

Disclaimer: This report, as required per 28 CFR §115.403, details the findings of an audit that was conducted by an outside contractor to determine the Federal Bureau of Prisons' (BOP) compliance with the Prison Rape Elimination Act (PREA). As the work product of independent auditors subcontracted by [PREA Auditors of America \(PAOA\)](#), the BOP is **not** responsible for grammatical or typographical errors. Additionally, any questions or comments regarding the discrepancies or inaccuracies found within this report should be directed to PAOA at [\(713\) 818-9098](#), or to the subcontracted independent auditor (name and email address can be found on page one of the report), for explanation and resolution.

PREA Facility Audit Report: Final

Name of Facility: FCI Elkton

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 01/30/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input 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 type="checkbox"/>
Auditor Full Name as Signed: Darla P. O'Connor	Date of Signature: 01/30/2023

AUDITOR INFORMATION	
Auditor name:	O'Connor, Darla
Email:	darla@preaauditing.com
Start Date of On-Site Audit:	12/06/2022
End Date of On-Site Audit:	12/08/2022

FACILITY INFORMATION	
Facility name:	FCI Elkton
Facility physical address:	8730 Scroggs Road, Lisbon, Ohio - 44432
Facility mailing address:	PO Box 129, Lisbon, Ohio - 44432

Primary Contact	
Name:	J. Bolar
Email Address:	elk-preacompliancemgr-s@bop.gov
Telephone Number:	330-420-6200

Warden/Jail Administrator/Sheriff/Director	
Name:	F. Garza
Email Address:	ELK-PREAComplianceMgr-S@bop.gov
Telephone Number:	330-420-6200

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Sarah Dees
Email Address:	ELK-PREAComplianceMgr-S@bop.gov
Telephone Number:	330-420-6200

Facility Characteristics	
Designed facility capacity:	2048
Current population of facility:	1862
Average daily population for the past 12 months:	1615
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	20-82
Facility security levels/inmate custody levels:	Low/In, MIN/Out, MIN Community
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	327
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	24
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	20

AGENCY INFORMATION	
Name of agency:	Federal Bureau of Prisons
Governing authority or parent agency (if applicable):	U.S. Department of Justice
Physical Address:	320 1st Street NW, Washington , Dist. Columbia - 20534
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Cynthia Campagna	Email Address:	ccampagna@bop.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:	2022-12-06
2. End date of the onsite portion of the audit:	2022-12-08

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:	St. Elizabeth Youngstown Hospital The Rape Crisis and Counseling Center with Compass Family and Community Services Ohio Alliance to End Sexual Violence

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2048
15. Average daily population for the past 12 months:	1615
16. Number of inmate/resident/detainee housing units:	9
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:	1892
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:	5
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:	1
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:	6
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:	12
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:	3

<p>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:</p>	<p>0</p>
<p>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:</p>	<p>12</p>
<p>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:</p>	<p>0</p>
<p>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:</p>	<p>8</p>
<p>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:</p>	<p>0</p>
<p>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):</p>	<p>Twenty inmates from targeted groups were interviewed. The Auditor interviewed the following:</p> <ul style="list-style-type: none"> Eight transgender inmates. Three LEP inmates. Three physically disabled inmates. One hearing impaired inmate. Two visually impaired inmates Two inmates who disclosed abuse in screening. One cognitively disabled inmate. Zero gay or bisexual inmates Zero inmates in segregation housing for PREA.

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:	327
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:	24
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:	The facility has not utilized volunteers in the past twelve months due to COVID-19 restrictions. When volunteers are being used they are primarily in religious services. The contractors being used are primarily medical and mental health professionals.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	20
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54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)

- Age
- Race
- Ethnicity (e.g., Hispanic, Non-Hispanic)
- Length of time in the facility
- Housing assignment
- Gender
- Other
- None

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?

The institutional count the first day of the on-site audit was 1,892.

Twenty random inmates were interviewed. These were inmates that were not part of the targeted inmate interviews. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates to interview, ensuring diversity in age and race. During the on-site tour, the Auditor had several conversational encounters with inmates regarding the PREA program, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information gathering process. A total of twenty formal random inmate interviews were conducted.

As a result of the audit notice posting the Auditor received two letters from inmates. Both inmates were interviewed.

At the beginning of each interview the Auditor made clear to the inmate why she was at the facility, what her role was in the PREA process and explained why interviews were needed. The Auditor also discussed the inmate's participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions.

All random inmates willing participated in the interview process. All responses were recorded by hand.

During the random interviews, no PREA issues were revealed, no other interview protocols were accessed. All random inmates responded they were aware of the zero-tolerance policy, they knew how to report an incident, they felt they could report anonymously, they knew they had a right to be free from retaliation.

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):	<p>According to the PREA Auditor Handbook, the auditor was required to conduct a minimum of twenty random inmate interviews. The Auditor interviewed twenty random inmates.</p>
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	<p>20</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	<p>3</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>1</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>2</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>1</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>3</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>When the staffed was asked about the LGBTI inmates they reported zero LGB inmates, 12 transgender inmates and zero intersex inmates.</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>8</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>Facility stated this information is not tracked. If an individual does not self report they have no way of knowing this information.</p>
<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:</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>There was one allegation in the past twelve months. It was staff-on-inmate. The female staff member resigned and the inmate was transferred.</p>

<p>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:</p>	<p>2</p>
<p>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:</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>Facility reported they had not placed anyone in segregation for PREA related activities. Staff working the Special Housing Unit reported the same information.</p>

<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The Auditor requested and received a roster of inmates who fell into the targeted categories. The Auditor randomly chose inmates from each category to interview, ensuring diversity in age and race. Once selected each inmate was put on “call- out” with a time to report to the private space designated for interviews.</p> <p>The institution advised the Auditor upon arrival there were two LEP inmates in the facility. While interviewing a targeted inmate in another category, the Auditor realized he struggled with his English. Consequently, he is listed in the LEP category. This is why there are three LEP interviews, when the facility reported only two LEP inmates in house.</p>
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>31</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input checked="" 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>From the staff roster, the Auditor chose random staff by excluding any staff who had been identified as specialized and by including staff available the days of the on-site audit.</p>
<p align="center">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 align="center">21</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>

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff

	<input checked="" type="checkbox"/> Intake staff <input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Classification Staff Mailroom Staff
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1

<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>Using the list of specialized staff provided, the Auditor was able to select individuals for interviews. All specialized staff answers were based on the line of questioning on the specific interview protocols for their position and responsibilities.</p> <p>In a few instances a single person was responsible for covering multiple, separate protocols, i.e. First responder/Intermediate or higher staff, Intake staff/Monitor for retaliation, Intake staff/Screening for risk of victimization and abusiveness, etc.</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.

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<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>ELK is an all-male low security facility with an adjacent low security Federal Satellite Low (FSL) facility. The capacity is approximately 2048 inmates. ELK is located on approximately 320 acres in a rural area within Columbiana County, Ohio. There are eight housing units that are designed as dormitory style bunked cubicles with handicap accessible cubicles available in the lower units. The ninth housing unit is the Special Housing Unit and it is comprised of 72 segregation cells. Generally speaking there was one officer per unit and other “floating” officers who assisted as needed. There was sufficient camera coverage which was made more robust by security mirrors making constant supervision possible.</p> <p>During the facility tour, the Auditor observed appropriate PREA signage, including the Pre-Audit Notice. Additionally during the facility tour the Auditor looked for appropriate facility lay-out, bathroom privacy, blind spots, placement of cameras, security staff to inmate ratio in housing units and on work assignments.</p> <p>The Auditor was given unimpeded and complete access to all areas of the facility.</p>
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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.

<p>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?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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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.).

Personnel and Training Files:

The PAQ reflects 327 facility staff. There was a total of fifty record reviews conducted on staff from various categories. The records were selected by randomly choosing the records of new hires; newly promoted employees and seasoned employees.

All records contained the required documentation, i.e., initial criminal history check, administrative adjudication, initial PREA education with acknowledgment form signed, PREA annual training and five-year criminal history check, when applicable.

Inmate Records:

There were fifty inmate records, chosen randomly from the master roster, with varying arrival dates. All records had a signed acknowledgment sheet indicating that they had received PREA information and viewed the PREA video. All inmates had received PREA information during intake, had their PREA screening within 72 hours of admission, and had comprehensive PREA education within 30-days of intake. They were reassessed at their first unit team meeting 28-days after arrival.

Sexual Abuse and Sexual Harassment Allegations:

According to the PAQ, the facility reported one allegations of sexual abuse and sexual harassment in the past twelve months. The Auditor was provided the PREA file for the one incident. The report was reviewed using the PREA audit investigative records review tool to record the following information relative to each investigative report:

- Case# / ID
- Date of Allegation
- Date of Investigation
- Staff-or-Inmate-on-Inmate
- Sexual Abuse or Sexual Harassment
- Final Disposition
- Is Disposition Justified?
- Investigating Officers
- Notice Given to Inmate

Investigation Files:

Information received regarding the allegations of sexual abuse indicate in the past twelve-months there had been a total of one allegation made. The allegation was staff-on-inmate sexual abuse. The female staff member resigned and the inmate was transferred. It was investigated administratively and found to be unsubstantiated. It was referred for prosecutorial review.

There were zero inmates transported for forensic examinations in the past twelve months. This was confirmed by the PCM as well as SANE personnel.

The institution staff I encountered were bright and engaging. Their combined demeanors and attitudes displayed a culture that is acutely aware of the significance of the PREA program and view the responsibility to protect inmates and staff from sexual victimization as a high priority.

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	1	0	1	0
Total	1	0	1	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	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	1	0	0	0
Total	0	1	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	1	0
Total	0	0	1	0

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
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:	1
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual 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 checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files

103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input 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
a. Explain why you were unable to review any sexual harassment investigation files:	There were zero sexual harassment allegations in the past twelve months.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)

Inmate-on-inmate sexual harassment investigation files

108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
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114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The Auditor reviewed the file of the only case in the past twelve months.
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SUPPORT STAFF INFORMATION

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.	<input type="radio"/> Yes <input checked="" type="radio"/> No
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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.	<input type="radio"/> Yes <input checked="" type="radio"/> No
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AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
Identify the name of the third-party auditing entity	PREA Auditors of America

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
	Auditor Discussion
	<p><u>Documentation Reviewed:</u></p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 • FBOP Program Statement (PS) 3420.11, Standards of Employee Conduct, dated 12/6/2013 • U.S. Department of Justice, Federal Bureau of Prisons, Sexually Abusive Behavior Prevention and Intervention Program, An Overview for Offenders, dated July 2018 • ELK Institution Supplement ELK 5324.12B Sexually Abusive Behavior Prevention and Intervention Program, September 20, 2022 • ELK Inmate Information Handbook, updated November 20, 2012 <p><u>Interviews with the following:</u></p> <ul style="list-style-type: none"> • National PREA Coordinator (NPC) • PREA Compliance Manager (PCM) <p>Through the interview process, the NPC confirmed the NPC is a full-time position dedicated solely to PREA compliance. The NPC reports sufficient time to manage PREA related responsibilities. Each of the 122 FBOP institutions has one PREA Compliance Manager (PCM).</p> <p>Through interviews with the agency NPC and the institution PCM, it was confirmed the PCM has the responsibility to ensure the complex’s compliance with the PREA standards and has the authority to address all PREA issues.</p> <p>During the interview process, the PCM reported sufficient time to complete all PREA responsibilities. The PCM is knowledgeable of the expectations and responsibilities of the position and is competent to fulfill them.</p> <p><u>Provision (a)</u></p> <p>The Pre-Audit Questionnaire (PAQ) indicates the facility has zero tolerance as it relates to all forms of sexual abuse or sexual harassment in the institution, as well as any contracts over which it has control. The PAQ states the policy outlines how the facility will implement prevention, detection and response to sexual abuse and sexual harassment. It further asserts the policy includes clear definitions of prohibited behaviors and approved sanctions for participation in those behaviors.</p>

The U.S. Department of Justice, Federal Bureau of Prisons, Sexually Abusive Behavior Prevention and Intervention Program, An Overview for Offenders, dated July 2018, p. 2, specifically asserts the zero-tolerance policy.

