in which the Sheriff is not audited by a US DOJ PREA auditor in accordance with 28 C.F.R. § 115.401-405, DOC shall conduct an annual compliance review to ensure that the Sheriff is compliant with PREA standards. This review may include, but is not limited to, facility tour, staff and inmate interviews, and examination of Sheriff policies, procedures, staff records, inmate records, training records, and incident records related to sexual abuse or sexual harassment allegations as defined by PREA, or report-related retaliation allegations. See 28 C.F.R. § 115.12.

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

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

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

Follow-up: On 5/2/22 the lead auditor received a memo and supporting documentation showing the dates PREA audits are scheduled for twelve of the contracted agency facilities. Bayfield County elected to terminate the contract with WIDOC effective May 2022. On May 3, 2022, the lead auditor received an email from the PREA Director reporting Marquette County

updated its agency's public website to include PREA information. On 5/6/2022 the lead auditor review the agency website which affirmed they have a PREA section and posted annual PREA reports for 2020 and 2021. The public website for the three contract facilities that did not have PREA information posted will have this corrected within the next few months to comply with contract requirements.

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

115.13	Supervision and monitoring
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1490 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. These terms will be used interchangeably in this audit report when referring to an incarcerated person.</p> <p data-bbox="240 434 738 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 510 1414 739" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions Policy and Procedures (DAI) #410-05-05 Chapter 410 Prison Rape Elimination Act • The facility completed Staffing Plan • WIDOC PREA Director PREA Staffing Plan Annual Review Log • Division of Adult Institutions Policy and Procedures (DAI) #410.40.01 Unannounced Supervisory Rounds • Highlight samples of the facility supervisor's unannounced rounds logbook <p data-bbox="240 766 456 792"><u>Interviews conducted</u></p> <ul data-bbox="282 842 892 1003" style="list-style-type: none"> • Specialized interview with Warden • Specialized interview with the PREA Compliance Manager • Specialized interview with the PREA Director • Specialized interview with the facility supervisor • Random interviews with staff <p data-bbox="240 1039 1426 1128">(a) ED 72 requires, "Each facility shall develop, document and make its best efforts to comply with a staffing plan that provides for adequate levels of employees and, where applicable, video monitoring, to protect offenders against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall consider:</p> <ol data-bbox="240 1160 1315 1585" style="list-style-type: none"> 1. Generally accepted correctional practices; 2. Any judicial, federal investigative, and internal/external oversight agency findings of inadequacy; 3. The facility's physical plant including blind spots or areas where employees or offenders may be isolated; 4. The composition of the offender population; 5. The number and placement of security staff; 6. Institution programs occurring on a particular shift; 7. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and 8. Applicable State or local laws, regulations, standards, and other relevant factors. <p data-bbox="240 1621 1445 1711">DAI 410.50.05 supports ED 72 outlining the general guidelines each facility is required to follow. Additionally, the auditor reviewed the facility's most recent staffing plan report which was signed electronically by the Facility leadership which included the PCM and Agency PREA Director.</p> <ul data-bbox="282 1765 1481 1890" style="list-style-type: none"> • Superintendent and Warden pre onsite interview: The superintendent is responsible for completing and submitting the annual staffing plan report to PREA Director. Additionally, the Warden receives a copy and is notified if there are concerns with staffing. The facility has not requested any new positions through the legislative process since the last audit. <p data-bbox="240 1921 1490 1980">(b) ED 72 states "In circumstances where the staffing plan is not complied with, the facility shall document in written form and justify all deviations from the plan."</p> <p data-bbox="240 2011 1474 2069">(c) ED 72 requires, "Whenever necessary, but not less frequently than once each year each facility, in consultation with the PREA Director, shall assess, determine and document whether adjustments are needed to:</p> <ol data-bbox="240 2101 528 2128" style="list-style-type: none"> 1. The facility's staffing plan;

2. The facility's deployment of video monitoring systems and other monitoring technologies; and

3. The resources the facility has available to ensure adherence to the staffing plan

- **PREA Director pre onsite interview:** Facilities consult annually with the Agency PREA Director in the Spring to review staffing plan information. This information is assessed to determine if any adjustments are needed under provision (a) of this standard. The PREA Office maintains a tracking log to ensure all facilities are complying with this standard provision.

(d) ED 72 requires that "Supervisory staff shall conduct and document unannounced rounds, covering all shifts to identify and deter employee sexual abuse and sexual harassment. The DOC employees are prohibited from alerting other employees that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility."

DAI 410.40.01 outlines supervisor requirements and responsibilities supporting ED 72. This policy requires that supervisors conduct rounds at random times across all shifts and days of the week. Following the unannounced round, supervisors are required to document their name, the time, and the date of the round. Rounds are required to be documented using one of the following three methods:

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

The supervisor who conducts unannounced tours pre-onsite interview: This facility only has two supervisors who conduct unannounced tours, the Superintendent (PCM) and Captain. The Captain also conducts PREA investigations and was interviewed under this standard provision pre-onsite when interviewed as the investigator. The Captain conducts and documents random supervisor tours, it should be noted that his office is located in one of the offender wings. As such, he is constantly unannounced when leaving his office. To further fulfill this requirement, the Captain conducts after-hours unannounced visits.

On-site interviews: While conducting the physical plant review the audit team asked random staff and offenders if they observe supervisors touring the unit and the outside buildings.

On-site observations:

1. Reviewed shift log to verify supervisor was documenting unannounced tours on different days and times. The auditor noted documented entry of the supervisor conducted tour in the early hours before his regular shift.
2. During physical plant review the audit team identified the staff restroom vacant/occupied device when turned to "occupied" was a bolt lock. When asked how staff could access should this be locked, they did not know where the mechanism was to open. This could provide an area where staff and offenders could be isolated and placed into corrective action. The facility will need to ensure staff is aware the key is located to unlock the door in an emergent situation.

- Corrected: On April 28, 2022, the PCM sent an email notification to staff where the key is located. The Superintendent and Captain are to be notified when these keys are pulled and the purpose.

3. Health Services Office (HSU) had closed blinds on the window and office door window. This provided too much privacy and requires the ability to view the room. If the medical staff needs some level of privacy a modesty screen can be used.

- Corrected while on-site.

4. Physical plant review, the audit team identified areas where the facility would benefit from additional cameras being installed and referenced those locations below under findings.

Recommendations: Additional cameras for the following locations (recommendations do not impact compliance findings)

- Basement: Laundry, dry storage, maintenance/maintenance storage, boiler room, electrical room, water closet
- Outer buildings: Programming building, Woodshop, and three separate garage areas.

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

115.14	<p>Youthful inmates</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • WIDOC Agency Emergency Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA) - for purposes of this audit report, this policy will be referred to ED #72 • Agency movement memo date 12/19/2016 • Division of Adult Institutions (DAI) Policy and Procedure #302.00.20 <p>WIDOC has policies related to this standard Effective December 19, 2016, the Wisconsin Department of Corrections, Division of Adult Institutions moved all youthful inmates out of the adult institutions. Youthful inmates are now housed within Division of Juvenile Corrections (DJC) facilities.</p> <p>(a) (b) (c) ED 72 states, “Youthful inmates shall not be placed in a housing unit in which they have sight, sound or physical contact with any adult offender through use of a shared dayroom or other common space, shower area or sleeping quarters. In areas outside of housing units, DOC shall either: maintain sight and sound separation between youthful inmates and adult offenders or provide direct staff supervision when youthful inmates and adult offenders have sight, sound, or physical contact. Adult facilities shall make best efforts to avoid isolating youthful inmates to comply with this provision. Absent exigent circumstances, adult facilities shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible. Such exigent circumstances leading to the denial of large-muscle exercise, legally required education services and/or other programming shall be documented.”</p> <p>DAI #302.00.20 states, “The Division of Adult Institutions shall not house juveniles in adult correctional facilities. the placement of adjudicated juveniles or juveniles sentenced as adults.” The policy includes definitions and procedures which clearly state Adjudicated Juveniles who are less than 18 years of age shall not be admitted to a Division of Adult Institutions (DAI) facility or Wisconsin Resource Center (WRC).</p> <p>Conclusion: This auditor finds the facility meets compliance with this standard.</p>
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115.15	Limits to cross-gender viewing and searches
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 434 738 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 510 1414 770" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions (DAI) Policy and Procedures 500.70.24 Clinical Observation • Division of Adult Institutions (DAI) Policy and Procedures 306.17.02 Searches of Inmates • Division of Adult Institutions (DAI) Policy and Procedures 306.16.01 Use of Body Cameras • Division of Adult Institutions (DAI) Policy and Procedures 410.40.02 Opposite Gender Viewing and Announcing • Email reminder from Warden regarding cross-gender announcements • Agency Searches Lesson Plan <p data-bbox="240 801 456 828"><u>Interviews conducted</u></p> <ul data-bbox="282 878 592 936" style="list-style-type: none"> • Random staff interviews • Random offender interviews <p data-bbox="240 972 1461 1030">(a) ED 72 states “Facilities shall not permit cross-gender strip or body cavity searches except in exigent circumstances or when performed by medical practitioners.”</p> <p data-bbox="240 1066 1461 1191">DAI 306.17.02 states “Staff directly observing the inmate during a strip search shall be required to be the same sex as the inmate. A second staff shall only observe the staff performing the strip search” and “All body cavity searches and certain body content searches must be conducted by off-site health professionals.” In, accordance with this policy, DAI 306.16.01 address's the use of body-worn cameras (BWC) during a strip search or staff-assisted strip search.</p> <p data-bbox="240 1227 1461 1317">Additionally, DAI 306.17.02 prohibits cross-gender strip searches, except in exigent circumstances or when performed by medical practitioners. If a strip search is required for a non-compliant inmate, the staff member shall be the same gender as the inmate, except in exigent circumstances.</p> <ul data-bbox="282 1366 1461 1424" style="list-style-type: none"> • Onsite random staff interviews: All staff who were interviewed affirmed compliance with the agency policy and do not conduct cross-gender searches or cavity body searches. <p data-bbox="240 1460 1493 1518">(b) ED 72 states “Except in exigent circumstances, adult facilities shall not permit cross-gender pat-down searches of female offenders nor shall juvenile facilities permit cross-gender pat-down searches of either gender.”</p> <ul data-bbox="282 1568 1270 1594" style="list-style-type: none"> • This provision does not apply to this facility audit as the facility does not house female offenders. <p data-bbox="240 1630 1461 1688">(c) ED states “All cross-gender strip and body cavity searches, in addition to cross-gender pat-down searches of females, shall be documented.”</p> <p data-bbox="240 1724 1493 1912">(d) ED 72 states “In order to enable offenders to shower, perform bodily functions and change clothing without nonmedical employees of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks, employees of the opposite gender shall announce their presence when entering an offender housing unit. If opposite gender status quo changes during that shift then another announcement is required. Facilities shall not restrict access to regularly available programming or other out-of-cell or housing unit opportunities in order to comply with this provision.”</p> <p data-bbox="240 1944 464 1971"><u>Cross-gender viewing</u></p> <p data-bbox="240 2007 1493 2096">DAI policy 500.70.24 defines cross-gender constant observation as a constant observation that is conducted by a staff member with gender identity (male or female) that varies from inmate sex assigned at birth (or gender recognized by DOC, if different than the sex assigned at birth).</p> <p data-bbox="240 2132 1493 2159">The policy outlines the procedures when an inmate has been placed on constant observation status. “Cross gender constant</p>

observation may be conducted when privacy accommodations are provided for toileting, showering and changing clothing. Exceptions are allowed in exigent circumstances. Privacy accommodations may be accomplished through a variety of means, including but not limited to:

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

Cross-gender announcements

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

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

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

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

- **Random staff and random and specialized offender on-site interviews:** All staff and offenders selected for interview by the audit team affirmed the cross-gender "tone" is activated when female staff enters offender living areas. This includes the blue light being activated for offenders who may be hard of hearing or deaf. Offenders are not viewed in undress by opposite-gender staff when showering, dressing, or using the restroom.
- **On-site observation:** Staff activated the tone before the audit team enter the offender's living areas.

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

- **Random on-site interviews:** At the time of the on-site audit, this facility did not have any Transgender offenders, however, staff interviewed stated they would never search a Transgender or Intersex Offender for the sole purpose of determining the offender's genital status.

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

Random staff on-site interviews: At the time of the on-site audit, this facility did not have any Transgender offenders. All staff has received training on how to conduct pat searches of Transgender and Intersex Offenders. While conducting interviews with staff, they were asked to describe the "pat search". The process described was appropriate and professional using the back/blade of the hand around breasts and appropriate hand placement around genitals. The agency follows a "universal" style pat search where all staff is searched in the same manner which prevents any confusion if gender identity is

unknown by the searching staff member.

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

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

115.17	Hiring and promotion decisions
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 434 738 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 510 1453 869" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • WIDOC Agency Emergency Directive #41: Arrest and Conviction • Division of Adult Institutions (DAI) Policy and Procedures 309.06.03 Volunteers, Pastoral Visitors, Program Guests, and Interns • DAI 309.06.03 Volunteer Application • Agency Background Check Procedure • Background Check Authorization Form • Candidate Reference Check Form • Agency Fingerprint Procedures • Agency Human Resources Policy - Reference Checks <p data-bbox="240 904 475 931">Interviews conducted</p> <ul data-bbox="282 981 1082 1043" style="list-style-type: none"> • Specialized interview with Human Resources Administrator • Interview with Program Services Administrator for Contractors and Volunteers <p data-bbox="240 1079 1493 1232">(a) (b) ED 72 Hiring and Promotion Decisions states, "The DOC shall not hire or promote anyone who has engaged in sexual abuse in a confinement facility; has been convicted of engaging or attempting to engage in non-consensual sexual activity in the community; or has been civilly or administratively adjudicated to have engaged in activity described above. The DOC shall consider any incidents of sexual harassment when determining whether to hire, promote or enlist the services of any employee."</p> <p data-bbox="240 1267 1493 1456">(c) (d) (h)ED 72 states, "Prior to hiring new staff members and enlisting the services of any employee who may have contact with offenders, the DOC shall perform a criminal background records check" and "The DOC shall make its best effort to obtain (and, when requested, provide) reference information from all prior institutional employers on substantiated allegations of sexual abuse or sexual harassment or any resignation during a pending investigation of a sexual abuse allegation." ." In accordance with ED 72, the agency's Human Resources background check procedure outlines the process HR staff follow when conducting background checks.</p> <p data-bbox="240 1491 1493 1581">(d) DAI 309.06.03 requires the agency to conduct criminal background checks for all volunteers. The policy additionally requires a new background check if the prior review was completed more than one year ago. Any volunteers who have been inactive at all facilities for more than one year shall reapply as new volunteers.</p> <ul data-bbox="282 1635 1430 1697" style="list-style-type: none"> • Pre onsite: PREA audit team was required to complete the agency 1098D background check as a contractor in compliance with the standard provision. <p data-bbox="240 1724 1437 1751">(e) ED 72 states, "The DOC shall conduct a criminal background records check every five years for current employees."</p> <p data-bbox="240 1787 1469 1850">(f) (g) ED 72 page five requires all applicants to disclose instances of sexual misconduct and applicants who fail to disclose such information shall be ineligible for hire for the current vacancy and, if applicable, may be grounds for termination.</p> <p data-bbox="240 1886 579 1912"><u>Pre onsite specialized interviews:</u></p> <p data-bbox="240 1939 1493 2157">Correctional Center Human Resources (HR) Director: The HR Director oversees employee hiring and background checks for staff assigned to the fourteen Correctional Centers around the state. The HR Director is located in Madison (headquarters building) and all employee files are maintained at this location. The agency conducts criminal background checks utilizing Portal 100 and FBI LiveScan fingerprints and all new hires and staff selected for promotion are required to complete the background check form which includes questions referenced above in provisions (a) and (b) of this standard. HR employee services specialists will conduct five-year background checks for all employees which are also documented in their HR database.</p>

Facility Victims Coordinator: This position is also responsible for conducting background checks for volunteers and contractors. Staff follow the same background check process using portals 100 and review the State of Wisconsin Court history. Contractors complete and sign the background release form which includes those outlined above in provisions (a) (b). A background check is completed again every two years for volunteers and contractors.

Pre and Post onsite document review: This auditor selected a random sampling of names from the staff roster provided to review HR proof of practice. The auditor was provided with screenshots of the database along with documentation for two staff promoted during this audit time frame. The auditor was also provided with background documentation for a contract employee who worked as an intern for a few months during this audit time frame.

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

115.18	Upgrades to facilities and technologies
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1460 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 508 1358 568" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. <p data-bbox="242 598 458 627"><u>Interviews conducted</u></p> <ul data-bbox="282 676 842 739" style="list-style-type: none"> • Specialized interview with Assistant Deputy Secretary • Specialized interview with the Warden <p data-bbox="242 768 1477 862">(a) ED 72 states, "When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the DOC shall consider the effect of the design, acquisition, expansion or modification upon the DOC's ability to protect offenders from sexual abuse."</p> <p data-bbox="242 891 1482 985">(b) ED 72 states, "When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the DOC shall consider how such technology may enhance the DOC's ability to protect offenders from sexual abuse."</p> <p data-bbox="242 1014 1489 1211">Pre onsite interviews: The Deputy Assistant Secretary stated this facility has not had any substantial plant modifications. Should a facility be approved for modifications they ensure to follow correctional practices including those outlined in the PREA standards. They will consider staffing, blind spots, and areas video surveillance would be installed. Interviewing the Warden, she stated that the superintendent would be the primary contact to oversee new modifications and the installation of cameras at the facility. This was supported while having conversations with and interviewing the superintendent as the PREA Compliance Manager.</p> <p data-bbox="242 1240 1460 1335">On-site observations: The facility did not have any areas that had been renovated, modified, or expanded. The facility installed some new video surveillance after the last PREA Audit. During the physical plant review, the audit team identified cameras and viewed the supervisor's video monitors to include requesting they pull up specific locations.</p> <p data-bbox="242 1364 1042 1393">Conclusion: The auditor finds the facility meets compliance with this standard.</p>

115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 434 743 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 510 1358 672" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency Law Enforcement Compliance Request • Agency Victim Services Coordinator Response Checklist (DOC-2767) • Excerpt from the Agency Healthcare Manual Reference <p data-bbox="240 698 456 725"><u>Interviews conducted</u></p> <ul data-bbox="282 779 1094 972" style="list-style-type: none"> • Specialized interview with PREA Compliance Manager • Interview with random staff • Specialized Sexual Assault Nurse Examiner (Gunderson Health) • Specialized interview with a community victim advocate (Bolton Refuge House) • Specialized interview with facility investigator • Facility Victim Coordinator <p data-bbox="240 1003 1461 1061">The Agency does not conduct Criminal Investigations and will contact local Law Enforcement when an allegation of sexual abuse has been reported. The agency and/or facility investigator will conduct the administrative investigation.</p> <p data-bbox="240 1093 1461 1218">(a) (b) ED #72 states “The DOC shall follow a uniform evidence protocol that maximizes the potential for preserving and/or collecting usable physical evidence for administrative proceedings and criminal prosecutions. Such protocol shall be developmentally appropriate for youth, where applicable, and adapted from a comprehensive and authoritative protocol developed after 2011.”</p> <p data-bbox="240 1249 1477 1442">(c) ED #72 states, “The DOC’s medical response shall include the timely dissemination of information and access to emergency contraception and sexually transmitted infections prophylaxis [§115.82(c), §115.382(c)]. Further, all victims shall be offered access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Nurse Examiners (SANEs) where possible. If SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The facility shall document its efforts to provide SANEs</p> <p data-bbox="240 1473 1477 1666">(d) (e) (h) ED #72 states the facility shall attempt to make available to the victim an advocate from a local sexual assault service provider to accompany and support the victim through the forensic medical examination process and investigatory interviews. As requested by the victim, such a person shall also provide emotional support, crisis intervention, information, and referrals. If a sexual assault service provider is not available to provide victim advocate services, the DOC shall make available a member who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues.</p> <p data-bbox="240 1697 1362 1756">(f) When the DOC is not responsible for investigating allegations of sexual abuse, the DOC shall request that the investigating law enforcement agency follow the requirements outlined in §115.21(a-e)</p> <p data-bbox="240 1787 1477 1980">Pre on-site: Reviewing ED #72 the appointing authority or designee at each facility shall assign the facility-based Victim Services Coordinator. The staff member who is designated with this responsibility will assist in connecting victims of sexual abuse in confinement to outside support services. This staff member is not responsible for acting in the capacity of a victim advocate. The auditor interviewed the facility Victim Coordinator who described the process she follows after a report of sexual abuse is received and will meet with the victim to provide victim advocate information and services they provide. As requested they will coordinate meetings between the victim-offender and victim advocate.</p> <p data-bbox="240 2011 1485 2136">Sexual Assault Nurse Examiner (SANE): The auditor contracted Black River Memorial Hospital and was referred to Gunderson Health in La Cross. The lead auditor contacted Gunderson Health and spoke to the Charge Nurse in the Emergency Room. The hospital has ten certified Sexual Assault Nurse Examiners who are available to conduct sexual assault forensic exams. As requested by the victim, a victim advocate from Bolton Refuge House will respond to support the</p>

victim during the exam. In the event, that Gunderson Health Emergency Room does not have a SANE on duty or available they would send the victim to Mayo La Cross or O'Claire Hospital.

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

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

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

At the time of this audit, this facility has not received any sexual abuse allegations going back to the last audit.

On-site:

Random staff: Audit team conducted random interviews with selected facility staff. The staff was aware of how to secure a crime scene and the procedures to preserve physical evidence. Local law enforcement is contacted to process the crime scene.

Offender victims of sexual abuse: At the time of this audit the facility did not have any reported incidents of sexual abuse. They had one offender who reported sexual abuse that occurred at another facility, however, the incident did not require a SAFE.

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

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72.
- Division of Adult Institutions (DAI) Policy and Procedures 303.00.05 Law Enforcement referrals
- Division of Adult Institutions (DAI) Policy and Procedures 306.00.15 Inmate Investigations (restricted)
- WI Department of Corrections Human Resources Policy 200.30.304
- Screenshot of the agency website

Interviews conducted

- Specialized interview with the Assistant Deputy Secretary
- Specialized interview with Facility investigator
- Interview with the PREA Director

(a) (d) ED 72 states, "The DOC shall ensure that an investigation is completed for all allegations of sexual abuse and sexual harassment, including those received from third parties and anonymous sources. DOC shall maintain a policy(ies) that governs the conduct of such investigation."

(b) (c) ED 72 requires all allegations of sexual abuse or sexual harassment that involve potentially criminal behavior shall be referred for investigation to local law enforcement. All referrals to law enforcement shall be documented. The policy describing such referrals, in addition to the investigative responsibilities of the DOC and local law enforcement, shall be published and maintained on the DOC's website." In accordance with provision (b) and ED 72, DAI 306.00.15 and policy 200.030.304 requires all reports of sexual abuse and sexual harassment that may involve criminal behavior to be reported to law enforcement by the PCM or designee.

- On March 25, 2022, this auditor reviewed and verified the agency's public website DOC Prison Rape Elimination Act (wi.gov) includes ED 72 for public view.

(d) In accordance with ED 72 the agency has policies governing the conduct of these investigations. DAI 303.00.05 under LE referrals requires the Warden or designee to refer allegations of sexual abuse or sexual harassment as defined in ED 72 that involve criminal behavior (WI Sexual Assault Statute 940.025)

Pre onsite:

Assistant Deputy Secretary: All allegations of sexual abuse and sexual harassment will be investigated and procedures have been implemented to ensure investigations are prompt.

The Agency and Facility Investigator: On a case-by-case basis offender on offender sexual abuse administrative investigation will be assigned to the facility investigator. Criminal investigations are conducted by local law enforcement who will provide the agency with the criminal investigation case number to follow up on the status of the investigation.

PREA Director: The agency policy requires all allegations of sexual abuse or sexual harassment are referred to local law enforcement if the allegation involves potential criminal behavior. The agency administrative investigator is responsible for conducting the administrative investigation.

*At the time of this audit, this facility has not received any sexual abuse allegations going back to the last audit.

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

115.31	Employee training
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency Training Pre-Service Curriculum • Agency Training Module All-Staff (screenshot) • Agency Training Module (refresher 2017, 2019, 2021) • Agency Newsletter for years employees do not receive staff fresher • WCCS Staff Orientation Checklist • Agency DOC form 1558 Employment Statement to Acknowledgment • PREA Facility Staff Training Report • Electronic verification of training <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Random staff interviews <p>(a-d)) ED 72 states "The DOC shall train all new staff members on the department's zero-tolerance policy for sexual abuse and sexual harassment. All staff members shall receive training every two years; in years in which a staff member does not receive such refresher training, the DOC shall provide refresher information on current sexual abuse and sexual harassment policies. The training shall include, but is not limited to the subparts listed below. Each staff member shall acknowledge and certify to the DOC, through signature or electronic verification, that they understand the training they received."</p> <ol style="list-style-type: none"> a. The DOC's zero-tolerance policy for sexual abuse and sexual harassment; b. How to fulfill staff responsibilities under the DOC sexual abuse and sexual harassment prevention, detection, reporting, and response policies, and procedures; c. Offenders' right to be free from sexual abuse and sexual harassment; d. The right of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment; e. The dynamics of sexual abuse and sexual harassment in confinement; f. The common reactions of sexual abuse and sexual harassment victims; g. How to detect and respond to signs of threatened and actual sexual abuse; h. How to avoid inappropriate relationships with offenders; i. How to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming offenders; j. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; k. Relevant laws regarding the applicable age of consent; l. Instruction tailored to male and female offenders; and m. Instruction specific to the unique needs and attributes of juvenile <p>In years employees do not receive refresher training the agency newsletters include a PREA Page. The newsletters cover multiple topics from updated policy and procedures, quick links to resources, and guides that provide updates to staff on policy and procedure revisions, statistics on reporting incidents, investigations, the progress of National PREA audits, etc.</p> <p>Pre onsite: In conjunction with standard 115.17, this auditor selected a random sampling of staff from the roster provided.</p>	

The auditor reviewed the training curricula and the computer-based training report which included the date staff completed training. While reviewing the facility training report the auditor identified the part-time mental health staff was not listed on the report provided. On 3/27/22 an email was sent to the PREA Director and PCM for documentation that they had completed training.