ELK Institution Supplement ELK 5324.12B Sexually Abusive Behavior Prevention and Intervention Program, September 20, 2022, p. 3, 5, a, outlines the zero-tolerance policy against sexual abuse and sexual harassment.

ELK Inmate Information Handbook updated November 20, 2012, pp. 19-22, addresses the FBOP zero-tolerance policy against sexual abuse and harassment. The handbook specifies that staff shall provide comprehensive education to inmates either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment, their rights to be free from retaliation for reporting such incidents, and regarding agency policies and incidents.

FBOP Program Statement (PS) 3420.11, Standards of Employee Conduct, dated 12/6/2013, pp. 6-7, indicates a zero-tolerance policy against sexual abuse, harassment, and sexual misconduct. Any sexual conduct, whether inmate-on-inmate or staff-on-inmate, whether consensual or coerced, is strictly prohibited. The policy is consistent with the PREA standards.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 13-14, section 115.11(b), specifically addresses the requirements of this provision. Additionally, it identifies the roles and responsibilities of the National PREA Coordinator (NPC), Regional PREA Coordinator (RPC) and Institutional PREA Compliance Manager (PCM) and relates directly to the implementation, management, and monitoring of the FBOP's compliance with PREA Standards, including collaboration with the various levels of management. The reviewed policy is consistent with the PREA Standards.

The NPC is an Executive level position as confirmed through a review of the agency organization chart. The NPC has regular contact with all FBOP facilities throughout the nation; as well as coordinates with the Privatization Management and Residential Reentry Management Branches to ensure contract facilities adhere to PREA standards. According to the FBOP Organizational Chart, the NPC reports to the Assistant Director, Reentry Services Division.

The NPC provides training to all new Associate Wardens (AW) as they are ordinarily the PCM for the institution. The NPC is a resource for the PCM's and interacts with them via email, telephone, and in-person. In 2019, a thorough four-hour training was developed. The NPC has provided and continues to provide this training at FBOP facilities.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 14, section 115.11(b), establishes,

identifies, and outlines the roles and responsibilities of the PCM, which includes the collaboration with various levels of institutional management. Further, it establishes and identifies the responsibilities and procedures for the PCM to coordinate the institutions' efforts to comply with PREA standards. Each of the reviewed policies is consistent with PREA standards outlines the agency's approach to detection, deterring and reporting sexual abuse and harassment.

The facility has one PCM. The PCM is an Associate Warden, Operations, who reports directly to the Warden, which was confirmed by a review of the institutional organizational chart.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard, which addresses zero-tolerance of sexual abuse and sexual harassment.

115.12

Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.

Interviews with the following:

- Agency Contract Administrator

Through the interview process, the Agency Contract Administrator indicated the following:

1. All contracts for confinement of inmates were modified in February 2013 to include PREA specific language. It was further indicated the FBOP is responsible for monitoring the compliance of all entities with which they contract to ensure PREA compliance.
2. All contracts for the confinement of inmates contain the following language: "The contractor shall develop policy and procedures for the establishment of a sexual abuse/assault program and comply with the Prison Rape Elimination Act of 2003 and the national standards to prevent, detect, and respond to prison rape as contained in 28 CFR Part 115, National Standards to Prevent, Detect, and Respond to Prison Rape; Final Rule dated June 20, 2012."
3. The policies and procedures of each contractor are reviewed by FBOP who ensure appropriate adherence to the national standards. Each entity is contractually required to notify the FBOP of any PREA allegation; as well as forward a copy of the allegation, investigation, and findings to FBOP oversight staff for review. FBOP oversight staff review any PREA allegation to ensure compliance with the PREA requirements. These reviews are documented in monitoring reports. Finally, FBOP quality assurance conducts annual reviews of each contractor's PREA allegations to determine contract compliance.

Provision (a)

The Pre-Audit Questionnaire (PAQ) revealed the FBOP requires all entities who contract with them for the confinement of inmates to adopt and adhere to PREA standards. All agency contracts for confinement of inmates contain PREA specific language, expectations, and requirements. The facility does not individually contract for the confinement of inmates.

The PAQ indicates the agency has entered into or renewed five contracts for the confinement of inmates with private entities or other government agencies on or after August 20, 2012, or since the last PREA audit, whichever is later.

Provision (b)

All contractors are required to obtain national PREA certification, with subsequent recertification every three years. Proof of this certification and recertification are submitted to the FBOP to ensure compliance.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard, which addresses contracting with other entities for the confinement of inmates.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- ELK Institution Supplement ELK 5324.12B Sexually Abusive Behavior Prevention and Intervention Program, September 20, 2022
- FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 15
- Institution Duty Officer Unannounced Institution Rounds Form
- FBOP Program Statement 3000.03, Human Resource Management Manual
- Warden Memorandum Procedural Memo for Unannounced PREA Rounds 115.13 (d)-1 dated October 6, 2022
- Warden Memorandum 115.13 (b) 1, dated October 6, 2022
- PCM Annual Assurance Memo: Staffing Plan and Video Monitoring System for Protection of Inmates from Sexual Abuse, dated September 20, 2022
- Minutes from the Salary/Work Force Utilization Committee held a meeting on October 28, 2021
- 2021 Annual PREA Staffing Reviews
- Staffing Plan
- 2021 Staffing Reports

Interviews with the following:

- Facility Head - Warden or Designee
- PREA Compliance Manager (PCM)
- National PREA Coordinator (NPC)
- Intermediate-or-Higher Level Facility Staff

Interviews with the PCM and other executive staff indicated random reviews of the staffing levels, how they affect the inmate programming, various classification counts, as well as any changes or modification to the video monitoring system are consistently conducted. Reviews of other concerns, such as the physical plant configuration, internal or external oversight bodies, inmate population configuration, and placement of supervisory staff, line-staff needs and any prevalence of substantiated or unsubstantiated incidents of sexual abuse are also consistently conducted. Additionally, each confirmed that during the quarterly Salary Workforce meetings, staffing plan compliance and any deviations from the staffing plan is a consistent and routine agenda item. The Auditor confirmed this when reviewing Salary Workforce meeting minutes.

There was one interview with intermediate or higher-level staff. This interview affirmed that staff are making unannounced rounds to all areas of the facility, with no

warning to staff. During random informal interviews and discussions with staff, it was confirmed that supervisors, the PCM, as well as the Operations Lieutenant, conduct unannounced tours of the facility and that warning staff is expressly prohibited.

Provision (a)

According to the PAQ the facility has a staffing plan, and it addresses each of the thirteen items listed in Provision (a).

FBOP Program Statement 5324.12, p. 15, indicates the Warden will assist in the development and will make his/her best effort to comply with the staffing plan. The plan will provide for adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. This section also requires that the PCM meet with the Warden at least annually to discuss the need for any adjustments that need to be made to the staffing plan, video monitoring systems or other monitoring techniques.

In addition, the facility staffing plan indicates it is the policy of the facility to ensure that all relieved posts are staffed at the times specified.

FBOP Program Statement 5324.12, p.16, dictates that at a minimum, the most recent Salary/Workforce Utilization Committee Meeting Minutes (which include a review of the staffing plan) are annually compiled by the Regional PREA Coordinator (RPC) by May 1 and submitted to the NPC by June 1.

FBOP Program Statement 3000.03, Human Resource Management Manual, Chapter 3, pp. 8-12, specifies the Warden will assist in the development and implementation of the facility- staffing plan based on PREA requirements and will make best efforts to comply with the staffing pattern. The policy requires the plan provide adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. Additional language in the policy requires the staffing analysis to include:

- Generally accepted detention and correctional practices
- Consideration of any judicial findings of inadequacy
- Any findings of inadequacy from any Federal investigative agency
- Any findings of inadequacy from internal or external oversight bodies
- All components of the facility's physical plant, including potential blind spots
- The composition of the inmate population
- The number and placement of supervisory staff
- Institutional programming and options for supervision of inmates
- Any applicable state or local laws, regulations, or standards; and
- The prevalence of substantiated or unsubstantiated incidents of sexual abuse and sexual harassment.

In addition, the Auditor reviewed copies of the 2021 annual PREA staffing report. The report was comprehensive and addressed each of the bullet items required according to Provision (a). Annually quality assurance audits are conducted to ensure compliance with the established staffing model. The staffing plan is predicated upon

an average daily inmate population of 2,048. The average daily number of inmates during the past twelve months was 1,679.

Provision (b)

The facility has established a minimum staffing requirement. In the event a mandatory post is vacant, the post is filled with overtime staff or staff redirected from non-mandatory posts. It is the Operations Lieutenant's responsibility to document all deviations from the staffing plan. On the PAQ, the facility reported there had been no deviations from the staffing plan in the past twelve months.

Staffing plan deviations are not problematic. The facility reports it is adequately staffed; staff morale is above average and no one who is assigned to a 24/7 post is allowed to leave that post until relieved by another staff member. In reviewing documentation, the Auditor did not find an occurrence of staffing plan deviation in the past twelve months.

Provision (c)

Policy requires the staffing plan review to be completed in consultation with the PCM and other executive staff at least annually. The Auditor was provided a copy of the Salary Workforce minutes where the staffing plan was reviewed. This review discussed the staffing plan, video monitoring and the resources needed to adhere to the staffing pattern.

Policy requires an annual internal audit of the staffing plan. This assessment is an extensive review of all areas of the facility to ensure adequate staffing levels exist where inmates may be present. The Salary Workforce annually addresses justification for the need for additional staff or modifications to the facility, to include the deployment of video monitoring equipment. The annual review of the staffing plan includes facility and department management level staff, which include the PCM, the Warden, Human Resource staff, as well as other institutional management staff. The Auditor reviewed different shift rosters and was able to verify that an assigned staff member covered each mandatory post.