Onsite interviews: Audit team conducted interviews with selected random security and non-security staff. Staff affirmed they have received and understood the PREA training provided. In conjunction with standard 115.15 (f), the security staff was asked to describe pat searches of Transgender and Intersex offenders. Additionally, the audit team asked how staff communicate with all offenders with staff responding they use gender-neutral terms referring to offenders by their last name.

Post onsite: On May 5, 2022, the PREA Director informed the auditor the behavioral health employee retired in April 2022 and was unable to provide the electronic verification of proof of training

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

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 432 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 510 1358 869" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institution (DAI) 309.06.03 Volunteers, Pastoral Visitors, Program Guests, and Interns • Agency Volunteer Orientation • A Guide for Volunteers and Contractors Brochure • DAI Volunteer, Pastoral Visitor, Program Guest & Intern Orientation • Agency Contractor & Volunteer Training • Volunteer Manual • Agency Contractor Acknowledgment • Screenshot of agency documentation process • Agency DOC 2809 form – Volunteer Orientation Roster Attendance Record <p data-bbox="240 902 456 929"><u>Interviews conducted</u></p> <ul data-bbox="284 981 531 1008" style="list-style-type: none"> • Specialized contractor <p data-bbox="240 1041 1489 1227">(a) ED 72 states, “All volunteers and contractors who have contact with offenders shall be trained, in accordance with the type of service and level of contact they have with offenders, on the DOC’s zero-tolerance policy as it relates to sexual abuse and sexual harassment. They shall, additionally, be trained on their responsibilities under the DOC’s sexual abuse and sexual harassment prevention, detection and response policies and procedures. Each volunteer or contractor shall acknowledge and certify to the DOC, through signature or electronic verification, that they understand the training they received.” In accordance with ED 72, DAI 309.06.03 further outlines volunteer and contractor training procedures.</p> <p data-bbox="240 1261 1445 1321">(b) DAI 309.06.03 states, “Volunteers are required to complete an orientation prior to facility entry and inmate interaction, based upon type, frequency, and level of inmate contact. The following are minimum expectations for all DAI volunteers:</p> <ol data-bbox="240 1355 1466 1765" style="list-style-type: none"> 1. Full orientation shall be required for any volunteer entering any DAI facility (one or any combination of sites) five or more times per year. 2. Brief orientation shall be required for any volunteer entering any facility four or fewer times per year. 3. Persons changing status to increase facility entry to five or more times per year shall be required to complete the full orientation. 4. Warden/designee may: <ul data-bbox="284 1675 900 1765" style="list-style-type: none"> • Require full orientation on a case-by-case basis at any time • Limit volunteer one-to-one contact with inmates • Provide direct/line-of-sight staff supervision <p data-bbox="240 1798 1466 1888">(c) DAI 309.06.03 requires volunteers to sign DOC2809 to verify attendance for all brief and full orientations and annual orientation updates. Facilities are required to maintain a copy of the acknowledgment form and sent the original paper form to the facility PREA Compliance Manager.</p> <p data-bbox="240 1921 1445 2078">Pre onsite: The auditor interviewed the part-time contract medical employee who stated that he completed the PREA training and was able to describe training to include the first responder duties related to standard 115.35 (specialized training). While reviewing the facility training roster the auditor identified the part-time medical contract employee was not included on the roster. On 3/27/22 an email was sent to the PREA Director and PCM requesting proof of training documentation.</p> <p data-bbox="240 2112 1477 2139">On-site review: The facility did not have any volunteers or contract staff other than the contract medical employee who was</p>

interviewed before the onsite review in conjunction with standard 115.35.

Post onsite document review: On May 5, 2022, the lead auditor received electronic verification documentation supporting the contract Medical employee completed the 2021 PREA refresher.

Conclusion: The audit finds the facility meets compliance with this standard

115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions (DAI) 410.20.01 Inmate PREA Education • Agency Offender Education Video Reference • Offender ID Card (PREA) reporting options on the back • Agency Offender PREA Education Facilitator Guide • Agency Offender Handbook (English & Spanish) • Agency Handbook Addendum • Inmate Education Directive from the agency PREA Director • Reviewed offender education/orientation documentation <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized staff interview • Random and specialized offender interviews <p>(a) ED 72 states “At intake, offenders shall receive information detailing the DOC’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents or suspicions.” In accordance with ED 72, DAI 410.20.01 procedure outlines general intake guidelines for ensuring inmates receive PREA education during intake explaining the agency’s “zero tolerance” policy regarding sexual abuse and sexual harassment, including retaliation reporting, methods to make a report, and the agency response.</p> <p>DAI 410.20.01 requires that at the intake facility, inmates shall acknowledge they received POC-0041 and A Resource for Inmates, POC-0041B Sexual Abuse in Confinement , and comprehensive education by signing the Acknowledgement of PREA Education offender standard form in WICS using an electronic signature pad.</p> <ul style="list-style-type: none"> • POC-0041 – Sexual Abuse and Sexual Harassment Prevention and Intervention: A Resource for Inmates • POC-0041B – Sexual Abuse in Confinement <p>This auditor reviewed the Agency Inmate Handbook which included and was not limited to:</p> <ol style="list-style-type: none"> 1. The agency’s “zero tolerance” policy, 2. methods and how to report, 3. definitions of sexual abuse, sexual harassment, retaliation, confidentiality, consent, 4. tools to help keep safe (prevention) 5. protection, support, and recovery for victims of sexual abuse 6. investigatory process after a reporting sexual abuse 7. In addition to the offender handbook, the PREA reporting options are printed on the back of the offender ID card. <p>(b) ED 72 states “Within 30 days of intake at adult facilities and within 10 days at juvenile facilities, the facility shall provide a comprehensive education to offenders either in person or through video regarding:</p> <ol style="list-style-type: none"> 1. The DOC’s zero-tolerance policy, including offenders’ right to be free of sexual abuse, sexual harassment and disclosure-related retaliation; and 2. The DOC’s policies and procedures for responding to such incidents. <p>In accordance with ED 72, DAI 410.20.01 general transfer guidelines states, upon transfer to a facility, each inmate shall receive POC-0041 if they state they do not already have a copy and POC-0041B complete with local sexual assault service provider contact information. Within 30 days of a transfer, each inmate shall be provided comprehensive PREA education, which includes, at minimum, a staff facilitated discussion of:</p>

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

(c) ED 72 states "Upon transfer to another facility, offenders shall receive education specific to the facility's sexual abuse, sexual harassment and report-related retaliation policies and procedures to the extent they differ from the previous facility." WIDOC began implementing PREA in 2015 and completed PREA inmate education to all inmates who were currently incarcerated and began providing inmate PREA education to all inmates during the intake process.

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

1. POC-0041 Audio recording (obtain from PREA Office)
2. POC-0041 Braille translation (obtain from PREA Office)
3. POC-0041S, POC-0041BS Spanish translation.
4. Spanish and subtitled versions of the PREA education video
5. Special education teacher or similar to facilitate education

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

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

- **On-site:** The audit team reviewed offender file information on-site and verified offenders' signed acknowledgment forms for education received.

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

Onsite: The audit team observed PREA posters throughout the facility and offenders stated information is on their ID cards. Additionally, the audit team watched the PREA video that offenders watch when they arrive. The video is in English, Spanish, and closed-captioned.

Random and specialized offender interviews: The audit team conducted random and specialized interviews with offenders. The majority of the offenders stated that they receive PREA information upon arrival and watched the PREA video and understood the information provided. Additionally, the lead auditor conducted an interview with an offender who was limited English proficient using the translation line. During the interview, the offender affirmed the facility provided the education video in Spanish and used the translation line when conducting risk screening questions in accordance with standard 115.41.

Interview with staff who conduct offender education: Audit support staff conducting interviews with the staff who complete the offender education when they arrive at the facility who described the process. The audit support staff completed a file review of the offenders selected for an interview and affirmed they signed the education forms

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

115.34	Specialized training: Investigations
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 738 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1358 568" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. <p data-bbox="242 600 459 629"><u>Interviews conducted</u></p> <ul data-bbox="284 678 710 707" style="list-style-type: none"> • Specialized facility investigator interview <p data-bbox="242 734 1490 862">(a - d) ED 72 states "Staff who investigate incidents of sexual abuse and sexual harassment shall receive specialized training on techniques for interviewing sexual abuse victims, proper use of Miranda, Garrity, and Oddsen warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral. The DOC shall maintain documentation of training completion</p> <p data-bbox="242 893 1477 1021">Document review: The lead auditor reviewed the agency investigator training directory. All staff who conduct sexual abuse and sexual harassment investigations are required to attend specialized training on how to investigate reports of sexual abuse and sexual harassment in confinement. The auditor verified facility and agency staff responsible for conducting investigations are listed in the directory.</p> <p data-bbox="242 1052 1102 1081">Pre onsite interviews: These interviews intertwine with standards 115.71 and 115.72.</p> <p data-bbox="242 1113 1485 1503">Agency administrative investigator and facility investigator: The auditor conducted specialized investigator interviews with the Agency Administrative Investigator and facility investigator before the on-site review. During the interviews, both stated they had completed the specialized investigator training in addition to the staff PREA in-service refresher training. The auditor asked them to describe the training received and how they applied the training when conducting an investigation. Generally, when an incident is reported the investigations are assigned within a day and could be assigned on the same day depending on the time and day of the report. The investigators were able to provide knowledge and understanding of the investigatory process with both stating they are fact finders and the final resolution is determined by the appointing authority and sent to the PREA Office. Should the PREA Office identify some elements that have not satisfied the investigatory process, the case is sent back for corrections. Both investigators understand Miranda warnings, however local law enforcement would give Miranda Warnings for investigations meeting a criminal element. The agency and facility investigator receive training on the WI Oddsen Warning which is the State of Wisconsin law similar to Garrity Warnings. The investigators were able to define Substantiated, Unsubstantiated and Unfounded.</p> <p data-bbox="242 1534 1139 1563">Conclusion: The auditor finds the facility and agency meet compliance with this standard</p>

115.35	Specialized training: Medical and mental health care
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1410 636" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive (ED) #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). • Agency Healthcare Module (screenshots) • Electronic verification of training <p data-bbox="242 667 456 696"><u>Interviews conducted</u></p> <ul data-bbox="284 745 847 806" style="list-style-type: none"> • Specialized interview with Contract Medical Employee • Specialized interview with Behavioral Health Staff <p data-bbox="242 835 1490 896">a) ED 72 states, "All medical and mental health care practitioners who work regularly in a DOC facility(ies) shall be trained on the subparts below.</p> <ul data-bbox="284 947 1265 1075" style="list-style-type: none"> • How to detect and assess signs of sexual abuse and sexual harassment • How to preserve physical evidence of sexual abuse • How to respond effectively and professionally to victims of sexual abuse and sexual harassment • How and to whom to report allegations or suspicions of sexual abuse and sexual harassment <p data-bbox="242 1104 1251 1133">(b) This provision is not applicable. All sexual abuse victims are transported to a community hospital</p> <p data-bbox="242 1162 1208 1191">(c-d) Ed 72 states "The DOC shall maintain documentation that such training has been received.</p> <p data-bbox="242 1220 1430 1312">Pre-onsite medical and behavioral health staff interviews: Both the contract medical employee and the part-time Behavioral Health staff affirmed they had completed PREA training and additional specialized training. They described training received and action they would take if they received a report and/or responded to an incident of sexual abuse.</p> <p data-bbox="242 1344 1490 1538">Pre-onsite document review: The auditor reviewed the screenshots of the agency's computer-based specialized training for healthcare staff and the facility training roster. The computer-based training objectives addressed the following areas: First Responder, Initial Assessment, Reporting, Preserve Evidence, Provider Care, and Response. Upon completion of the course, the staff is required to take a quiz with a passing score of 80%. While reviewing the facility training roster the auditor identified the part-time mental health staff and contract medical staff were not included. On 3/27/22 an email was sent to PREA Director and PCM for documentation they had completed training.</p> <p data-bbox="242 1568 1490 1695">Post onsite: On May 5, 2022, the lead auditor received documentation supporting the contract Medical employee completed the 2021 PREA refresher and PREA training for healthcare staff. While the behavioral health staff stated they completed training during the pre onsite interview, the PREA Director informed the auditor the behavioral health employee retired in April 2022 and was unable to provide the electronic verification of proof of training.</p> <p data-bbox="242 1724 1035 1753">Conclusion: The auditor finds the facility meets compliance with this standard.</p>