The facility has a comprehensive camera system, with a fully staffed monitoring control room. The camera system has been well thought out, and strategically designed to optimize oversight of all aspects of the facility. Specially trained staff, who are assigned specifically to the monitoring control room, monitor camera and video surveillance. In addition to the camera and video system, the facility also uses security mirrors throughout the institution to enhance the level of safety and security for staff and inmates. There are 179 cameras covering multiple areas of the institution. This total includes 12 cameras per general housing unit and 16 cameras within the Special Housing Unit. The institution's video monitoring system is sufficient to help protect inmates from sexual abuse.

Provision (d)

Policy mandates that intermediate level or higher-level supervisors conduct and

document unannounced rounds on all shifts. These rounds are completed by the supervisory staff and documented on Institution Duty Officer Unannounced Institution Rounds form. The Auditor reviewed the Institution Duty Officer Unannounced Institution Rounds forms for 2021 and confirmed these unannounced rounds are being completed as required by this standard. The PCM indicated, while not documented, supervisors tour the units and areas regularly throughout the three shifts, talk to staff at all levels as well as inmates. During the three days, the Auditor was on-site; numerous supervisors were observed walking and working in various capacities throughout the facility. When interviewing inmates, it was confirmed the Operations Lieutenant, PCM, and other supervisory staff routinely walk around and through the institution and are visible and available to all inmates.

Additional unannounced rounds are conducted when the weekly fire/safety walk through is conducted. While these rounds are not meant to count as unannounced rounds, they are unannounced and are completed by intermediate or higher-level staff. These rounds are documented on the Weekly Fire/Safety Inspection form.

The Warden Memorandum Procedural Memo for Unannounced PREA Rounds, 115.13 (d)-1 dated October 6, 2022, states, the Institution Duty Officer (IDO) is responsible for conducting and documenting weekly unannounced PREA rounds with the intent of identifying and deterring sexual abuse and sexual harassment. At the end of the IDO's tour week, the IDO forwards the documentation to the Institution PREA Compliance Manager for retention.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard regarding Supervision and Monitoring, ensuring that the safety of staff and inmates is a priority.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ul style="list-style-type: none"> · Pre-Audit Questionnaire (PAQ) and supporting documentation provided · Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 16. <p>Observations during on-site review</p> <p>During the on-site tour, the Auditor did not observe any youthful inmates.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> · Facility Head - Warden · PREA Compliance Manager (PCM) <p>In interviews the Warden and the PCM confirmed the facility does not house youthful inmates.</p> <p>According to the PAQ, the facility does not house youthful inmates.</p> <p>Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 16, specifies the guidelines of how youthful inmates would be managed if they were in the facility.</p> <p><u>Provision (b)</u></p> <p>N/A</p> <p><u>Provision (c)</u></p> <p>N/A</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding youthful inmates.</p>

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12 Sexually Abusive Behavior Prevention and Intervention Program, dated June 4, 2015, pp. 17 - 19
- FBOP Program Statement 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas, dated June 4, 2015, pp. 2-5
- Sexually Abusive Behavior Prevention and Intervention Program 2021 Annual, ICT Training
- Warden Memorandum, PREA Standard §115.15(d) Limits to Cross-Gender Viewing and Searches, dated October 26, 2022
- Warden Memorandum, PREA Standard §115.15(e) Transgender or Intersex Searches/Physical Examinations, dated October 26, 2022
- FCI Elkton, FY2022, In-Person Annual Training

Observations made during on-site review

During the facility tour, when opposite-gender staff were observed entering a housing unit, a staff member made an announcement. The Auditor was also announced by facility staff when entering inmate housing and restroom areas as she was of opposite gender.

Interviews with the following:

- Random Staff
- Random Inmates
- Transgender Inmates

The random staff interviewed reported having the training specific to this and reported that cross-gender strip searches or cross-gender body cavity searches do not occur at this facility.

During the interviews with random staff, the interviewer asked under what circumstance would cross-gender searches occur. All staff questioned indicated that there were sufficient male staff members available to conduct any searches that needed to occur, and that male staff would be diverted to address this issue if needed.

The random inmates interviewed confirmed they had never been part of a cross-gender search.

The transgender inmates interviewed reported;

- they were provided an opportunity to shower privately.
- they had never been searched for the sole purpose of determining genital status.

Provision (a)

FBOP Program Statement 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas, dated June 4, 2015, p. 5, and FBOP Program Statement 5324.12 Sexually Abusive Behavior Prevention and Intervention Program, dated June 4, 2015, p.17, both address this standard. FBOP Program Statement 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas, dated June 4, 2015, p. 3, indicates a staff member of the same gender as the inmate shall make the search, except where circumstances are such that delay would constitute an immediate threat to the inmate, staff, others, or institution security. Cross-gender searches of inmates are only allowed in exigent circumstances.

FBOP Program Statement 5324.12 Sexually Abusive Behavior Prevention and Intervention Program, dated June 4, 2015, p.17, asserts the facility shall not conduct cross-gender strip searches or visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by a medical practitioner. The facility shall document all exigent circumstance cross-gender strip or visual body cavity searches. Each of the reviewed policies are consistent with the PREA standard and outlines the agency's approach to sexual abuse prevention and protection.

Warden Memorandum, PREA Standard §115.15(d) Limits to Cross-Gender Viewing and Searches, dated October 26, 2022, indicates there were zero cross-gender searching in the past twelve months.

Provision (b)

Staff were questioned about cross-gender search practices. When asked how the female staff would proceed if a male staff member was not available, each indicated there is always a male staff member on duty, who can be directed to the area to conduct the search. All staff recalled receiving training on opposite gender searches; however, each of them articulated that in all instances cross-gender searches are not conducted at the facility. All staff (both male and female) reported cross-gender strip searches or cross-gender body cavity searches do not occur at this facility.

Provision (c)

According to the PAQ, the facility reported there had not been any cross-gender searches of any kind, i.e., strip, visual or pat conducted in the past 12 months.

FBOP Program Statement 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas, dated June 4, 2015, pp. 4-5, indicates all cross-gender strip searches as well as all cross-gender body cavity searches must be documented. The reviewed policy is consistent with the PREA standard.

Provision (d)

According to the PAQ, the facility indicated they allowed inmates to shower, perform bodily functions, and change clothes without staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when viewing is incidental to routine cell checks. Further, the PAQ indicated opposite gender staff are required to announce their presence when entering an inmate-housing unit.

When staff were specifically asked would transgender or intersex inmates be able to shower privately, the answer was affirmative. When asked how this would be arranged, staff reported all showers throughout the complex are individual shower stalls and provide privacy to each inmate.

Each staff member further stated the transgender or intersex inmate would have the opportunity for input into the decision-making process of alternative shower times and the inmate's input would carry great weight in the decision-making process.

Provision (e)

FBOP Program Statement 5324.12 Sexually Abusive Behavior Prevention and Intervention Program, dated June 4, 2015, p.17, states that no staff member shall search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. The reviewed policy is consistent with PREA standards.

Each staff member questioned about transgender and intersex inmate search practices stated that no searches would ever be permitted for the sole purpose of identifying an inmate's genital status.

Warden Memorandum, PREA Standard §115.15(e) Transgender or Intersex Searches/ Physical Examinations, dated October 26, 2022, indicates the facility has not had any instances of searching or physically examining transgender or intersex inmate for the sole purpose of determining the inmate ' s genital status

Provision (f)

The Auditor reviewed the most recent PREA training documentation for facility staff. Training topics included appropriate search techniques, specifically cross-gender pat searches and searches of transgender and intersex inmates. The Auditor verified the list of staff receiving the training correlated to the existing facility staff listed on the staff roster. Participants signed an acknowledgment of training materials. Additional training documents provided direction to staff on proper documentation practices if cross-gender searches were conducted.

In response to the question of whether opposite gender announcements are made on housing units, out of the inmates interviewed, the majority report female staff announce their presence when entering the housing unit. All inmates affirmed opposite gender staff announce their presence before entering the bathroom.

When female staff were asked how they would proceed if a male staff member were

not available, each indicated there was never an instance when a male staff is not on duty who would be directed to the area to conduct the search to ensure cross-gender searches are not performed. All staff interviewed recalled receiving training on opposite gender searches; however, each of them articulated that in all instances female staff do not conduct cross- gender searches and will always defer to a male staff member to complete the search. During the facility tour, opposite gender staff were observed entering the housing units and announcements of their presence were made. Facility staff, when entering the inmate housing and restroom areas, announced the opposite gender Auditor.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding the limits to cross-gender viewing and searches.

115.16

Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Acquisitions Memorandum, Blanket Purchase Agreement - DJJ17-F-2742, LanguageLine Solutions, dated October 23, 2019

Observations of PREA poster locations during on-site tour of facility

During the tour, the Auditor observed the PREA posters prominently displayed in each housing unit, work area, hallways, as well as other areas throughout the facility in both English and Spanish. The Auditor was provided written documents, training materials, as well as PREA brochures, which are provided in both English and Spanish to the inmate population.

Interviews with the following:

- Warden
- Random Staff
- Inmates with disabilities or LEP

Through the interview process, the Warden shared that the facility has established procedures to provide inmates with disabilities or inmates who are Limited English Proficient (LEP), the opportunity to participate in PREA reporting process through several avenues such as, LanguageLine, staff interpreters, written correspondence, etc.

Random staff were interviewed, and all recalled the process of how to utilize LanguageLine Solutions for interpretation services. Many indicated in the event translation is required, they would try to find another staff member to provide translation and then contact the Operations Lieutenant before using LanguageLine Solutions.

The Auditor interviewed inmates with disabilities. Zero inmates reported feeling vulnerable due to their disability. All inmates indicated the facility provides information about sexual abuse and sexual harassment that you can understand, and they answered affirmatively. When each of the inmates were asked, do you understand your rights related to sexual abuse and how to report sexual abuse or harassment, they all responded in the affirmative.

Provision (a)

The PAQ, indicates the FBOP has established procedures to provide disabled inmates and limited English proficient inmates with equal opportunity to participate in and benefit from all aspects of the agency's effort to prevent, detect and respond to sexual abuse and sexual harassment.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 19-20, states the PCM shall reach out to local disabilities assistance offices to provide all inmates accessible education formats if an inmate has special needs (i.e., language barriers, visually impaired, deaf, limited reading skills or otherwise disabled), and not rely on inmate for this service.

The facility utilizes the LanguageLine Solutions. LanguageLine Solutions is an on-demand, over-the-phone language interpretation service. This service is available 7:00am to 10:00pm ET, seven (7) days a week, excluding government holidays. LanguageLine Solutions supports thirty-two different languages. When a translation service is needed, and LanguageLine Solutions is not available, the staff can use Google Translate. Google translate can be accessed via a computer with an attached microphone to address any translation needs for the inmates of the facility. Now, Google Translate supports 103 different languages, and is available 24 hours a day, 7 days a week.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 26, denotes numerous items relative to ensuring each inmate receives information in verbal and written form, and that all information regarding FBOP's PREA policy is understood by the inmate. Additionally, it dictates inmate PREA education information will include Prevention of sexual abuse and harassment, self-protection, methods of reporting, and treatment and counseling availability.

Provision (c)

The PAQ indicates in the past twelve months, there have been zero instances of where inmate interpreters, readers, or other types of inmate assistants have been used.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 20, addresses the prohibition of using other inmates for translation services.

FBOP requires that only professional interpreters or translation services, including sign language, are available to assist inmates in understanding PREA policy, how to report allegations, and/or participate in investigations of sexual misconduct. The policy states inmates are not authorized to use interpretation/translation services from other inmates, family members or friends for these purposes. The limited exception is when a delay in obtaining an effective interpreter could compromise the

inmate's safety, the performance of the first responder duties under §115.64 or the investigation of the inmate's allegations.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding inmates with disabilities and inmates who are limited English proficient.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor DiscussionDocumentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Personnel Records

Interviews with the following:

- Human Resource (HR) Staff

The Auditor interviewed the Human Resource (HR) staff concerning the hiring practices. HR staff indicated that the potential hire is required to fill out the personnel documents, which require the disclosure of the standard required items. The HR staff stated the FBOP takes a very proactive position with the PREA standards and have developed a comprehensive tracking system to ensure all required criminal background checks are completed for pre-hires, promotions, and five-year reviews.

The Auditor interviewed the HR staff concerning hiring practices. HR staff stated the FBOP requires background checks on all new hires and promotions at the time of the hire or promotion; as well as existing staff every five years.

The Auditor interviewed the HR staff who stated the agency has a centralized database, located in Grand Prairie, TX, which tracks the completion of all criminal background checks, and tracks the due dates of the five-year criminal background check.

Provision (a)

According to the PAQ the facility to have 327 total staff with thirteen new hires in the past twelve months. Further, they reported twenty-four contractors who have contact with inmates and twenty volunteers.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 20, declares that FBOP agency policy prohibits the hiring or promotion of an employee or contractor who may have contract with inmates who:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution
2. Has been convicted of engaging or attempting to engage in sexual activity in the community, facilitated by force, overt or implied threats of force, or coercion, or if the

victim did not consent or was unable to consent or refuse; or

3. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a) (2) of this section.

The Auditor reviewed fifty staff records, some of whom had been hired or promoted within the past twelve months. The Auditor was able to verify the records reviewed contained all items required by the standard, including PREA documentation and verification of the completed criminal background checks.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 20, states the agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist service of any contract, who may have contact with inmates.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 21, indicates before hiring a new employee or contractor, the FBOP shall: 1) conduct a criminal background record check, 2) make its best efforts to contact all prior institutional employers in regard to substantiated allegations of sexual abuse or any resignation during a period of sexual abuse investigation; 3) ask potential employees and contractors about previous misconduct described in Paragraph V, A, 4, a of this regulation; 4) Apprise potential employees and contractors that false information or material omissions regarding such misconduct shall be grounds for termination and that they have a continuing duty to disclose such conduct.

In the preceding twelve months there were thirteen persons hired who may have contact with inmates who had a criminal background check completed. The Auditor conducted a review of these thirteen personnel records and verified all the records contained the items required by the standard, including the PREA documentation and verification of the completed criminal background checks.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 21, indicates that before hiring a new employee or contractor, the FBOP shall conduct a criminal background records check.

On the PAQ, the facility reported there are twenty-four contractors who might have contact with inmates. Additionally, in the PAQ, the facility reported criminal background record checks were conducted and current on all twenty-four staff covered in the contracts. The facility provided documentation for review indicating these twenty-four criminal background checks are current for this reporting cycle.

Provision (e)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 21, requires the FBOP to conduct a criminal background record check every five years on all current employees and contractors.

The Auditor interviewed the HR staff who stated the agency has a centralized database, located in Grand Prairie, TX, that tracks the completion of all criminal background checks, and tracks the due dates of the five-year criminal background check.

Provision (f)

During the interview process, HR staff indicated that a condition of staff employment is that any arrest activity must be reported through the respective employees reporting structure. Additionally, any information on substantiated allegations of sexual abuse or sexual harassment involving a former employee must be provided upon request.

Provision (g)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 21, g, states that material omissions regarding such misconduct (as stated in this provision) shall be ground for termination and that they have a continuing duty to disclose such conduct.

Provision (h)

HR staff confirmed that unless prohibited by law, all information would be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee would be shared upon request from an institutional employer for whom such employee has applied for work.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding hiring and promotion decisions.

The Auditor would recommend a copy of the documentation of staff, contractors, and volunteers' responses to the questions in provision (a) of this standard be maintained at the facility, in addition to Grand Prairie, Texas, to facilitate future reviews. The questions are:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution
2. Has been convicted of engaging or attempting to engage in sexual activity in the community, facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
3. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a) (2) of this section.

<p>Pursuant to provision (f) of this standard, these questions should be asked and answered of applicants during interviews, prior to employment or promotion of staff members, prior to placement of contractors and volunteers. Likewise, they should be asked and answered during evaluations.</p>

115.18 Upgrades to facilities and technologies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015

Observations during on-site review

The Auditor conducted a comprehensive tour of institution. Since the last audit, there has not been any substantial expansions or additions to the facility.

Interviews with the following:

- Warden

During the interview process, the Warden indicated there is no plan at this time to expand their current camera coverage further.

During the interview process, the Warden expressed commitment to the camera monitoring program and indicated that having the cameras in place has created a sense of security for, staff and inmates, knowing that should an incident occur, an independent observation can be reviewed using the stored video.

Provision (a)

On the PAQ, the facility reported they have not acquired any new facilities or made substantial expansions or modifications of the existing facility since the last PREA audit. Per the PAQ, the facility has installed or updated the video monitoring system, electronic surveillance system or other technology since the last PREA audit.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 21, specifies that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facility, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.

The Warden reported any construction, renovation or modification would be done with PREA standards in mind. The Warden also reported there would be meetings held regarding any building or construction considerations and that safety and cameras, or other technologies would be discussed and considered at such meetings. During these meetings the executive staff would meet with all key supervisors and managers to discuss any pertinent issues, such as Data/Reporting issues, Grievances,

Disciplinary Reviews, Video Summary Reviews, Use of Force Incidents, Incidents of Sexual Abuse, as well as the analysis of key data such as overtime, leave time, morale, etc.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 22, indicates when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how technology may enhance the agency's ability to protect inmates from sexual abuse.

The facility camera coverage is monitored in a central control room. This central control room is staffed twenty-four hours a day, seven days a week. The control room has the capability of selecting any area and reviewing footage as needed.

The facility cameras are positioned normally within the dormitories with front, middle and rear coverage. A camera monitoring capability or a security mirror covers every area accessible by an inmate. The positions allow for privacy in and around areas of showers and restrooms.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding upgrades to facility and technology.

115.21

Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Staff Training Attendance Documentation, Forensic Medical Exams: An Overview for Victim Advocates (CPG-0234-BXX)
- Lesson Plan, Forensic Medical Exams: An Overview for Victim Advocates
- ONE Source First Responder Reference Guide, Sexual Assault Crisis Intervention
- DOJ/OIG PREA Series 1811 Criminal Investigators Special Training for Investigators (Special Agents, Assistant Special Agents in Charge, Special Agents in Charge)

Interviews with the following:

- Random Staff
- SAFE/SANE Staff
- PREA Compliance Manager (PCM)

The Auditor interviewed random staff about the rules of evidence, and their understanding of the process should an inmate report alleged sexual abuse. All staff interviewed were able to articulate the basic preservation of evidence component of both victim and abuser. They were also able to explain their responsibilities up to the point when they transfer responsibility to either investigative or medical staff.

Through the interview process the SANE personnel indicated the SANE exam includes a forensic exam, prophylaxis for pregnancy and sexually transmitted diseases, photographic documentation, referrals for appropriate medical and psychological follow-up, as well as support and participation in legal proceedings. Additionally, an advocate is provided for medical accompaniment for all SANE examinations. SANE personnel confirmed the forensic exams are free to the inmate. All inmates are transported to the hospital for forensic exams.

During the interview with the PCM, it was reported in the past twelve months there have been zero inmates transported for SAFE/SANE services.

During the interview with the PCM, it was indicated victim advocacy services are offered through contract and are built into the forensic exam process. During the examination, the inmate meets the victim advocate and arrangements are made to provide any necessary and/or requested counseling services. Follow-up counseling is coordinated through the advocate, in collaboration with mental health services.

Provision (a)

On the PAQ, the facility reported being responsible for conducting administrative investigations. The Federal Bureau of Investigation (FBI) and Office of the Inspector General (OIG) are responsible for conducting criminal investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct. The PCM provides investigative assistance for those inmate-on-inmate sexual harassment administrative cases.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 22, states to the extent the agency is responsible for investigating allegation of sexual abuse, the agency shall follow a uniform evidence protocol that maximize the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 43, states the policy of the FBOP is to conduct all investigations in a fair and impartial manner, maintain confidentiality in all investigations, and protect the constitutional rights of all individuals subjected to investigation.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 22, indicates the protocol shall be developmentally appropriate for youth where applicable, and as appropriate shall be adapted from or otherwise based on the most recent edition of the US 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.

The facility does not house youthful inmates.

Provision (c)

On the PAQ, it was reported all treatment services are provided to the victim without financial cost.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 22, indicated treatment services shall be provided to the victim without financial cost and regardless of if the victim names the abuser or cooperates with the investigation.

All forensic medical exams are conducted by SANE personnel at St. Elizabeth Youngstown Hospital. A victim advocate is offered to each inmate prior to the forensic examination being conducted.

Provision (d)

As stated in Provision (c), a victim advocate is provided during the forensic medical

examination.

Information received regarding the allegations of sexual abuse indicate in the past twelve-months there had been a total of one allegation made. The allegation was staff-on-inmate sexual abuse. The female staff member resigned and the inmate was transferred. It was investigated administratively and found to be unsubstantiated. It was referred for prosecutorial review.

In the past twelve months there were zero SAFE/SANE examinations.

Provision (e)

As stated in Provision (c) prior to the examination, the inmate is offered a victim advocate. The victim advocate provides emotional support, crisis intervention, information, and referrals as necessary and/or requested.

Provision (f)

As reported in Provision (a) the facility is responsible for conducting administrative investigations. The Federal Bureau of Investigation (FBI) and Office of the Inspector General (OIG) are responsible for conducting criminal investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct.

Provision (g)

Auditor is not required to audit this provision.

Provision (h)

As reported in Provision (d) victim advocacy services are offered through contract and are built into the forensic exam process.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding evidence protocol and forensic medical examinations.

115.22

Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP), Program Statement 5508.02, Hostage Situations or Criminal Actions Requiring FBI Presence, dated December 12, 1996
- FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 24-25, 45
- FBOP Program Statement (PS) 1350.01, Criminal Matter Referrals, dated 1/11/96

Interviews with:

- Random Staff
- Investigative Staff

All random staff interviewed knew their responsibility to report any suspicion, or knowledge of an allegation of sexual abuse and sexual harassment. Each reported they were required to make such a report immediately after becoming aware of it. They further stated they are to report to SIS, who in turn decides if the allegation is administrative or criminal.

During the interview process, investigative staff indicated all allegations are investigated. Administrative allegations are investigated by the Special Investigative Services (SIS). The ones which are criminal in nature are investigated by FBI and/or OIG, then referred to the United States Attorney's Office in the appropriate jurisdiction for prosecution.