115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions (DAI) Policy and Procedures 410.30.01 (PREA) Screening for Risk of Sexual Abusivcness and Sexual Victimization. • Agency Risk Screening Directive (3/2016) • Agency Wisconsin Integrated Corrections System (WICS) User Guides • DOC-2781B PREA Screening Tool – Adult Male Facility • Onsite review of offender information <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized staff interviews • Random and Specialized Offender interviews • Interview with the PREA Director <p>(a – e) ED 72 states “Offenders shall be assessed during an initial screening within 72 hours of arrival at the facility, and again upon transfer to another facility, for risk of being sexually abused by other offenders or sexually abusive towards other offenders. The objective screening instrument shall include, at minimum, the following criteria:</p> <ol style="list-style-type: none"> 1. The presence of a mental, physical or developmental disability; 2. Level of emotional and cognitive development (juveniles facilities only) 3. Age; 4. Physical build; 5. Previous incarcerations; 6. Exclusively nonviolent criminal history; 7. Prior convictions for sex offenses against an adult or child; 8. Is, or is perceived to be, gay, lesbian, bisexual, transgender, intersex or gender nonconforming; 9. Previously experienced sexual victimization; 10. Prior acts of sexual abuse, prior convictions for violent offenses and/or history of prior institutional violence or sexual abuse; and 11. Offender’s perception of vulnerability <p>The agency policy includes risk screening factors for juvenile settings as referenced above(#2). This risk factor is not applicable for this facility audit as it is an adult confinement facility.</p> <p>In accordance with ED 72, DAI 410.30.01 outlines definitions, forms, and procedures for conducting the risk screening process. Auditor reviewed DOC-2781-B risk and the WICS user guides (confidential), which provide step-by-step instructions for staff who conduct inmate PREA risk screening assessments.</p> <ul style="list-style-type: none"> • Pre-on-site: Auditor reviewed the facility PREA admission list for the 12-month audit timeframe. The facility has completed the transfer intake risk screening assessments within the 72-hour time frame. <p>(f) ED 72 states “In addition to the initial screening, within 30 days of arrival, the facility shall reassess the offender’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the initial screening.”</p> <ul style="list-style-type: none"> • Pre-on-site: Auditor reviewed the facility PREA admission list for the 12-month audit timeframe. The facility has completed the follow-up risk screening assessments within the required 30-day time frame. <p>(g) ED 72 requires an offender’s risk level to be reassessed when warranted due to a referral, request, incident of sexual</p>

abuse or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness." In accordance with ED 72, DAI 410.30.01 page 4. Screening (c) outlines requirements for when an inmate will be reassessed and referred for a follow-up rescreening based on new information.

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

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

Pre-onsite: PREA Director and PCM Interviews were completed virtually with both stating that facilities designate which staff are able to view risk screening information and approval is based upon their scope of work. At the initiation of the risk screening process, there is a warning on the sensitive information, confidentiality, and actions that will be taken if there is a breach/release of information. The Agency PREA Director has the authority to review all staff authorized to use WICS and remove access if necessary.

Onsite interviews and observations: Audit support staff conducted a specialized interview with the staff who conduct 72-hour intake and 30-day follow-up risk screening assessments and random and specialized offender interviews. While onsite the facility did not have any offenders requiring a risk screening assessment for the audit team to observe the process. The audit support staff sat with the staff member to describe the process and walk thru the steps as if they were an offender. The staff member also described the what actions are taken should an offender report any history of sexual victimization and the offer for mental health services.

Offender Interviews: The majority of the offenders selected to be interviewed stated they were asked the "PREA" questions when they arrived. However, offenders stated that they had not been asked risk screening questions again during the 30-day follow-up for an affirmative response. This was discussed as a non-compliance issue for provision (f) of this standard and a requirement for staff to ask questions again for an affirmative response. They stated they were not aware and this could be an issue at other facilities. This was a short-term correction item that required notification and direction to staff to ask questions again going forward.

Additionally, the lead auditor interviewed a Spanish-speaking offender using the translation line and affirmed the facility utilized the translation when completing the intake risk screening questions.

Post onsite: After returning from the on-site review, the auditor referred back to the WICS User Guide (section D) for staff conducting the 30-day follow-up related to provision (f), which notated "A response to each question is mandatory." The facility took action by providing verbal and written direction to the employee conducting risk assessment screenings. On April 28, 2022, the auditor was provided with a copy of the email to the staff member that included the requirement to ask risk screening questions again when completing the 30-day follow-up.

Conclusion: Based on the available evidence the action taken related to provision (f) the auditor finds the facility meets compliance with this standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 432 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 510 1401 972" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions (DAI) Policy and Procedures (PREA) 410.30.01 Screening for Risk of Sexual Abusivcness and Sexual Victimization. • Division of Adult Institutions (DAI) 306.00.72 (Security) Screening for Risk of Sexual Abusivcness and Sexual Victimization. • Division of Adult Institutions (DAI) 306.00.23 (Security) (Restricted) Special Placement Needs of Inmates • Division of Adult Institution (DAI) 500.70.27 Transgender Management and Care (4/4/22) • Division of Adult Institutions (DAI) policy and procedures 325.00.04 Temporary Release Under Supervision • Agency Risk Screening Directive (3/2016) • Agency Wisconsin Integrated Corrections System (WICS) User Guide • DOC-2781B PREA Screening Tool – Adult Male Facility • DOC-2570 Inmate Offsite Review • Revised Agency Inmate Classification Report and Process <p data-bbox="240 1003 456 1030"><u>Interviews conducted</u></p> <ul data-bbox="284 1081 890 1173" style="list-style-type: none"> • Specialized interview with the Assistant Deputy Secretary • Specialized interview with the PREA Compliance Manager • Specialized interview with staff <p data-bbox="240 1205 1493 1364">(a) ED 72 states “Information obtained from the initial or follow-up screening shall inform housing, bed, work, education and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. For the purposes of education, programming, work, and recreation activities, line-of-sight monitoring by DOC staff is sufficient to maintain separation.” Auditor reviewed DOC-2781-B, and the WICS user guide (confidential), which provides step-by-step instructions for staff who conduct inmate PREA risk screening assessments.</p> <p data-bbox="240 1395 1493 1722">In accordance with ED 72, DAI 410.30.01 and DAI 306.00.72 outline the use of screening information. In making housing and bed assignments, there is the expectation to keep inmates who score as a high risk of being sexually victimized separate from those scoring as a high risk of being sexually abusive. Depending on the type of housing unit those placed in a dormitory setting who are at risk of victimization or risk of abusiveness, and who cannot otherwise be separated by housing unit, shall be bunked at opposite sides of the dormitory. Those at risk of victimization shall be bunked in areas more likely to receive additional staff supervision. For work, education, and program assignments, the expectation is to supervise or separate inmates who score as a high risk of being sexually victimized from those scoring as a high risk of being sexually abused. DAI 325.00.04 requires the Warden/Superintendent/Designee to screen inmates to determine whether they are appropriate for consideration as authorized operators of State-owned vehicles. The policy outlines the minimum considerations.</p> <p data-bbox="240 1753 1477 1814">(b) ED 72 states “Individualized placement determinations shall be made for each offender.” In accordance with ED 72, DAI 410.30.01 requires facilities to ensure individualized determinations are made for each inmate.</p> <p data-bbox="240 1845 1493 1973">(c) ED 72 states “When making facility, cell/unit housing and programmatic assignments for transgender or intersex offenders the DOC shall consider on a case-by-case basis whether a placement would ensure the offender’s health and safety and whether the placement would present management or security problems.” In accordance with ED 72, DAI 500.70.27 was revised effective April 4, 2022, and outlines procedures for completing case-by-case reviews.</p> <p data-bbox="240 2004 1050 2031">DAI 500.70.27 defines and outlines procedures that include but are not limited to:</p> <ul data-bbox="284 2083 890 2143" style="list-style-type: none"> • Accommodations for Transgender and Intersex Offenders, • approved sites (facilities)

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

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

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

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

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

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

Facility PCM: The PCM stated they have not had any transgender or intersex offenders housed at their facility within this audit time frame and he could not recall the last time a transgender offender was transferred to their facility. The PCM is aware they are responsible for meeting with transgender offenders every six months and would ensure they are provided with the opportunity to shower privately and coordinate a shower plan as necessary. The facility does not house gay, bisexual, transgender, or intersex offenders in dedicated wings nor do they have any consent decrees or legal judgments. The PCM is aware of the policy and procedures when a Transgender Offender requests to be housed in a facility they identify and would be completed by the Transgender Committee in Madison.

On-site interviews and observations:

Staff who completed risk screening assessments: This interview intertwines with and is a continuation of standard 115.41. The staff member who conducts the risk screening assessments will not house offenders who are assessed as a high risk of victimization (ROV) with those assessed as high risk of aggressiveness (ROA). The staff member stated they have not received a transgender or intersex offender and have not completed a six-month assessment review.

During the on-site review, this facility did not have any gay, bisexual, or transgender offenders assigned. During the physical plant review and offender interviews, the audit team did not perceive any offenders as gay, bisexual, gender non-conforming, or Transgender.

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

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

115.51	Inmate reporting
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1358 636" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency Inmate Handbook in English and Spanish • Agency PREA Poster (English and Spanish) – Reporting options <p data-bbox="242 667 456 696"><u>Interviews conducted</u></p> <ul data-bbox="284 745 892 804" style="list-style-type: none"> • Specialized interview with the PREA Compliance Manager • Random interviews with staff and offenders <p data-bbox="242 835 1490 1095">(a) (b) ED 72 states “The DOC shall provide multiple ways for offenders to privately report sexual abuse and sexual harassment, retaliation by other offenders or employees for reporting sexual abuse and sexual harassment, and employee neglect or violation of responsibilities that may have contributed to such incidents. In addition, the DOC shall provide at least one way for offenders to report sexual abuse and sexual harassment to a public or private entity that is not part of the DOC.” In accordance with ED 72, offenders are provided with the inmate handbook as referenced in standard 115.33 which includes reporting options. Offender posters include the option to report outside of WI DOC and do not require the offender to use their unique ID number. This phone option connects the Offender to Capital Police who will provide the report to the Agency PREA Office.</p> <ul data-bbox="284 1149 1054 1178" style="list-style-type: none"> • The agency does not detain offenders solely for civil immigration purposes. <p data-bbox="242 1205 1452 1263">(c) ED 72 states “Employees shall accept reports made verbally, in writing, anonymously, and from third parties; promptly document any verbal reports.”</p> <p data-bbox="242 1294 1490 1391">(d) ED 72 states “The DOC shall provide a method for employees to privately report sexual abuse and sexual harassment of an offender.” Auditor reviewed staff training (115.31) which allows for staff to report privately to the PREA Office, and local law enforcement or submit reports electronically via the DOC’s internet site.</p> <p data-bbox="242 1420 1490 1478">Pre onsite PCM interview: The PCM stated that offenders can report to an outside agency using the offender’s phone. The facility follows the agency policy and procedures and offenders are able to report using multiple options.</p> <p data-bbox="242 1509 1490 1637">Onsite interviews: Random staff and random and specialized offender interviews were conducted. Staff and offenders were able to provide different ways offenders and staff could report sexual abuse, sexual harassment, and retaliation. Most of the offenders stated they felt comfortable with the staff and would report to them and understood there were multiple options including the PREA hotline that can be dialed from the offender’s phone.</p> <p data-bbox="242 1668 1490 1832">On-site review and observations: The audit team observed PREA posters throughout the facility and posted them on the wall down the wings by the offender phones. The lead auditor tested the offender’s phone which provided directions and options the offender can select to report a PREA violation or connect with the outside victim advocate, without the use of their PIN. The auditor selected one of the options to ensure the system was working and was able to leave a message and received confirmation the message was received.</p> <p data-bbox="242 1863 1461 1921">Conclusion: Based on the relevant information available, interviews conducted and onsite observations, the auditor finds the facility meets compliance with this standard</p>

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 432 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 510 1461 638" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency Admin Code Chapter 310 Complaint Procedures • Division of Adult Institutions (DAI) Policy and Procedures 310.00.01 Inmate Complaints Regarding Staff Misconduct <p data-bbox="240 667 456 694"><u>Interviews conducted</u></p> <ul data-bbox="284 745 813 806" style="list-style-type: none"> • Random and Specialized interviews with offenders • Staff who process offender complaints <p data-bbox="240 835 1485 1028">(a) (d) ED 72 states “All sexual abuse and sexual harassment complaints filed through the Inmate Complaint Review System shall be immediately redirected and referred for sexual abuse and/or sexual harassment investigation. Inmates shall be notified within 30 days of the initial complaint that an investigation into the portion of the complaint alleging sexual abuse or sexual harassment has commenced and the Inmate Complaint Review process has concluded.” Agency Admin Code Chapter 310, DOC 310.08 PREA complaint procedure, outlines the process for the handling of inmate complaints related to sexual abuse and sexual harassment.</p> <p data-bbox="240 1059 1469 1218">(b) ED 72 states “A time limit shall not be imposed on when an offender may submit a complaint regarding an allegation of sexual abuse or sexual harassment through other applicable time limits may still apply to any portion of the complaint that does not allege an incident of sexual abuse or sexual harassment. All appeals shall be made in accordance with Wisconsin State statutory time limits and referred to the appropriate reviewing authority.” Additionally, the complaint process shall not include a mandatory informal resolution.</p> <p data-bbox="240 1249 1490 1344">(c) ED 72 states “Each facility shall ensure that an offender who alleges sexual abuse or sexual harassment may submit a complaint without submitting it to an employee who is the subject of the complaint and that such a complaint is not referred to an employee who is the subject of the complaint. The offender may use an alternate method of filing.”</p> <p data-bbox="240 1375 1453 1603">(e) ED 72 states “Third parties, including fellow offenders, employees, family members, attorneys and outside advocates, shall be permitted to assist an offender in filing complaints related to allegations of sexual abuse or sexual harassment. Complaints filed shall be referred for sexual abuse and/or sexual harassment investigation.” In Accordance with ED 72, Agency Admin Code DOC 310.08 (4) states “Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist an inmate in filing a request for administrative remedies relating to allegations of sexual abuse or sexual harassment and shall also be permitted to file such requests on behalf of inmates. Requests for administrative remedies filed under this section will be referred for a PREA investigation.”</p> <p data-bbox="240 1635 1485 1895">(f) ED 72 states “If an offender alleges that he or she is subject to a substantial risk of imminent sexual abuse, the offender may contact any employee who is not the subject of the allegation. Staff shall immediately forward the allegation to facility leadership for immediate corrective action. Facility leadership shall provide an initial response within 48 hours and issue a final decision within 5 calendar days. The initial response and final facility decision shall document the facility’s determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency complaint. Further response shall be in accordance with Employee Reporting.” In Accordance with ED 72, Agency Admin Code DOC 310.08 (5) states “Emergency grievance procedures for complaints alleging a substantial risk of imminent sexual abuse or sexual harassment will be handled in the following manner:</p> <ol data-bbox="276 1946 1485 2139" style="list-style-type: none"> 1. The inmate may contact any staff member who is not the subject of the allegation for immediate corrective action. 2. The inmate may file a complaint. Complaints collected under s. DOC 310.08 shall be immediately forwarded to the warden to determine if immediate action is warranted. 3. Reports of substantial risk of imminent sexual abuse or sexual harassment outside of the complaint process under this chapter shall be immediately forwarded to the warden to determine if immediate action is warranted. 4. Further response will be in accordance with department policy.

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

Pre on-site: The facility inmate complaint coordinator oversees offender complaints and stated they have not received any reported incidents of sexual abuse or sexual harassment. In the event they received a complaint, they would immediately process and notify the PCM/Superintendent and the Captain.

PAQ, the facility reported they did not receive any inmate complaints reporting sexual abuse or harassment. At the time of the onsite audit, the facility had not received any offender complaints alleging sexual abuse or sexual harassment.

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

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

115.53	Inmate access to outside confidential support services
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 434 743 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 510 1358 734" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency Inmate Handbook in English and Spanish • Agency PREA Poster (English and Spanish) – Community Victim Advocacy Organization • DOC-2937 Advocacy Request Form / DOC-2937 (S) Spanish Advocacy Request Form • POC-0041B Sexual Abuse in Confinement – A Resource For Offenders (English and Spanish) • Memorandum of Understanding Between WIDOC and Bolton Refuge House <p data-bbox="240 770 456 797"><u>Interviews conducted</u></p> <ul data-bbox="282 846 735 972" style="list-style-type: none"> • Interviews with random offenders • Specialized inmate offenders • Interview with Community Victim Advocate • Facility Victim Services Coordinator <p data-bbox="240 1008 1497 1330">(a-c) ED 72 states “Thereafter, the facility shall provide offenders with access to outside victim advocates, with whom the DOC shall maintain or attempt to enter into memoranda of understanding with, for emotional support services related to sexual abuse. Access includes giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers where available. The facility shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible and, in advance, provide notification to offenders of the extent to which such conversations will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.” In accordance with ED 72, offenders are provided with the inmate handbook as referenced in standard 115.33 which includes information on how to contact the community victim advocate. Additionally, the facility provided a copy of the victim advocate organization information posted throughout the facility (English/Spanish), and includes the following:</p> <ul data-bbox="282 1384 914 1545" style="list-style-type: none"> • The hotline number, • Mailing address • Informs offenders they do not need to enter their unique PIN, • Calls are not recorded or monitored, and • The level of confidentiality when sending correspondence. <p data-bbox="240 1576 1473 1666">Reviewing ED #72 the appointing authority or designee at each facility shall assign the facility-based Victim Services Coordinator. The staff member who is designated with this responsibility will assist in connecting victims of sexual abuse in confinement to outside support services.</p> <p data-bbox="240 1697 459 1724"><u>Pre onsite interviews:</u></p> <p data-bbox="240 1756 1473 1980">Community Victim Advocate: The auditor interviewed the victim advocate from Bolton Refuge House. The victim advocate is fairly new to this position and is the primary advocate for incarcerated victims. She stated that as requested by the victim, she would respond to the hospital to provide emotional support during the exam and investigator interviews. She has recently started working with this facility and offenders and with the pandemic restrictions lifting, she is hoping to start conducting on-site client emotional support services at the facility. She stated that when she provided telephonic emotional support services during the pandemic, offenders were allowed to speak to her in a room that allowed for privacy and arranged similar to a legal call at no charge.</p> <p data-bbox="240 2011 1473 2105">Facility Victim Coordinator: The facility does not provide emotional support services to victims of sexual abuse. Their role is to work as the liaison between the facility and the community victim advocate including arranging meetings and providing resources to the victim.</p> <p data-bbox="240 2136 544 2163"><u>On-site review and interviews:</u></p>

The audit team observed PREA posters throughout the facility which includes the contact number from the offender's phones and mailing addresses. This facility did not have any reported incidents of sexual abuse however, they had one offender who reported sexual abuse at another facility. The Offender stated they were not interested in speaking with the community victim advocate.

Random Offenders were interviewed some knew there was a victim line and others were not sure. Reviewing offender signed education, offender video, offender handbook, and PREA posters the information is available and offenders could be disregarding information if they don't feel they are a victim.

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

115.54	Third-party reporting
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 738 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1358 636" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency third party poster (English and Spanish) • Screenshot of the agency's public website reporting information <p data-bbox="242 667 1490 795">(a) ED 72 states, "The DOC shall provide a method for third parties to report sexual abuse and sexual harassment on behalf of an offender. Information on how to report sexual abuse and sexual harassment on behalf on an offender shall be posted publicly." The agency policy requires they investigate all allegations of sexual abuse and sexual harassment of inmates in our custody, past and present. They have included multiple offender reporting avenues.:</p> <ol data-bbox="276 844 799 1008" style="list-style-type: none"> 1. Tell, or write to, any staff member 2. Call the internal or external reporting hotline 3. File a grievance 4. Contact local law enforcement 5. Tell any family member, friend, or support person <p data-bbox="242 1034 1449 1095">ED 72 also includes information for persons (3rd party) wishing to report on behalf of an offender on their agency's public website.</p> <p data-bbox="242 1126 1481 1187">Pre on-site: On March 10, 2022, the auditor reviewed the agency website DOC Prison Rape Elimination Act (wi.gov) for 3rd party reporting option. A test was submitted to the email link provided and received a response the same day.</p> <p data-bbox="242 1218 1481 1279">Onsite: Interviews with random staff and offenders affirmed they knew that a 3rd party report could be made on behalf of an offender. At the time of this audit, the facility had not received any 3rd party reports.</p> <p data-bbox="242 1310 1497 1370">Conclusion: Based on the relevant information available, interviews conducted and onsite observations, the auditor finds the facility meets compliance with this standard</p>

115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized interview with the Warden • Specialized interview with the PREA Director • Interviews with random staff • Specialized interviews with Medical and Mental Health staff <p>(a) ED 72 states “Employees shall accept reports made verbally, in writing, anonymously, and from third parties; promptly document any verbal reports and immediately report.” Staff is required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility regardless it is part of the agency. The policy further requires staff to report any incidents of retaliation against offenders or employees who reported an incident and/or, neglect by an employee for violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>(b) ED 72 states “Employees shall not reveal any information related to a sexual abuse or sexual harassment report to anyone other than to supervisors, investigators and designated officials. Such information shall be limited to information necessary to make treatment, investigation and other security and management decisions.”</p> <p>(c) ED 72 states “Medical and mental health practitioners shall be required to report sexual abuse and to inform offenders of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services.”</p> <ul style="list-style-type: none"> • Pre-on-site specialized interviews with Medical and Mental: Both medical and mental health staff stated they inform the offender of their duty to report and limitations of confidentiality at the initiation of services. <p>(d) ED 72 states “If the alleged victim is under the age of 18 or considered a vulnerable adult in accordance with State or local statute, the DOC shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws”.</p> <p>The facility does not house adjudicated adult offenders as such this requirement only applies to those considered vulnerable adults. Local Law enforcement conducts the criminal sexual abuse investigation and would be responsible for completing mandatory reports for those who fall under the vulnerable person statute.</p> <p>This lead auditor reviewed the Wisconsin State Legislature public website for the vulnerable adult state statute Wisconsin Legislature - Criminal Code 940.285 Abuse of individuals at risk definitions and related applicable other Criminal Code statutes.</p> <ul style="list-style-type: none"> • “Adult at risk” 55.01 (1e): means any adult who has a physical or mental condition that substantially impairs his or her ability to care for his or her needs and who has experienced, is currently experiencing or is at risk of experiencing abuse, neglect, self-neglect, or financial exploitation • “Elder adult at risk” (46.90 (1) (br): means any person age 60 or older who has experienced, is currently experiencing or is at risk of experiencing abuse, neglect, self-neglect, or financial exploitation • “Individual at risk” means an elder adult at risk or an adult at risk. <p>“State official” means any law enforcement officer employed by the state or an employee of one of the following:</p> <ul style="list-style-type: none"> • The department of health services • The department of justice • The department of safety and professional services

- The board on aging and long-term care

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

Pre-on-site interviews: Interviews were completed with the Warden, facility Superintendent/PCM, and agency PREA Director. The policy requires all staff to immediately report allegations of sexual abuse and sexual harassment. The PREA Director stated local law enforcement conducts the criminal investigations and would be responsible for any mandatory reporting requirements if the victim is a vulnerable offender. Health Services Unit or Psychological Services Unit are required to inform offenders of their limits to confidentiality and that they are mandatory reporters.

On-site random staff interviews: All staff random interviewed stated that they are required to report immediately all allegations of sexual abuse, sexual harassment, or retaliation. Staff also understood that information related to allegations was confidential and not to be shared with anyone other than those who have a need a right to know. Staff further stated they would accept reports verbally, in writing, 3rd party, and anonymous.

During this audit time frame, this facility had not received any reported incidents of sexual abuse or sexual harassment. Additionally, the facility did not have any reported incidents going back to the last audit.