Provision (a)

The agency and facility refer all criminal investigations to the Federal Bureau of Investigation (FBI) or the Office of the Inspector General (OIG). The DOJ/OIG PREA Series 1811 Criminal Investigators Special Training for Investigators (Special Agents, Assistant Special Agents in Charge, Special Agents in Charge) confirms the investigators have been provided special training per PREA guidelines.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 25, states the FBOP shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment.

FBOP Program Statement (PS) 1350.01, Criminal Matter Referrals, dated 1/11/96, p.1, states all criminal matters that occur in an institution or on institution grounds, or that

involve Bureau of Prisons staff, will be documented, and tracked. Additionally, each criminal matter will be formally considered for referral to an appropriate law enforcement agency, which in the case of PREA is the FBI.

FBOP Program Statement (PS) 1350.01, Criminal Matter Referrals, dated 1/11/96, p. 2, states the Special Investigative Services (SIS) shall present each criminal matter to the Warden to determine whether it is to be referred to the appropriate Federal, state, or local law enforcement agency. The SIS or the Warden may consult with the institution legal staff regarding the criminal matter prior to the referral.

The Auditor reviewed documentation that indicated there was one sexual abuse allegation received during the previous twelve months. The allegation was staff-on-inmate sexual abuse. The female staff member resigned and the inmate was transferred. It was investigated administratively and found to be unsubstantiated. It was referred for prosecutorial review.

Provision (b)

The policies regarding the FBOP and facility's obligation to thoroughly investigate all matters relative to Sexual Abuse and Sexual Harassment are provided in Provision (a).

FBOP Program Statement 5508.02, Hostage Situations or Criminal Actions Requiring FBI Presence, dated December 12, 1996, indicates FBI has investigative responsibilities at FBOP facilities under T18, U.S.C., Sections 1791 and 1792 (Irregularities in Federal Penal Institutions).

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 45, h, states substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 45-46, states following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. All notifications to inmates are made by the Special Investigative Services Lieutenant.

The facility ensures all allegations are either followed up through the administrative or criminal investigation process. The policy and processes are published on the agency website, as were verified by the Auditor.

Provision (c)

As stated in Provision (a) the agency and facility refer all administrative investigations to SIS and all criminal investigations to the FBI and/or OIG.

As stated previously, FBOP Program Statement (PS) 1350.01, Criminal Matter Referrals, dated 1/11/96, outlines how to refer criminal matters, as well as the responsibilities of those investigating the allegations.

Provision (d)

Auditor is not required to audit this provision.

Provision (e)

Auditor is not required to audit this provision.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined the facility meets every provision of the standard, which addresses policies to ensure referral of allegations for investigations.

115.31 Employee training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015.
- Training Curricula, Sexually Abusive Behavior Prevention and Intervention Program, 2020
- PREA Training Acknowledgements, 2020

Interviews with the following:

- Random Staff

Each of the random staff interviewed recalled attending the initial PREA training when they were hired or when PREA went into effect. All staff interviewed confirmed they receive annual PREA training, as well as additional in-service training.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 24-25, specifies that all employees will be trained in a minimum of:

1. Zero-tolerance policy
2. How to fulfill responsibilities for sexual abuse and sexual harassment prevention, detection, reporting and response
3. Inmate's right to be free from sexual abuse and sexual harassment
4. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
5. The dynamics of sexual abuse and sexual harassment in confinement
6. Common reactions of sexual abuse and sexual harassment victims
7. How to detect and respond to signs of threatened or actual sexual abuse
8. How to avoid inappropriate relationships with inmates
9. How to communicate effectively with LGBTI and gender non-conforming inmates
10. How to comply with relevant mandatory reporting laws.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 25, indicates all employees will be trained annually with a refresher course every two years. New employees will be trained prior to having contact with inmates.

The PREA Coordinator organizes PREA training for new and current employees. Training will occur in Introduction to Correctional Techniques (ICT) and Annual Training (AT). All non-specialized staff shall receive training to include, but not limited to, the prevention, detection, response, and reporting of allegations of inmate sexual abuse, sexual harassment, and custodial sexual misconduct. Such training shall encompass all required areas employees need-to-know to ensure compliance with PREA standard requirements. Employee instruction shall be accomplished during initial training, annual in-service training, specialized training, and additional training as needed. Employee training shall be documented to denote employee understanding of material and verified through employee signature and refresher trainings shall be accomplished at least every two years.

The facility's curriculum and training materials were reviewed by the Auditor. The core training materials contain all ten of the elements required by this provision and outlined in Provision (a). Each of the elements is covered in detail in the training and have incorporated numbered training elements to facilitate retention of the required elements. The level or complexity of the training will depend on the employee's classification with some specialized training curriculum depending on the employee's job responsibilities.

The Auditor reviewed a total of 327 staff training documentations, conducted on seasoned staff, as well as staff who were hired within the past twelve months. Each reviewed record contained all relevant documentation to reflect the staff had met their initial PREA requirements. In addition, the Auditor also reviewed the sign-in sheets for PREA training for the past twelve months which confirmed by staff signatures, each of the employees at the facility had acknowledged receiving the PREA training.

Provision (b)

The policy regarding the FBOP's and facility's responsibility to provide training and education regarding sexual abuse and sexual harassment are provided in Provision (a).

The training provided by the FBOP, addresses both male and female issues. However, the facility training has been tailored specifically to the male inmate population. The Auditor reviewed the training materials utilized for the staff. The training materials are consistent with this PREA standard. If an employee is reassigned from a facility that houses a different population composition, that employee is retrained or provided refresher training for the population make-up of the new facility prior to being placed in contact with the inmate population.

As stated in Provision (a), the Auditor reviewed the sign-in sheets for the training that occurred at the facility, verifying attendance of staff.

Provision (c)

Of the 327 staff presently assigned to the facility, the Auditor reviewed documentation that reflected all 327 or 100% of the staff have received the PREA

training in the past twelve months. The facility also provides additional PREA training annually, as well as shift trainings, staff meetings and posters. The staff also receive refresher training every two years.

Provision (d)

PREA training requirements mandate attendance at all PREA required training to be documented through employee signature, acknowledging the training they have received. In some instances, employees are required to complete an Acknowledgement of Receipt of Training upon completion of the training. A copy of these receipts were observed in every record reviewed by the Auditor. The receipts contained various dates which reflected separate training sessions.

In instances where a receipt of training material was not required, staff would sign-in on a training sheet, verifying their attendance at the required training. The Auditor received copies of each training session for the past twelve months, reflecting training completed by staff.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies regarding employee training.

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Training Curriculum for Volunteers and Contractors

Interviews with the following:

- Contractors who have contact with inmates

The Auditor conducted one interview with contract staff. The contractor recalled having PREA training and recalled the level of training was targeted to specific roles and responsibilities in the facility. When questioned about knowledge of PREA, the contract staff easily verbalized what PREA was and more importantly, what their role or responsibility was in the event they are confronted with a situation of sexual abuse or sexual harassment. The contractor verbally demonstrated to the Auditor a comprehensive and complete understanding of the agency's zero-tolerance policy and how to address any instance when an inmate reports a PREA specific issue.

Volunteer programs have been suspended due to COVID-19 protocols. Therefore, no volunteer was interviewed.

Provision (a)

The curriculum and training materials were reviewed by the Auditor. The core training materials contain all ten of the elements required for this provision. Each of the elements is covered in detail in the training and have incorporated numbered training elements to facilitate retention of the required elements. The level or complexity of the training will depend on the responsibilities and role of the contractor or volunteer.

The Auditor reviewed documentation indicating that twenty-four contractors or 100%, have received PREA training in the past twelve months. The facility has twenty approved volunteers to enter the facility; however, as volunteer programming has been suspended since March 2020 due to the COVID-19 pandemic protocols, no volunteers were trained in the past twelve months. When asked, the Warden confirmed all volunteers would participate in training before being allowed to return to the volunteer program.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 26, indicates the FBOP will ensure 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. The level and type of training will be based on the services they provide and level of contact with the inmates. However, all volunteers and contractors shall at a minimum be trained in the following:

1. Zero-tolerance policy
2. How to report sexual abuse or sexual harassment

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 26, further states verification of all training provided and the individuals understanding of that training shall be documented by signature and maintained in each respective individual's record.

Provision (c)

As indicated in Provision (b) copies of the acknowledgment page from the PREA training is retained in each volunteer and contractor's file. The Auditor reviewed the sign-in sheets from the PREA training sessions for the past twelve months. Each sign-in sheet reflected acknowledgment signatures from contractors for the PREA training they received. Again, volunteers have not been trained in the past year; as volunteer programming has been suspended since March 2020 due to the COVID-19 pandemic protocols.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies regarding volunteer and contractor training.

115.33

Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5290.14,
- Admission and Orientation Program, dated 4/3/2003
- FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- BP-A0518 CDFRM, Institution A&O Program Checklist
- BP-A0597 CDFRM, Unit A&O Program Checklist
- Acquisitions Memorandum, Blanket Purchase Agreement - DJJ17-F-2742, LanguageLine Solutions, dated October 23, 2019
- PREA Posters
- Miscellaneous Training Materials

Observations during on-site review

The Auditor observed inmate orientation materials, as well as the PREA Posters during the on-site tour of the facility. The Auditor reviewed written materials in both English and Spanish.

Interviews with the following:

- Intake Staff
- Random Inmates

During interviews, the intake staff confirmed inmates are provided an A&O Handbook upon arrival. The acknowledgement form is retained in the inmate file after inmate signage.

During interviews with intake staff, they revealed upon arrival at the facility inmates are given orientation materials, including PREA related materials, before being assigned to a housing unit. This is a requirement for all inmates, whether they are a new intake or a transfer from another facility.

Through the interview process, intake staff indicated inmates receive their PREA training immediately upon arrival, prior to their unit assignment. They reported the inmates are not allowed to leave the intake area until they have completed the PREA orientation and submitted to a urinalysis test. After this, the inmate will be assigned a housing unit and bed and escorted to their assigned area.

During the interviews with inmates, all reported receiving written PREA materials, an A&O Handbook and information about the facility's zero-tolerance policy and ways to report.

During interviews with inmates, each briefly outlined what they learned during PREA training. Each inmate responded with similar answers. The answers were generally: zero-tolerance for sexual abuse or harassment, to dial the PREA Hotline or use the computer to make a report and call the number on the posters around the facility.

In interviews several inmates reported the PCM checked with them formally and informally about PREA issues and practices. Focusing on their welfare and adjustment.

Provision (a)

FBOP Program Statement (PS) 5290.14, Admission and Orientation Program, dated 4/3/2003, p. 10, g, indicates staff must document the inmate has received a copy of the institution's inmate handouts and has completed the institution's Admission & Orientation (A&O) program. Staff will have the inmate sign and date a copy of this document and the original is placed in the Inmate's Central File. Completion of the A&O programming is documented both the Institution A&O Program Checklist Form (BP-A0518) and the Unit A&O Program Checklist Form (BP-A0597). Additionally, documentation that the inmate received orientation information during the Intake Screening process is noted on the Intake Screening Form.