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

115.62	<p>Agency protection duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <p>Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72.</p> <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Assistant Deputy Secretary • Superintendent/PCM • Random Staff <p>(a) ED 72 states "When the department or facility learns that an offender is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the offender."</p> <p>Pre on-site interviews: The auditor conducted virtual interviews with the Assistant Deputy Secretary and Superintendent. Both described the process staff is to follow when they learn an offender is at imminent risk of sexual abuse. Staff will report and ensure the victim is separated from the aggressor. The facility supervisor will interview the victim to assess to determine actions to be taken i.e. move the aggressor or as requested the victim to a different unit, facility, etc.</p> <p>On-site interviews: All staff interviewed stated they would immediately contact the supervisor and keep the victim separated from the aggressor. During this audit time frame and going back to the last PREA audit, this facility has not had any offenders reporting fear of imminent sexual abuse</p> <p>Conclusion: Based on the relevant information available and interviews conducted the auditor finds the facility meets compliance with this standard</p>
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115.63	Reporting to other confinement facilities
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1358 602" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency report template <p data-bbox="242 631 458 660"><u>Interviews conducted</u></p> <ul data-bbox="284 710 580 770" style="list-style-type: none"> • Assistant Deputy Secretary • Superintendent/Warden <p data-bbox="242 799 1493 896">(a) (b) ED 72 states "Within 72 hours of receiving an allegation that an offender was the victim of sexual abuse while confined at another facility, the information shall be reported by the head, or designee, of the facility to the head, or designee, of the facility where the alleged abuse occurred."</p> <p data-bbox="242 925 1458 985">(c) (d) ED 72 states "All notifications shall be documented and the appointing authority that receives such notification shall ensure that the allegation is investigated."</p> <p data-bbox="242 1014 472 1043"><u>Pre on-site interviews:</u></p> <p data-bbox="242 1072 1485 1200">Assistant Deputy Secretary: Should the Assistant Deputy Secretary receive information from another agency that an offender reported sexual victimization while housed within a WI facility, she would contact the agency PREA Director. The PREA Director would research their database to determine if they had received the report and completed an investigation. If not, the PREA Director will contact the Warden/Superintendent, initiate a report and assign an investigation.</p> <p data-bbox="242 1229 1461 1458">Facility Superintendent: When a report is received that an offender was sexually abused at another WI facility or other confinement facility, the superintendent will notify the facility Superintendent, Warden, or agency head where the incident occurred. In the event they receive a report from another facility or agency, an incident report will be generated and an investigation will be assigned. If the reported incident occurred within the agency, they will review it to determine if an investigation was already completed. During this audit time frame, the facility had one offender who reported sexual abuse while housed at another facility. They verified that the incident had been investigated before the offender arrived at this facility.</p> <p data-bbox="242 1487 1422 1547">Conclusion: Based on the relevant information available and interviews conducted the auditor finds the facility meets compliance with this standard</p>

115.64	Staff first responder duties
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1358 672" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Agency First Responder Card (Healthcare staff) • Agency First Responder Card (security) • Agency First Responder Card (non-security) <p data-bbox="242 698 456 728"><u>Interviews conducted</u></p> <ul data-bbox="284 777 588 806" style="list-style-type: none"> • Interviews with random staff <p data-bbox="242 833 1473 896">(a) ED 72 First Responder requirements page 13 requires that, upon learning of an allegation that an offender was sexually abused, the first security staff member to respond to the report shall be required to, at a minimum:</p> <ol data-bbox="277 947 1473 1209" style="list-style-type: none"> 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. <p data-bbox="242 1236 1461 1299">(b) ED 72 states "If the first employee responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff."</p> <p data-bbox="242 1328 1493 1456">On-site: This facility has not received any reported incidents of sexual abuse during this audit time frame or going back to the last PREA audit. Interviews with random staff affirmed they are aware of the responsibilities of a first responder. They knew the difference between actions they would request the victim not take to protect evidence and ensure the aggressor did not take actions that could destroy evidence.</p> <p data-bbox="242 1485 1485 1547">Conclusion: Conclusion: Based on the relevant information available and interviews conducted the auditor finds the facility meets compliance with this standard</p>

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

115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions (DAI) Policy and Procedures 410.50.04 Support Services and Retaliation Monitoring • DOC-2805 Sexual Abuse Allegation Staff Retaliation Monitoring • DOC-2767 Sexual Abuse and Sexual Harassment Incident Victim Services Coordinator Response Checklist <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized interview with the Assistant Deputy Secretary • Specialized interview with the Superintendent • Specialized interview with staff who monitor retaliation <p>(a) ED 72 states “Each facility shall designate an employee(s) to monitor retaliation to ensure that all offenders and employees involved in the reporting or investigation of sexual abuse and/or sexual harassment are protected.”</p> <p>(b) (e) ED 72 states “For offenders or employees who express fear of retaliation, the facility shall take appropriate protective measures.”</p> <p>(c - d) ED 72 states “For at least 90 days following a report of sexual abuse, the designated facility-based employee(s) shall monitor the conduct and treatment of the offender(s) or employee(s) who reported the sexual abuse and the offender(s) who was reported to have experienced sexual abuse to determine if retaliation occurred. For offenders, such monitoring shall include periodic status checks. Employees shall act promptly to remedy any such retaliation. Monitoring beyond 90 days shall continue if the initial monitoring indicates a continuing need.” In accordance with ED 72, DAI 410.50.04 states “During periodic retaliation monitoring status checks described below, the VSC shall ask the alleged victim about the individual’s perceived degree of wellness. Support services shall be modified, as needed “ and “Following a report of sexual abuse, the VSC shall monitor the conduct and treatment of the reporter and alleged victim once every 30 days for at least 90 days. Monitoring efforts shall continue beyond 90 days if there is a continuing need.” Depending on the facility, the PREA Compliance Manager could be designated to monitor staff from possible retaliation.</p> <p>(f) ED 72 states “The DOC’s obligation to monitor shall terminate if DOC determines that the allegation is unfounded.” In accordance with ED 72, DAI 410.50.04 states “If the report is determined to be unfounded, efforts to monitor retaliation may be discontinued.”</p> <p>Pre onsite interviews: Interviewing the Assistant Deputy Secretary they stated the agency has Administrative and Executive Directives addressing there is a Zero Tolerance for any form of sexual abuse or sexual harassment and retaliation. Facility Victim Services Coordinators or PCMs are responsible for monitoring retaliation for 90 days and could be extended. If an individual expresses fear of retaliation the PCM or facility supervisor will meet with them and if retaliation is identified an investigation would be assigned.</p> <p>The Superintendent is also designated at the facility PCM and is responsible for retaliation monitoring. While the facility has not received any reports of sexual abuse, they were able to describe the time frames for meeting with victims and periodic status checks reviewing for any conduct reports, program sanctions, etc.</p> <p>Conclusion: Based on the relevant information available and interviews conducted the auditor finds the facility meets compliance with this standard</p>

115.68	Post-allegation protective custody
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 434 743 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 510 1406 604" style="list-style-type: none"> • WIDOC Agency Emergency Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA) for purposes of this audit report, this policy will be referred to ED #72 • DOC-30 Review of Inmate in Restrictive Housing <p data-bbox="240 631 456 658"><u>Interviews conducted</u></p> <ul data-bbox="282 712 847 739" style="list-style-type: none"> • Specialized interview with the Warden/Superintendent <p data-bbox="240 770 1457 828">(a) ED 72 states "Any use of restricted status housing to protect an offender who is alleged to have suffered sexual abuse shall be subject to the requirements of §115.43 and §115.343 as found within Placement."</p> <p data-bbox="240 860 1437 918">Pre on-site: While the agency has policy and procedures related to this standard and 115.43, this facility does not have restrictive housing.</p> <p data-bbox="240 949 1078 976">Conclusion: The auditor finds that the facility meets compliance with this standard.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 432 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 510 1358 734" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions (DAI) Policy and Procedures 306.00.15 (Restricted) Inmate Investigations • WIDOC Human Resources Policy 200.30.304 Employee Disciplinary Investigations • Notification for expansion of the Internal Affairs Office (IAO) • Agency Sensitive Investigation Network Communication (SINC) User's Guide (Confidential) • State of WI Department of Administration Agency retention records <p data-bbox="240 768 456 795"><u>Interviews conducted</u></p> <ul data-bbox="284 846 927 972" style="list-style-type: none"> • Specialized interview with the Superintendent • Specialized interview with the PREA Director • Specialized interview with the PREA Compliance Manager • Specialized interview with the Agency and Facility investigator <p data-bbox="240 1005 1358 1064">The agency and facilities conduct administrative investigations, the agency and/or facilities will contact and work collaboratively with outside local law enforcement when there is potential criminal behavior.</p> <p data-bbox="240 1097 1437 1223">(a) ED 72 states "The DOC shall ensure that an investigation is completed for all allegations of sexual abuse and sexual harassment, including those received from third parties and anonymous sources. DOC shall maintain a policy(ies) that governs the conduct of such investigation." In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 outlines the investigatory process includes conducting prompt, thorough, and objective investigations.</p> <p data-bbox="240 1256 1026 1283">(b) This provision is addressed under and in accordance with standard 115.34.</p> <p data-bbox="240 1317 1422 1473">(c) ED 72 states "Investigators shall preserve and/or collect direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator." In accordance with ED 72, DAI 306.00.15 outlines the agency's investigatory process and obligations for evidence preservation.</p> <p data-bbox="240 1507 1437 1565">(d) (g) (h) Outside Law Enforcement is contacted to conduct criminal investigations. The agency and/or facility will work collaboratively during the investigatory process.</p> <p data-bbox="240 1599 1493 1787">(e) ED 72 states "The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as offender or employee. The DOC shall not require an offender who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation." In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 requires investigators to assess the credibility of the alleged victim, suspect, or witness and shall not be determined by the person's status as an inmate or staff member.</p> <p data-bbox="240 1821 1485 1977">(f) ED 72 states "Administrative investigations shall include an effort to determine whether employee actions or failures to act contributed to the abuse." ED 72 additionally requires administrative investigation reports to include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and the investigative facts and findings. In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 outlines the agency's investigatory process and requirement to include a description of the physical and testimonial evidence and credibility assessments.</p> <p data-bbox="240 2011 1485 2069">(i) ED 72 states, "Administrative and criminal investigations shall be documented in a written report to be retained for as long as the alleged abuser is incarcerated or employed by the DOC, plus ten years."</p> <p data-bbox="240 2103 1493 2161">(j) (k) ED 72 states "The departure of an alleged abuser or victim from the employment or control of the facility or the DOC, or the recantation of the allegation, shall not provide a basis for terminating an investigation." In accordance with ED 72, DAI</p>

306.00.15, and DOC HR policy 200.30.304 outlines the agency's investigatory process and the obligation to continue with the investigation regardless of the departure of the alleged victim or suspect

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

Pre-on-site: During the audit time frame the facility did not receive any reported incidents of sexual abuse or sexual harassment. The auditor reviewed the agency's annual reports going back to the last audit to ascertain if this facility had conducted any investigations. This facility has not received or conducted any sexual abuse or sexual harassment investigations over the three-year facility audit cycle. The lead auditor reviewed the agency investigator training directory and verified which staff at the facility and agency level are responsible for conducting investigations and completing required training (115.34). The Agency Administrative Investigator is assigned to the Internal Affairs Office based in Madison and is responsible for conducting investigations involving staff of offenders' sexual abuse, fraternization, sexual harassment, and incidents meeting a violation of serious misconduct. Facility investigators are responsible for investigating reported incidents of offender on offender sexual harassment and case-by-case offender on offender sexual abuse.

Agency Administrative Investigator and Facility Investigator: The auditor conducted specialized investigator interviews with the Agency Administrative Investigator and facility investigator before the on-site review. The auditor asked them to describe the investigator's process from the time they are assigned the investigation. This included what evidence they collect and rely upon, summarizing interviews with the victim, suspect, and witness (if any), and how they interview victims in a trauma-informed approach. Investigators were asked how they assess the credibility of those interviewed and is this documented within their report. The investigators were able to provide knowledge and understanding when describing the investigatory process of a thorough investigation. Both investigators understand Miranda Warning, however, they are not criminal investigators and will not read Miranda Rights to offenders or staff. Staff conducting investigations are fact finders and the final resolution is determined by the appointing authority and sent to the PREA Office for final review, case closure, and offender notifications. While they are not fact finders, they were able to define Substantiated, Unsubstantiated and Unfounded.

Generally, when an incident of sexual abuse or sexual harassment has been reported the investigation will be assigned the same day or the next business day depending on the time and day of the report. Should the PREA Office identify elements not meeting the investigatory process for a thorough investigation, the investigation will be referred back to the investigator for corrections.

Conclusion: This facility did not have any reported incidents of sexual abuse or sexual harassment going back to the previous audit. As such, the finding of compliance for this standard is made based upon the evidence available in policy, review of training, and interviews. Based on the information available at the time of this audit, the auditor finds this facility meets full compliance with this standard.