The Auditor received a copy of BP-A0518 CDFRM, Institution A&O Program Checklist, which is completed with each inmate up on arrival. Number 10 on the checklist is Sexual Abuse/Assault Prevention and Intervention. Beside that is a place for staff initials and the date. At the bottom of the form is a line that states "I have attended all classes of the A&O Program as listed above. Signature of Inmate." The inmate signs and dates this form upon completion of the A&O Program. This signed form becomes part of the Inmate Central File. Of the fifty inmate records reviewed; signed, and dated documentation of PREA education through A&O was retained in each one.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 26, indicates during the intake process inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

Each housing unit has multiple telephones designated for inmate use. Using any of these telephones, an inmate can call the PREA hotline to report an incident of sexual abuse or sexual harassment. The call is free of charge and confidential. The Auditor was able to confirm this during the on-site tour.

Each housing unit has multiple computers designated for inmate use. Using any of these computers, an inmate can file an electronic report of incident of sexual abuse or sexual harassment. Usage of the computers is free of charge and confidential. The Auditor was able to confirm this during the on-site tour.

The Auditor conducted a review of fifty inmate records and the signed PREA acknowledgment document was in each one.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 27, specifies within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and incidents.

Per the PAQ, during the past twelve months there were 1,317 inmates whose length of stay at the facility was more than thirty days. The PAQ indicated these inmates were provided the PREA information which included their right to be free from sexual abuse, as well as the policies and procedures for reporting. The PAQ reflects 100% of the inmates admitted to their facility in the past twelve months received the mandated information.

Provision (c)

As indicated in Provision (b) 100% of inmates who entered the facility during the past twelve-month period received the required PREA training. At the time of PREA implementation, all inmates incarcerated were required to attend PREA training. Inmates arriving after implementation received their training at intake. This intake training, is facilitated through staff going over material and answering any questions the inmate may have.

Upon arrival, the inmate is provided an Admission and Orientation Handbook and goes through the A&O process. At the end of the A&O process is a question-and-answer period to reinforce retention of the information presented.

Verification of the training is retained in the Inmate Central File. The Auditor reviewed a copy of this documented verification.

As indicated in Provision (b) the intake staff provide the PREA information immediately upon arrival into the facility.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 27, requires the agency to provide all inmates accessible educational formats if an inmate has special needs (language barriers, visually impaired, deaf, limited reading skills, or otherwise disabled), not relying on inmates for this service.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 28, indicates that in addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, handbooks, or other written formats.

The various training elements provided to the inmate population range from PREA

documents in both English and Spanish, PREA posters in both English and Spanish, to staff members who are fluent in Spanish. The facility also uses the LanguageLine Solutions when an interpreter is not available.

LanguageLine Solutions is an on-demand, over-the-phone language interpretation service. This service is available 7:00am to 10:00pm ET, seven days a week, excluding government holidays. The LanguageLine Solutions supports thirty-two different languages. Anytime a translation service is needed, and LanguageLine Solutions is not available, the staff can use the computer program Google Translate. At the present time, Google Translate supports 103 different languages, and is available 24 hours a day, 7 days a week, free of charge.

If an inmate has a disability not covered under the training elements established by the facility, the Local Disability Assistance Office steps in to ensure each inmate is able to understand and retain the PREA materials to a comfort level of comprehension.

Provision (e)

As stated in previous provisions, all inmates must sign the Institution Admission and Orientation Program Checklist Form, once they have completed A&O. A copy of the acknowledgment is retained in the Inmate Central File as documentation.

As stated in provision (a), the Auditor conducted a review of fifty inmate records and the signed PREA acknowledgment document was in each one.

Provision (f)

Using varying formats, the inmate population receives essential information in user friendly, comprehensible ways. The Inmate Admission and Orientation Handbook is an excellent tool which specifically lays out the prevention of sexual violence, zero-tolerance policy and includes multiple methods inmates can seek assistance regarding sexual violence.

The facility has a variety of PREA posters, in both English and Spanish. These posters are different throughout the facility as not to become easy to overlook. During the on-site, the Auditor observed these posters in every room throughout the facility.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard for inmate education.

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- DOJ/OIG PREA Series 1811 Criminal Investigators Special Training for Investigators (Special Agents, Assistant Special Agents in Charge, Special Agents in Charge)
- Training records, Investigative Intelligence – BOP (CSV-0600-BXX)
- SIS/PREA National Video Conference Agenda
- SIS/SIA PREA Instructor Guide

Interviews with the following:

- Investigative Staff

During an interview with investigative staff, the Auditor was able to confirm that all training requirements have been met.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 28, indicates that additional training related to investigators roles includes, but is not limited to:

- interviewing Sexual Abuse Victims
- Proper Use of Miranda and Garrity Warnings
- Conducting Sexual Abuse Investigations, including the collection of evidence in a confinement setting
- Criteria and evidence required to substantiate a case for administrative action
- Criteria and evidence required to substantiate a case for prosecutorial referral

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 28, further dictates that all training must be documented and verified through employee signature and must be retained by the agency.

The DOJ/OIG PREA Series 1811 Criminal Investigators Special Training for Investigators (Special Agents, Assistant Special Agents in Charge, Special Agents in Charge) confirms the investigators have been provided special training per PREA guidelines.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 28, mandates investigators and other FBOP employees with PREA related responsibilities to receive additional training related to their roles to include, but not limited to:

- Interviewing Sexual Abuse Victims
- Proper Use of Miranda and Garrity Warnings
- Conducting Sexual Abuse Investigations, including the collection of evidence in a confinement setting
- Criteria and evidence required to substantiate a case for administrative action
- Criteria and evidence required to substantiate a case for prosecutorial referral

The Auditor was allowed to view the US Department of Justice, Bureau of Prisons, National Institute of Corrections (NIC) training entitled "Sexual Abuse and the Initial Responder." There are currently five chapters provided in this training course:

1. Course Introduction
2. PREA Investigations
3. Collaborating with Victims
4. Interviewing Techniques
5. Institutional Culture and Investigations

Through a review of training records and an interview with investigative staff, the Auditor was able to confirm that all training requirements have been met.

Provision (c)

As outlined previously in Provision (a) & (b) FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 28-29, address this provision.

The FBOP currently works with the FBI to conduct criminal investigation nationwide. According to the PAQ, the facility has four investigators who conduct administrative investigations on the complex. The Auditor reviewed completed training records for each of the SIS/SIA Investigators.

Provision (d)

The Auditor is not required to audit this provision.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined the facility meets every provision of the standard which addresses policies regarding specialized training: investigations.

115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Staff Course Completion Documentation, PREA for Medical and Mental Health Care - BOP (CPG-0233-BXX)

Interviews with the following:

- Medical and Mental Health Staff

Through interviews with medical and mental health staff and a review of training documents by the Auditor, it was confirmed each of the assigned staff members have attended the required training and meet all training requirements.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 28, dictates that all Medical and Mental Health employees, shall receive additional training to include, but is not limited to:

- How to detect and assess signs of sexual abuse and harassment.
- How to preserve physical evidence of sexual abuse.
- How to respond effectively and professionally to victims of sexual abuse and harassment.
- How and to whom to report allegations or suspicions of sexual abuse and harassment

A review of the provided lesson plan/training materials demonstrate compliance with this training requirement.

Currently there are thirty medical and mental health staff assigned to the facility. Through staff interview and review of training documents by the Auditor, it was confirmed each of the assigned staff members have attended the required training and meet all training requirements.

Provision (b)

N/A - All medical staff are prohibited by procedure from performing forensic examination on sexual abuse victims.

Provision (c)

As previously indicated, through staff interview and a review of the training documents by the Auditor, each of the assigned staff members have attended the required training and meet all training requirements. All training documentation is retained in the employee file, as required.

Provision (d)

The Auditor reviewed sign-in sheets and training materials that reflect the general PREA training that is mandated for FBOP employees, contractors and volunteers outlined in policy and PREA standards. The sign-in sheets confirm, in addition to specialized training, the contracted and direct hire medical staff received the general PREA training mandated for all FBOP employees.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined the facility meets every provision of the standard, which addresses policies regarding specialized training: medical and mental healthcare.

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- FBOP Program Statement 5290.15, Intake Screening, dated March 30, 2009
- FBOP Intake Screening Form
- FBOP Psychology Services Risk of Sexual Abusiveness Form, Attachment A: PREA Intake Objective Screening Instrument

Observations during the on-site

During the on-site audit review, the Auditor discussed processes with staff responsible for risk screening.

Interview with the following:

- Random Inmates
- Staff Responsible for Risk Screening
- PREA Compliance Manager (PCM)

The inmates indicated they recalled being asked questions relative to their concern about sexual abuse and if they felt like they were going to be harmed or harm themselves.

Further, the inmates indicated they were being asked questions specific to previous sexual abuse & harassment within three days of their arrival at the facility. A review of inmate records revealed all records reviewed had documentation been asked the questions on the day they arrived.

The inmates interviewed, all recalled being asked questions relative to this standard. Most indicated they recalled being interviewed within a couple weeks of arrival. A review of the records revealed all fifty inmates had been reassessed within thirty days.

Through the interview process, staff who are responsible for risk assessments indicated the inmate is initially assessed for risk within the first 72 hours they are in the facility. The inmate is subsequently reassessed within the first thirty days in the facility.

The Auditor interviewed the PCM regarding who can specifically access the screening information collected during intake and screenings, and was informed that Medical Staff, Mental Health Staff, Staff Responsible for Risk Screening, Classification Staff

and the PCM have access.

Provision (a)

FBOP Program Statement 5290.15, Intake Screening, dated March 30, 2009, pp. 2-4, section 7, requires all FBOP facilities to the following intake procedures when processing all inmates into the facility: Upon arrival see all inmates for a social interview, medical review, and assessment for risk of victimization or abusiveness prior to release to general population. Further, all inmates, at initial intake and upon transfer to another facility, shall be screened for potential risk of sexual vulnerability, potential risk of sexual aggression and self-injurious behavior and/or suicidal ideation within 72 hours of arrival. Inmates who surpass the threshold on the screening form are referred to Psychology Services for an additional assessment regarding their level of risk, environmental considerations, and treatment needs.

A review of inmate records revealed all inmates whose records had been reviewed, had been asked the questions on the day they arrived.

Provision (b)

As stated in provision (a), according to the listed policies all inmates must be screened within seventy-two hours of arrival.

The Auditor reviewed the PAQ which indicated in the past twelve months, 1,403 (100%) inmates were screened for the risk of sexual victimization or sexual abusiveness within seventy-two hours of their entry into the facility.

The Auditor reviewed fifty inmate records to ensure they were screened upon arrival. All fifty records had verification that the initial screening had occurred within 72 hours of arrival.

As stated previously, the Auditor was able to question the staff responsible for screening about the required questions. The staff responsible for screening were very helpful and replied that all the PREA related questions are asked during initial intake and ongoing classification screenings.

Provision (c)

The Auditor reviewed copies of several intake forms and screening assessments from the classification staff, which were documented on the BOP SENTRY Intake Screening Form, Psychology Services Risk of Sexual Abusiveness Form, and Attachment A: PREA Intake Objective Screening Instrument. An assessment that provides the intake and classification staff with an independently developed, validated and objective assessment is used for screening assessments, as outline in the following paragraph.

FBOP Program Statement 5290.15, Intake Screening, dated March 30, 2009, pp. 2-4, section 7, requires all inmates to be seen upon arrival for a social interview, medical review, and assessment of risk for victimization or abusiveness prior to release to general population.

FBOP Program Statement 5324.12, pp.29-30, states all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.

Staff members who conduct intake screenings utilize Attachment A: PREA Intake Objective Screening Instrument for guidance in conducting an initial assessment of an inmate's risk of victimization and risk of abusiveness. Inmates who surpass the threshold on the screening form are referred to mental health staff for an additional assessment regarding their level of risk, environmental considerations, and treatment needs. The inmate is reassessed within thirty days, after the initial 72 hours assessment.

The Auditor was able to verify compliance with this provision through the review of fifty inmate records, reflecting copies of the required assessments. A review of the Psychology Services Risk of Sexual Abusiveness form indicates the instrument is weighted and scored based upon responses to specific questions required in the Standard and Provision.

As stated in (a), the Auditor was able to meet classification staff who were able to discuss the intake screening and classification process, which included an overview of the Psychology Services Risk of Sexual Abusiveness form as well as the BOP Intake Screening Form.

Provision (d)

The Auditor reviewed the Attachment A: PREA Intake Objective Screening Instrument and the BOP Psychology Services Risk of Sexual Victimization form and compared the questions with the requirements of Provision (d). All items required for Provision (d) have been included on the screening instruments. The included items are:

- Whether the inmate has a mental, physical, or developmental disability
- The age of the inmate
- The physical build of the inmate
- Whether the inmate was previously incarcerated
- Whether the inmate's criminal history is exclusively nonviolent
- Whether the inmate has prior convictions for sex offenses against an adult or child
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender non-conforming.
- Whether the inmate has previously experienced sexual victimization
- The inmate's own perception of vulnerability.
- Whether the inmate is detained solely for civil immigration purposes.

Provision (e)

The Auditor reviewed the Attachment A: PREA Intake Objective Screening Instrument and compared the questions with the requirements for Provision (e). All items required for Provision (e) have been included in the screening instrument, which

addresses Possible Sexual Predatory Risk Factors.

As stated in (a), the Auditor was able to discuss the screening process with staff, and interview classification staff who were able to walk the Auditor through the intake screening and classification process.

Provision (f)

The Auditor reviewed the PAQ which indicated that within the past twelve months, 1,317 (100%) inmates have been assessed for the risk of victimization or risk of abusiveness of other inmates within thirty days of their entry into the facility. All were reassessed within thirty days of their arrival.

Out of the fifty records which were reviewed by the auditor, forty-nine had been reassessed within thirty days. The reassessment of the lone outlier was completed as soon as he was released COVID-19 quarantine. These finished screening documents were completed by different staff, with each instrument being finalized consistent with the standard.

Provision (g)

As stated in (a) the Auditor was able to speak with classification staff who were able to discuss the intake screening and classification process. Classification staff indicated they monitor the inmate population, and reassess when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that may have bearing on the inmate's risk of victimization or abusiveness. They added that transgender inmates are reassessed every 6 months.

Provision (h)

FBOP Program Statement 5324.12, p. 32, section (h), indicates inmates are not to be disciplined for refusing to respond or electing not to disclose complete information regarding this provision. These policies specifically state if an inmate refuses to respond or elects not to disclose information that applies only to questions about disabilities; Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) status; gender nonconformance; previous sexual victimization; and the inmate's self-perception of vulnerability, he/she may not be disciplined.

Staff responsible for risk screening indicated they do not discipline any inmate for their refusal to answer these questions during an assessment, they indicated they would explain the reason behind the question and attempt to solicit a response. However, no disciplinary action would be taken if the inmate chose not to respond.

Provision (i)

FBOP Program Statement 5324.12, p. 32, section (i), indicates information related to sexual victimization or abusiveness, including the information entered the comment section of the Intake Screening Form, is limited to a need-to-know basis for staff, only for the purpose of treatment and security and management decisions, such as housing and cell assignments, as well as work, education, and programming

assignments.

As stated in (a), the Auditor interviewed classification staff. The classification staff indicated access to the inmate's classification information is secured, with controlled access by classification staff.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard which addresses Screening for Risk of Sexual Victimization and Abusiveness.

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- BOP Inmate Screening Form
- Inmate Records

Interview with the following:

- National PREA Coordinator (NPC)
- PREA Compliance Manager (PCM)
- Staff Responsible for Risk Screening
- Random Staff
- Transgender Inmates

The interview notes of the NPC indicated:

- according to FBOP policy, the gender identification of each inmate is initially determined by their sex assignment at birth; however, from that point forward every inmate is individually assessed and classified to ensure the safety of each inmate, as well as the safety of the inmate population.
- that neither the agency nor the facility or are under any consent decree, legal settlement, or legal judgment requiring the establishment of a dedicated facility, unit, or wing for lesbian, gay, bisexual, transgender, or intersex (LGBTI) inmates.

Through the interview process, the PCM indicated:

- transgender or intersex inmate’s views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. Furthermore, regular classification reassessments are conducted a minimum of every six (6) months, or if the inmate is involved in an incident of a sexual nature.
- specified the transgender or intersex inmate’s views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. These inmates are interviewed further to determine enemies and potential or perceived threats. Housing placement and programming assignments are based on this information.
- each assessment completed by staff is factored into the placement and

programming of each inmate.

- the inmate's risk levels, housing and program assignments are guided with the use of these various assessments ensuring that every inmate, especially those at high risk of being sexually victimized, are separated from those at high risk of being sexually abusive.
- the transgender or intersex inmates view of their own safety is taken into serious consideration when determining housing placements and programming assignments.
- because of the assessments that are utilized, each inmate is evaluated individually.
- regular classification reassessments are conducted a minimum of every six (6) months, or if the inmate is involved in an incident of a sexual nature.
- that all LGBTI inmates are housed within the general population unless specific issues are present and only then the appropriate staff will meet with the inmate and address the concerns.

Through the interview process, staff who are responsible for risk screening indicated:

- that because the assessment procedures being utilized, each inmate is individually evaluated. Staff not only use the assessment procedures which are in place, additional consideration is given to the discussions with each individual inmate when making classification and housing decisions.
- the transgender or intersex inmate's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. These inmates are interviewed further to determine enemies and potential or perceived threats. Housing placement and programming assignments are based on this information.
- the transgender or intersex inmate's views of their own safety is given serious consideration when providing showering options. In addition, they clarified, transgender or intersex inmates would be able to shower separately from other inmates by utilizing alternate shower times.

During the interview process, random staff indicated:

- if a transgender or intersex inmate asked to shower separately, they would arrange a separate shower time from the other inmates. It was further indicated the alternate shower time would probably be thirty minutes to an hour before or after other inmates are allowed to show

During interviews with transgender inmates, each indicated:

- they were housed in general population
- they were allowed to shower privately
- they believed the staff seriously considered their feelings and perceptions when making decisions regarding their case, programming, housing, etc.

- they were reassessed within 30 days of arrival
- they were reassessed every six months
- they believed the staff had taken their health and safety into consideration when making housing and programming assignments.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 33, (a), indicates the agency shall use information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexual victimized from those at high risk of being sexually abusive.

Following a review of fifty inmate records, the Auditor was able to verify that the information from these assessments was being utilized in the various classification decisions made by staff.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 33 (b), indicates the information obtained during the screening process and PREA Mental Health Assessment is used to make individualize and safety-based determinations and assist in the initial classification and institutional assignment of the inmate, as well as determine work, education, and program assignments.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 33, (c), requires that when deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the institution shall consider on a case-by-case basis whether the placement would ensure the inmate's health and safety, and whether the placement would present management or security concerns.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 33, (d), states that placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

Provision (e)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 33, (e), shows that a transgender or intersex

inmate's own view with respect to his or her own safety shall be given serious consideration.

Provision (f)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 33, (f), reveals transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

Provision (g)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 33, (g), specifies the agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such 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 such inmates.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the facility meets every provision of the standard requiring the use of screening information.

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015

Interview with the following:

- PREA Compliance Manager (PCM)

During the interview process, the PCM indicated:

Zero inmates were placed into involuntary administrative or punitive segregation in accordance with this standard

Zero inmates were placed into protective custody in accordance with this standard, specific to a period longer than thirty days while awaiting alternative placement.

Zero inmates were placed into protective custody in accordance with this standard.

Provision (a):

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 33, (a), specifies that inmates at high risk for sexual victimization or those who report sexual victimization shall not be placed in involuntary administrative or punitive segregation unless there has been an assessment of all other available alternatives and a determination made that there are no other alternatives available.

According to the PAQ, during the past twelve months there have been no inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The PCM confirmed this.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 34, (b), indicates that inmates placed into segregated housing as the only means of protecting such an inmate shall have access to all programs, privileges, education, and work opportunities, to the extent possible, and it shall only be until an alternative means of separation from the likely abuser can be arranged, a time period not to ordinarily exceed thirty days. In these cases, the facility shall clearly document the basis for the facility's concerns for the inmate's safety and the reason why no alternative means of separation can be arranged.

The PAQ reflects during the past twelve months there have been no inmates placed into involuntary administrative or punitive segregation in accordance with this standard. Consequently, no interviews were conducted relative to this provision.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 34, (c), states the facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty days.

The PAQ reflects during the past twelve months there have been no inmates placed into protective custody in accordance with this standard, specific to a period longer than thirty days while awaiting alternative placement. This was confirmed during the interview with the PCM.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 34, (d), indicates if an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document:

1. The basis for the facility's concern for the inmate's safety
2. The reason why no alternative means of separation can be arranged.

Provision (e)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 34, (e), states inmates placed into segregated housing as the only means to protect such an inmate shall be afforded reviews by the facility every thirty days to determine whether there is a need to continue separation from the general population.

The PAQ reflects during the past twelve months there have been no inmates placed into protective custody in accordance with this standard. The PCM confirmed this information.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the facility meets every provision of the standard relative to protective custody.

115.51 Inmate reporting

Auditor Overall Determination: Meets Standard

Auditor DiscussionDocumentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- FBOP Program Statement (PS) 3420.11, Standards of Employee Conduct, dated 12/6/2013
- U.S. Department of Justice (USDOJ), Federal Bureau of Prisons (FBOP), Sexually Abusive Behavior Prevention and Intervention, An Overview for Offenders, dated July 2018
- PREA Posters in English and Spanish

Observations during on-site review

During the on-site portion of the audit, the Auditor observed numerous different PREA posters in both English and Spanish throughout the facility. These posters were observed in each housing unit, common areas, main hallways, intake holding area, dining room, etc. The Auditor checked numerous inmate telephones throughout the facility, and all were in working order and readily available in each housing unit. Likewise, all the inmate computers throughout the facility were in working order and readily available to each inmate in their respective housing units.