115.72	<p>Evidentiary standard for administrative investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated available evidence related to this standard.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Division of Adult Institutions (DAI) Policy and Procedures 306.00.15 (Restricted) Inmate Investigations • WIDOC Human Resources Policy 200.30.304 Employee Disciplinary Investigations <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized interview with the facility and agency investigator <p>(a) ED 72 states "The DOC shall impose no standard higher than a preponderance of the evidence in determining whether the allegations of sexual abuse or sexual harassment are substantiated." In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 includes the definition of a preponderance of evidence in determining a substantiated finding.</p> <p><u>Pre onsite investigator interviews:</u> The investigator interviews intertwine with standards 115.34 and 115.71.</p> <p>Agency Administrative investigator and facility investigator: The auditor conducted specialized investigator interviews with the Agency Administrative Investigator and facility investigator before the on-site review. The investigators were asked what standard is used to determine whether the allegation of sexual abuse or sexual harassment is substantiated. Both stated that policy is a preponderance of the evidence to determine a substantiated/sustained finding. It is noted that investigators are fact finders and the final investigation report is reviewed by the appointing authority and PREA Office who will determine the final resolution.</p> <p>Conclusion: At the time of this audit, this facility has not received any reported incidents of sexual abuse including going back to the last PREA audit. As such, this auditor was not able to review any investigation reports. The finding of compliance with this standard is based upon the review of policy, available evidence, and interviews. The auditor finds this facility meets full compliance with this standard.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

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

Policy(s) and supporting documentation reviewed

- Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72.
- Division of Adult Institutions (DAI) Policy and Procedures 306.00.15 (Restricted) Inmate Investigations
- Agency PREA Investigation Notification DOC-2768 - substantiated findings
- Agency PREA Investigation Notification DOC-2768A - unsubstantiated findings
- Agency PREA Investigation Notification - unfounded findings

Interviews conducted

- Specialized interview with the Superintendent/Warden
- Specialized interview with the facility investigator
- Specialized interview with offender (s) who reported sexual abuse

(a)(b)(e)(f) ED 72 states "Following an investigation of an allegation that an offender suffered sexual abuse in a DOC facility, the facility shall inform the alleged victim, and document such notification, as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. If the DOC did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the alleged victim. The DOC's obligation to report shall terminate if the alleged victim is released from custody." In accordance with ED 72, DAI 306.00.15, and DOC HR policy 200.30.304 policy outlines the notifications and documentation process.

(c) ED 72 states "Following an offender's allegation that an employee committed sexual abuse against an offender and the findings are substantiated or unsubstantiated, the DOC shall subsequently inform the alleged victim, and document such notification, whenever the employee is no longer posted within the alleged victim's unit; the employee is no longer employed at the facility, or the DOC learns that the employee has been indicted or convicted on a charge related to the initial allegation of sexual abuse." In accordance with ED 72, the agency notification forms were reviewed and met the requirement of this provision.

(d) ED 72 states, "Following an offender's allegation that he or she has been sexually abused by another offender, the DOC shall subsequently inform the alleged victim, and document such notification, whenever the DOC learns that the alleged abuser has been indicted or convicted on a charge related to the initial allegation of sexual abuse." In accordance with ED 72, DAI 306.00.015, HR policy 200.30.304, and agency notification forms support the requirement to notify victims of sexual abuse and sexual harassment victims of the outcome of the investigation.

Pre onsite interviews: This auditor interviewed the Superintendent, agency investigator, and facility investigator who affirmed offenders are notified of the outcome of investigations. The offender notifications are completed by the agency PREA Office and mailed to the victim-offender unless the offender has been released from WIDOC custody.

Pre onsite document review: ED 72 follows and meets compliance with the requirement to notify offender victims when they have closed the investigation. Reviewing the PREA Office notification letter, they have included victims of sexual harassment to be notified when investigations have been completed. Additionally, offenders are notified if they report an incident that is determined not to constitute a violation of sexual abuse or sexual harassment by the PREA Office.

Onsite interviews: This facility did not have any offenders who reported sexual abuse occurring at this facility. The audit support staff was able to interview one offender who reported sexual abuse that occurred at another WIDOC facility. The interview with this offender does not impact this facility audit.

Conclusion: At the time of this audit, this facility has not received any reported incidents of sexual abuse or sexual harassment including going back to the last PREA audit. As such, this auditor was not able to review investigation reports or offender notifications. The notification forms exceed the standard requirement; however, the auditor was not able to review documents for proof of practice to support they exceeded this standard. The finding of compliance with this standard is based upon the review of policy, available evidence, and interviews. The auditor finds this facility meets full compliance with this standard.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 453 237">Auditor Discussion</p> <p data-bbox="240 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 432 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="280 510 1481 638" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. • Wisconsin Department of Corrections, Executive Directive #2: Employee Discipline. For the purpose of this audit, this directive will be referred to as ED 2. <p data-bbox="240 667 1469 795">(a) ED 72 states “Staff members who are found to have violated the DOC sexual abuse, sexual harassment and retaliation policies shall be subject to disciplinary sanctions up to and including termination.” In accordance with ED 72, ED 2 outlines levels of discipline and the progression schedule for formal discipline up to termination. The disciplinary process could be accelerated for incidents of staff sexual misconduct with offenders.</p> <p data-bbox="240 824 1469 918">(b) (d) Ed 72 states “Termination is the presumptive sanction for a staff member who engaged in sexual abuse. All terminations for violations of the DOC sexual abuse and sexual harassment policies, including resignations that would have resulted in termination if not for the resignation, shall be reported to any relevant licensing bodies</p> <p data-bbox="240 947 1453 1010">(c) ED 72 states “Sanctions shall be commensurate with the nature and circumstances of the violation, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.”</p> <p data-bbox="240 1039 1433 1133">Conclusion: At the time of this audit, this facility has not received any reported incidents of sexual abuse or sexual harassment including going back to the last PREA audit. The finding of compliance with this standard is based upon the review of agency policy. The auditor finds this facility meets full compliance with this standard.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to ED 72. <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized interview with the Superintendent <p>(a) (b) ED 72 states "Any volunteer or contractor who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies. Appropriate remedial measures shall be taken by the facility to ensure the safety of offenders in contact with volunteers and contractors."</p> <p>Pre onsite interview: The lead auditor as the Superintendent what actions they would take when an allegation of sexual abuse or sexual harassment is reported and the accused is a contractor or volunteer. For reports involving sexual abuse, the volunteer or contractor will be temporarily restricted from entering the facility while the investigation is ongoing. Should the investigation be substantiated, they will be permanently removed from entering all WIDOC facilities and reported to relevant licensing bodies.</p> <p>Conclusion: At the time of this audit, this facility has not received any reported incidents of sexual abuse or sexual harassment including going back to the last PREA audit. The finding of compliance with this standard is based upon the review of agency policy and specialized interviews. The auditor finds this facility meets full compliance with this standard.</p>

115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive (ED) #72: Sexual Abuse and Sexual Harassment in Confinement (PREA) • Department of Corrections Chapter DOC 303 Discipline (DOC) 303.01 <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized interview with the Superintendent • Specialized interviews with Medical and Mental Health staff <p>(a) ED 72 states “Offenders who have committed offender-on-offender sexual abuse are subject to disciplinary sanctions pursuant to a formal disciplinary process.”</p> <p>(b) ED 72 states “Sanctions shall be commensurate with the nature and circumstances of the violation, the offender’s disciplinary history and the sanctions imposed for comparable offenses by other offenders with similar histories.”</p> <p>(c) ED 72 states “The disciplinary process shall consider whether a perpetrating offender’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.”</p> <p>(d) ED 72 states “The facility shall consider requiring perpetrating offenders to participate in interventions, such as therapy or counseling, to address and correct underlying reasons or motivations for the abuse.”</p> <ul style="list-style-type: none"> • Pre-on-site specialized interview with Medical and Mental Health: Medical and Mental Health staff stated that this facility does not offer therapy for offender aggressors of sexual abuse in a confinement setting. <p>(e) ED 72 states “An offender may only be disciplined for sexual contact with an employee upon a finding that the employee did not consent to such contact.”</p> <p>(f) ED 72 states “Reports of sexual abuse or sexual harassment made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence to substantiate the allegation.”</p> <p>(g) ED 72 states “While consensual sexual activity between offenders is prohibited in the DOC facilities, the DOC may not deem consensual sexual activities as sexual abuse if it is determined that the activity is not coerced.”</p> <p>Document review: The agency and facility offender disciplinary infractions is outlined within Wisconsin Statute, Chapter 303 Department of Corrections. DOC 303.14 Sexual Conduct and DOC 303.15 Sexual contact or intercourse outline prohibited acts to include “consensual acts are prohibited under this section”</p> <p>Pre onsite interview: The superintendent stated the facility will follow agency policy when disciplining an offender and local law enforcement would refer substantiated cases of criminal sexual abuse to the District Attorney’s office.</p> <p>Conclusion: At the time of this audit, this facility has not received any reported incidents of sexual abuse or sexual harassment including going back to the last PREA audit. The finding of compliance with this standard is based upon the review of agency policy and specialized interviews. The auditor finds this facility meets full compliance with this standard.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to as ED 72. • Division of Adult Institutions (DAI) Policy and Procedures 500.70.01 Mental Health Screening, Assessment and Referral • Division of Adult Institutions (DAI) Policy and Procedures 410.30.01 Screening for Risk of Sexual Abusiveness and Sexual Victimization • Screenshot of the Agency Electronic Medical Record (blank) – Confidential • Screenshot of the Agency Risk Screening Referral –Confidential. • Agency Non-Health Disclosure Form - DOC-1163 (blank) • Agency Confidentiality Form –DOC-1923 (blank) • Agency PHI Disclosure Form – DOC-1163A (blank) <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized interviews with offenders • Specialized interviews with staff who conduct risk screening • Specialized interviews with Medical and Mental Health staff <p>(a - c) ED 72 states “If either the initial or follow-up screening indicates an offender has previously experienced prior sexual victimization or has perpetrated sexual abuse, whether it occurred in an institutional setting or in a community setting, employees shall ensure the offender is offered a follow-up meeting with a mental health provider within 14 days of the initial or follow-up screening.” In accordance with ED 72 and DAI 410.01, DAI 500.70.01 page 4. VI. PREA Referrals outlines the referral process to Psychological Services (PSU) staff.</p> <p>(d) ED 72 states “Appropriate controls shall be placed on the dissemination of information gathered from the initial and follow-up screenings to ensure that sensitive information is not exploited to the offender’s detriment by employees or other offenders. Further, any information related to sexual victimization or abusiveness occurring in an institutional setting shall be confidential and strictly limited to medical and mental health clinicians and other employees, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments or as otherwise required by law.”</p> <ul style="list-style-type: none"> • The Agency Risk Screening tool includes an introduction that is required to be read to the inmates prior to completing the assessment to include the limits of confidentiality and staff mandatory reporting requirements. <p>(e) ED 72 states “Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting unless the offender is under the age of 18.”</p> <p>Pre on-site specialized interviews and document review: Mental health staff stated they receive notification from staff who conduct the risk screening assessments when an offer for mental health services is accepted related to sexual victimization. that occurred within a confinement setting or in the community. The mental health staff will offer follow-up treatment plans for ongoing services which also intertwine with standard 115.83. They would also provide information and assist the offender as requested to continue treatment with a community victim advocate if available and would depend on the location where the offender is released. The auditor reviewed screening information and reflected the date staff offered mental health services. At the time of this audit, they did not have any offenders who accepted the offer of mental health services.</p> <p>On-site interviews and review: The audit support staff interviewed the staff member who meets offenders to complete the 72-hour and 30-day follow-up risk screening assessments. The staff member described the screening process and offer mental health services for offenders reporting sexual abuse within a confinement setting and/or community. The mental</p>

health staff member is a part-time employee and if onsite they will inform in person and the offender could be seen the same day or scheduled to be seen the next business day. If the mental health staff member is not on-site, an email notification is completed. Additionally, the audit support staff reviewed the offender risk screening information and interviewed an offender who had prior sexual abuse in confinement who was offered and declined services.

Conclusion: The finding of compliance with this standard is based upon the review of agency policy, interviews, and document reviews. The auditor finds this facility meets full compliance with this standard.

115.82	Access to emergency medical and mental health services
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 738 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1461 703" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to as ED 72. • Division of Adult Institutions (DAI) Policy and Procedures 500.30.19 Health Services Unit Procedure in the Event of Sexual Abuse • Agency Off-Site Review Form DOC-3001 (blank) • DAI 316.00.01 (attachment) Inmate Co-Payment for Health Services <p data-bbox="242 732 456 761"><u>Interviews conducted</u></p> <ul data-bbox="284 810 900 873" style="list-style-type: none"> • Specialized interviews with Medical and Mental Health staff • Specialized interviews with random staff <p data-bbox="242 902 1485 1028">(a) ED 72 states "Victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment ." In accordance with ED 72, DAI 500.30.19 outlines procedures Health Services staff are to follow when an incident of sexual abuse is reported.</p> <p data-bbox="242 1059 1493 1153">(b) ED 72 states "In the event that no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health employee(s)."</p> <p data-bbox="242 1182 1378 1245">(c) ED 72 states "The DOC's medical response shall include the timely dissemination of information and access to emergency contraception and sexually transmitted infections prophylaxis."</p> <p data-bbox="242 1274 1481 1435">(d) ED 72 states "All medical and mental health treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident, and in a manner consistent with the community level of care." In accordance with ED 72, DAI316 .00.01 (attachment) reflects there is no copayment for treatment for a medical emergency, a referral from a PREA Risk Assessment Screener, and Crisis intervention evaluation and treatment related to sexual abuse in confinement.</p> <p data-bbox="242 1464 1461 1592">Pre on-site specialized interviews: Both the mental health and medical staff stated that offender victims of sexual abuse would receive timely, unimpeded access to emergency medical treatment. If an incident is reported after hours the facility would make calls and they would respond. As of this audit time frame this facility has not received any reports of sexual abuse.</p> <p data-bbox="242 1624 1461 1718">On-site interviews: This facility has not had any reported incidents of sexual abuse during this audit time frame including going back to their last PREA Audit. Audit team members interviewed random staff who were able to describe actions they would take as first responders.</p> <p data-bbox="242 1749 1449 1809">Conclusion: The finding of compliance with this standard is based upon the review of agency policy and staff interviews. The auditor finds this facility meets full compliance with this standard.</p>

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1466 701" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to as ED 72. • Division of Adult Institutions (DAI) Policy and Procedures 500.30.19 Sexual Abuse – Health Services Unit Procedure in the Event of Sexual Abuse • Division of Adult Institutions (DAI) Policy and Procedures 500.70.01 Mental Health Screening, Assessment, and Referral. <p data-bbox="242 732 456 761"><u>Interviews conducted</u></p> <ul data-bbox="284 810 900 871" style="list-style-type: none"> • Specialized interviews with offenders • Specialized interviews with Medical and Mental Health staff <p data-bbox="242 902 1461 1095">(a) (b) ED 72 states “The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse in any confinement setting. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities or their release from custody.” In accordance with ED 72, DAI 500.30.19 and DAI 500.70.01 outline procedures for Health Services and Psychological Services employees to follow in response to and follow up after an incident of sexual abuse is received.</p> <p data-bbox="242 1126 1461 1218">(c) (g) ED 72 states “All medical and mental health treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident, and in a manner consistent with the community level of care.”</p> <p data-bbox="242 1249 1153 1279">(e) This standard provision is not applicable as this facility does not house female offenders</p> <p data-bbox="242 1310 1477 1438">(d) (f) ED 72 states “Victims of sexual abuse shall be offered tests for sexually transmitted infections. Victims of sexually abusive vaginal penetration shall be offered pregnancy tests, in addition to timely and comprehensive information about and timely access to lawful pregnancy-related medical services.” In accordance with ED 72, DAI 500.30.19 outlines the procedures including completing the DOC-3542 Diagnostic Testing Results related to Sexual Contact.</p> <p data-bbox="242 1469 1441 1561">(h) ED 72 states “Further, facilities shall attempt to conduct a mental health evaluation of all known offender-on-offender abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.”</p> <p data-bbox="242 1592 1490 1720">Pre on-site specialized interviews: Both the mental health and medical staff stated that offender victims of sexual abuse would receive ongoing medical and mental health treatment as needed and requested by the victim-offender. Victim offenders are seen timely and receive services consistently with a community level of care and time better as they are on-site and do not have a long waitlist or appointment times. Mental health staff</p> <p data-bbox="242 1751 1445 1843">Conclusion: At the time of this audit, this facility has not received any reported incidents of sexual abuse or sexual harassment including going back to the last PREA audit. The finding of compliance with this standard is based upon the review of agency policy and specialized interviews. The auditor finds this facility meets full compliance with this standard.</p>

115.86	Sexual abuse incident reviews
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="240 434 738 461"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="282 510 1422 672" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to as ED 72. • Division of Adult Institutions Policy and Procedures (DAI) 410.50.01 Sexual Abuse Incident Reviews • Division of Adult Institutions Policy and Procedures (DAI) 300.00.70 Assaults by Inmate Reporting and Tracking • Agency SAIR Form – DOC 2863 (blank) <p data-bbox="240 698 579 725"><u>Specialized Interviews conducted</u></p> <ul data-bbox="282 779 911 873" style="list-style-type: none"> • Correction Warden/ • Superintendent/PREA Compliance Manager • Staff member participates in Sexual Abuse Incident Reviews <p data-bbox="240 900 1485 1097">(a-c) ED 72 states “All facilities shall conduct a review within 30 days of the conclusion of every sexual abuse investigation unless the allegation was determined to be unfounded. The team shall consist of upper-level management officials with input from supervisors, investigators and medical and mental health practitioners.” In accordance with ED 72, DAI 410.50.01 and DAI 300.00.70 require facilities to conduct a sexual abuse incident review after every sexual abuse investigation is closed substantiated or unsubstantiated. DAI 410.50.01 outlines procedures for conducting the review and who as a minimum shall be included in the review process.</p> <p data-bbox="240 1124 1209 1151">(d) ED 72 requires the Sexual Abuse Incident Review Team to complete the following provisions:</p> <ol data-bbox="276 1205 1481 1603" style="list-style-type: none"> 1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse; 2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; 3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; 4. Assess the adequacy of staffing levels in that area during different shifts; 5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by employees; and 6. Prepare a report of its findings, including but not necessarily limited to determinations made in the above items, and any recommendations for improvement and submit such report to the facility head and PREA Compliance Manager. <p data-bbox="240 1630 1461 1693">(e) ED 72 states “The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.”</p> <p data-bbox="240 1720 1493 1948">Pre on-site interviews: The facility Superintendent is the designated PCM and is part of the Sexual Abuse Incident Review Committee which also includes the Warden over the agency Correctional Centers. The facility has not received any reported sexual abuse incidents including back to the last PREA audit. As such, this facility has not conducted a sexual abuse incident review. The PCM and the Corrections Security Director described the process for completing the sexual abuse incident review and that they would be completed within 30 days of the investigation being closed substantiated or unsubstantiated. The review team includes the Corrections Warden, Deputy Warden, Superintendent/PCM, Investigator, Victim Coordinator, Medical and/or Mental health staff, and case by case HR Director if the allegation involved a staff member.</p> <p data-bbox="240 1975 1449 2078">Conclusion: At the time of this audit, this facility has not received any reported incidents of sexual abuse or sexual harassment including going back to the last PREA audit. The finding of compliance with this standard is based upon the review of agency policy and specialized interviews. The auditor finds this facility meets full compliance with this standard.</p>

115.87	<p>Data collection</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to as ED 72. • Survey of Sexual Victimization Summary Forms 2017-2020 <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Specialized interview with the PREA Director <p>(a - f) ED 72 states "The DOC shall collect accurate, uniform data from incident-based documents such as reports, investigation files, and sexual abuse incident reviews for every allegation of sexual abuse within facilities, including facilities with which it contracts for the confinement of offenders, using a standardized instrument and set of definitions. The extracted data, at minimum, shall include the information to answer all questions from the most recent version of the Department of Justice Survey of Sexual Victimization. This data shall be aggregated annually, reported to the Department of Justice as requested, and, with personal identifiers removed, posted publicly to the DOC's website annually/"</p> <p>Pre-onsite: The lead auditor interviewed the PREA Director who stated that they complete the Department of Justice (DOJ), Bureau of Statistics (BJS) Survey of Sexual Violence (SSV) report annually. The private contracted agencies are responsible for reporting their agency SSV statistics. As of this report, the D.O.J. B.J.S survey has not been sent to agencies to collect 2021 data.</p> <p>Pre onsite document review: The auditor reviewed the previous year's SSV Summary formThe agency has completed the previous year's SSV reports.</p> <p>Conclusion: The finding of compliance with this standard is based upon the review of agency policy, SSV document review, and PREA Director interview. The auditor finds this facility meets full compliance with this standard.</p>
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115.88	Data review for corrective action
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1461 398">In determining compliance the auditor triangulated relevant and available evidence related to this standard. In reviewing Division of Adult (DAI) policies and procedures they reference and define an incarcerated individual as; Person in our care (PIOC), inmate, and offender. This audit report will use these terms interchangeably when referring to an incarcerated person.</p> <p data-bbox="242 430 743 459"><u>Policy(s) and supporting documentation reviewed</u></p> <ul data-bbox="284 508 1358 636" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to as ED 72. • Agency Annual Reports 2018-2020 • Screenshot of the agency's public website <p data-bbox="242 667 456 696"><u>Interviews conducted</u></p> <ul data-bbox="284 745 667 840" style="list-style-type: none"> • Assistant Deputy Secretary • Agency PREA Director • Facility PREA Compliance Manager <p data-bbox="242 871 1489 1128">(a - d) ED 72 states "The data collected and aggregated shall be analyzed to assess and improve effectiveness of the DOC's sexual abuse prevention, detection and response policies, practices and training by identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility as well as the DOC as a whole. The report shall, additionally, include a comparison of the current year's data and corrective actions with those from previous years and shall provide an assessment of the DOC's progress in addressing sexual abuse. Corrective action reports shall also be posted publicly to the DOC's website. The DOC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted."</p> <p data-bbox="242 1160 1461 1288">Pre onsite document review: The agency prepares annual reports and posts on their agency public website DOC Prison Rape Elimination Act (wi.gov) This auditor reviewed the agency website and found they have posted annual reports going back to 2010 up to and including 2020. Personal identifying information was redacted meeting compliance with security requirements.</p> <p data-bbox="242 1319 1489 1512">Pre onsite interviews: The lead auditor interviewed the Deputy Assistant Secretary, PREA Director, and PCM. Each described their responsibility. The PCM sends the facility report and information to the PREA office each year and the PREA Director is responsible to review all of the facility's information, assessing the data, and prepare the annual report. After the report has been completed, the report is sent to the Assistant Deputy Secretary for review and is then sent to the Secretary for review and signature. After the annual report has been signed the PREA Director requests the report to be posted on the agency website.</p> <p data-bbox="242 1543 1489 1603">Conclusion: The finding of compliance with this standard is based on interviews, agency policy, reviewing the most current annual report, and the agency's public website. The auditor finds this facility meets full compliance with this standard.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	<p data-bbox="231 197 1508 257">Auditor Discussion</p> <p data-bbox="231 257 1508 313">In determining compliance the auditor triangulated available evidence related to this standard.</p> <p data-bbox="231 313 1508 369"><u>Policy reviewed</u></p> <ul data-bbox="231 369 1508 481" style="list-style-type: none"> • Wisconsin Department of Corrections, Executive Directive #72: Sexual Abuse and Sexual Harassment in Confinement (PREA). For this audit report, this policy will be referred to as ED 72. <p data-bbox="231 481 1508 537"><u>Interviews conducted</u></p> <ul data-bbox="231 537 1508 604" style="list-style-type: none"> • Specialized interview with the PREA Director <p data-bbox="231 604 1508 660">(a) ED 72 states "All data shall be securely retained and maintained for at least 10 years after the date of initial collection."</p> <p data-bbox="231 660 1508 795">Pre onsite interviews: The lead auditor interviewed the PREA Director who stated the data is retained in the Sensitive Information Network Communication (SINC). The only staff who have access to the information are those assigned to the PREA Office.</p> <p data-bbox="231 795 1508 891">Conclusion: The finding of compliance with this standard intertwines with standards 115.87 and 115.88 and PREA Director interview and agency policy. The auditor finds this facility meets full compliance with this standard.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 197 1508 257">Auditor Discussion</p> <p data-bbox="229 257 1508 324">In determining compliance the auditor triangulated available evidence related to this standard:</p> <p data-bbox="229 324 1508 380"><u>Documentation reviewed</u></p> <p data-bbox="229 380 1508 571">(a) The auditor reviewed the agency's public website DOC Prison Rape Elimination Act (wi.gov) and verified the agency has posted final PREA audit reports for all facilities beginning audit year two of cycle one and continued up to audit year one of cycle three. Due to the pandemic causing a significant impact on the agency and facility operations, they did not have any facilities audited during audit year two of cycle three. Based on these factors, facilities scheduled audits during audit year two were moved to audit year three of cycle three.</p> <p data-bbox="229 571 1508 683">(b) The auditor reviewed the agency's public website DOC Prison Rape Elimination Act (wi.gov) and verified the agency has posted final PREA audit reports for all facilities beginning audit year two of cycle one and continued up to audit year one of cycle three.</p> <p data-bbox="229 683 1508 750">(h) While conducting the on-site review, the auditor and audit support staff had access to and the ability to observe all areas.</p> <p data-bbox="229 750 1508 840">(i) The auditor received requested documentation via email or uploaded within the OAS before the on-site audit review and documentation requested post onsite review and/or during corrective action time-frame.</p> <p data-bbox="229 840 1508 929">(m) The audit team conducted staff and offender interviews in areas that allowed a level of privacy from other offenders or staff from hearing.</p> <p data-bbox="229 929 1508 1064">(n) The audit notifications were posted throughout the facility and clearly articulated that letters to the auditor would not be discussed unless required by law. The auditor did not receive any letters from inmates or staff before or after the on-site review.</p> <p data-bbox="229 1064 1508 1108">Conclusion: The agency and facility meet compliance with this standard</p>

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

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

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

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

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

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

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
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.)	yes
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.)	yes
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? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	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 agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
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 always makes a victim advocate from a rape crisis center available to victims.)	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 the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
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 the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

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 receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
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 or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
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, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
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 an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
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 any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
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? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
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? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

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

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

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

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

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

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

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

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

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

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

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