During the on-site tour, each phone that was tested was in working order and could call out to the local PREA Hotline as well as the National Sexual Abuse Hotline. Both provided sufficient time to leave a detailed message to follow-up and never required personal identifying information. Additionally, the facility uses LanguageLine Solutions for interpreter services, which is used when a staff member is not available who is bilingual.

Interview with the following:

- PREA Compliance Manager (PCM)
- Random Staff
- Random Inmates

The PCM was interviewed regarding the FBOP's process for providing one way for the inmate population to report abuse or harassment to a public or private entity. It was indicated the inmates can use the PREA hotline and leave an anonymous message. Furthermore, these messages are provided directly to the agency level PREA Coordinator for appropriate follow-up and resolution. The Auditor was able to view spreadsheets, which identify the facility and the issue; however, there is no indication of who the reporting party is, therefore, maintaining anonymity.

During the interview process, random staff indicated they would accept a report or allegation from the inmate and provide it to their supervisor for further direction. They each also reported inmates can report several different ways which includes telling a staff member, calling the PREA hotline posted throughout the facility, or telling a family member. Staff interviewed stated inmates can privately report sexual abuse or sexual harassment as well; through the hotline number or notifying OIG through TRULINCS on the inmate computers.

Through interviews with random staff, several methods for staff to privately report sexual abuse of inmates were identified. All staff indicated they may choose to make a private report to their supervisor, the National PREA Coordinator, OIG, SIS or the PCM.

During the interview process, random inmates reported they were aware of multiple ways to report incidents of sexual abuse or sexual harassment. These included using the hotline number, have family member contact the institution, contacting a staff member, and notifying OIG via TRULINCS. Most indicated they would tell a staff member first.

The random inmates interviewed indicated familiarity with the telephone number posted throughout the facility that inmates could call for free. However, some questioned if it was truly anonymous.

Of the random inmates interviewed indicated they were aware they can make reports of sexual abuse or sexual harassment in person and in writing.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 35, (a), specifies that the FBOP shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates may report sexual abuse or sexual harassment verbally or in writing, third-party or anonymously. Inmates may file a grievance, call the PREA hotline, contact OIG through TRULINCS on the computer, tell the PCM, or they may tell any staff, contractor or volunteer and expect the information to be reported immediately and thoroughly investigated as indicated in this policy.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 35, (b), specifies the agency shall provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. It goes on to say inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of

Homeland Security.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 35, (c), states FBOP employees, including ELK employees, can receive information, including verbal, written, third-party reports or anonymous complaints, concerning inmate sexual abuse, sexual harassment, and custodial sexual misconduct.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 37, (a), states that the agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion or information regarding sexual abuse, sexual harassment that occurred in the facility, whether or not it is part of the agency; retaliation against inmates or staff who reports such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident of retaliation.

U.S. Department of Justice (USDOJ), Federal Bureau of Prisons (FBOP), Sexually Abusive Behavior Prevention and Intervention, An Overview for Offenders, dated July 2018, p. 3, list the following ways an inmate can report an incident of sexually abusive behavior:

- Tell a staff member you trust (Case Manager, Chaplain, Psychologist, SIS, PCM, Warden)
- Write directly to the Warden, Regional Director or Director
- File an Administrative Remedy
- Write the Office of the Inspector General (OIG)
- Email OIG via TRULINCS

Addresses are given for each method of reporting. It specifically identifies the emails to OIG to report anonymously, stating these emails:

- are untraceable at the local institution
- are forwarded directly to OIG
- will not be saved in your email "Sent" list
- do not allow for a reply from OIG

If you want to remain anonymous to the FBOP, you must request it in the email to OIG

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 35, (d), states the agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has

	determined facility meets every provision of the standard relative to inmate reporting.
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115.52	Exhaustion of administrative remedies
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <hr/> <p data-bbox="256 340 632 374"><u>Documentation Reviewed:</u></p> <ul data-bbox="331 443 1469 645" style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Federal Bureau of Prisons (FBOP) Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014 • FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 <p data-bbox="256 685 443 719"><u>Provision (a):</u></p> <p data-bbox="256 757 1469 913">In the PAQ facility reported the agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse and sexual harassment. The PAQ also reflects, the facility had zero grievances for sexual abuse or sexual harassment in the past twelve months.</p> <p data-bbox="256 954 1422 1070">FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 36, states to see the Program Statement Administrative Remedy Program, or current version of the policy.</p> <p data-bbox="256 1111 1453 1227">FBOP Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014, p.13, (a) states the FBOP has an administrative remedy system, and therefore section 115.52 (a) does not apply.</p> <p data-bbox="256 1267 1469 1424">FBOP Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014, p.1, indicates the purpose of the Administrative Remedy Program is to allow an inmate to seek formal review of an issue relating to any aspect of his own confinement.</p> <p data-bbox="256 1464 443 1498"><u>Provision (b)</u></p> <p data-bbox="256 1538 1449 1610">FBOP Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014, p. 13, (b), 1-4, states the following:</p> <ol data-bbox="320 1682 1477 2047" style="list-style-type: none"> 1. The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. 2. The agency may apply otherwise applicable time limits on any portion of a grievance that does not allege an incident of sexual abuse. 3. The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of . 4. Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable state of limitations has expired.

Provision (c)

FBOP Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014, p. 14, (c), states the agency shall ensure:

1. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint
2. Such grievance is not referred to a staff member who is the subject of the complaint.

Provision (d)

FBOP Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014, p. 14 (d) 1-4 states:

1. The agency shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within ninety (90) days of the initial filing of the grievance
2. Computation of the ninety day-time period shall not include time consumed by inmates during the course of an administrative appeal.
3. The agency may claim an extension of time to respond, of up to seventy days if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.
4. At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for replay, including any properly notices extension, the inmate may consider the absence of a response to be a denial at that level.

During the on-site review of documentation, the Auditor confirmed all time frames had been met and no extensions were needed.

Provision (e)

FBOP Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014, p. 14 (e) 1-3 states:

1. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be permitted to file such requests on behalf of inmates.
2. 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 behalf and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.
3. If the inmate declines to have the request processed on his behalf, the agency

shall document the inmate's decision.

Provision (f)

FBOP Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014, p. 14-15, (f) 1-2 states:

1. The agency shall establish procedures for the filing of an emergency grievance where an inmate is subject to a substantial risk of imminent sexual abuse.
2. After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall 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, shall provide an initial response within forty-eight hours, and shall issue a final agency decision within five calendar days. The initial response and final agency decision shall document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Provision (g)

FBOP Program Statement (PS) 1330.18, Administrative Remedy Program, dated 1/6/2014, p. 15, (g) states the agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

Conclusions:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding exhaustion of administrative remedies.

115.53

Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Admission and Orientation Handbook, revised November 20, 2012
- PREA Posters
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Agreement between ELK and the Rape Crisis and Counseling Center with Compass Family and Community Service

Observations during on-site review

During the tour of the facility, the Auditor evaluated several inmate phones to ensure they worked. Each time the telephones functioned appropriately. The phones are checked once each shift by an intermediate or higher-level staff member to make sure they are in working order to reach the outside support agency without difficulty.

During the tour of the facility, the Auditor observed posters throughout the facility. The posters regularly stated, "You have a right to be free from sexual assault" or "zero- tolerance for sexual abuse or assault". The posters had a victim support telephone number to call.

Interviews with the following:

- Random Inmates
- SANE Personnel

During the interview process with SANE personnel, it was revealed a victim advocate is made available to be present with the victim before, during and following the examination. Additionally, the advocate conducts follow-up contacts with the victim to ensure aftercare is arranged and firmly in place. The advocate is from the Rape Crisis and Counseling Center with Compass Family and Community Service.

Inmates interviewed were familiar with the outside community agency. Some inmates were less sure of services the agency offered.

Provision (a)

On the PAQ the facility reported it provides 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

numbers) for local, state, or national victim advocate or rape crisis organizations

- Giving inmates mailing addresses and telephone numbers (including toll free numbers) for immigrant service agencies for persons detained solely for civil immigration purposes
- Enable reasonable communication between inmates and these organizations in as confidential a manner as possible.

FBO Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 36, states the facility shall provide 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, and for persons detained solely for immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

An inmate can go to any inmate computer and be connected to TRULINCS, for free, and confidentially report sexual abuse or assault. The Auditor utilized the telephone number provided and was able to confirm it was functioning for the identified services. Lastly, postings around the facility as well as the A&O Handbook let inmates know they could notify the PCM, or other staff member, of any incident of sexual abuse or harassment.

Provision (b)

On the PAQ the facility reported it tells inmates the extent to which communications will be monitored and the limits of confidentiality due to mandatory reporting laws.

Provision (c)

On the PAQ the facility reported it does have an agreement with a community service provider and does maintain a copy of the agreement. The Auditor was able to confirm this, through a review of the agreement. The agreement is between the facility and Rape Crisis and Counseling Center with Compass Family and Community Service.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding inmate access to outside confidential support services.

115.54	<p>Third-party reporting</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p><u>Documentation Reviewed:</u></p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 • FBOP webpage link - https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp <p><u>Provision (a)</u></p> <p>On the PAQ, the facility reported there is access to third-party reporting through their agency website.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 37, states the agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.</p> <p>The FBOP has provided access to a third-party reporting process through their agency website. On the agency website, the individual wishing to report a PREA related incident can access this through the following link:</p> <p>https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp</p> <p>This link allows for the initiation of a third-party request.</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding third-party reporting.</p>
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115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015

Interviews with the following:

- National PREA Coordinator (NPC)
- Facility Head - Warden
- PREA Compliance Manager (PCM)
- Medical and Mental Health Staff
- Random Staff

Through the interview process with the Warden and NPC, it was revealed they would report any abuse allegations to the appropriate agency, as required by law, as well as the PCM and facility and/or agency investigators.

In interviews with the NPC and PCM each confirmed allegations of sexual abuse and sexual harassment are reported to the PCM and SIS investigators.

During interviews with random staff, all were able to explain how they would immediately report an allegation of sexual abuse in a manner compliant with policy. Moreover, each verbalized information received from a victim should remain confidential, with them only notifying staff that needed to know, i.e., their supervisor, medical staff, etc. All staff indicated PREA related allegations and reports go to the PCM, who then notifies the investigative staff.

During interviews with medical and mental health individuals, all were able to verbalize how they would immediately report an allegation of sexual abuse. Further, each verbalized their understanding of the policy as well as their rights and responsibilities. They all articulated their understanding of the obligation to advise the victim (inmate) of the limitations of confidentiality, due to the mandatory reporting law, prior to the initiation of services.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 37, (a), specifies the FBOP shall 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of

responsibilities that may have contributed to any incident or retaliation.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 38, (b), states apart from reporting to designated supervisors or official, staff shall not reveal 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.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 38, (c), declares unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 38, (d), mandates that if the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Provision (e)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 38, (e), indicates the facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding staff and agency reporting duties.

115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p><u>Documentation Reviewed:</u></p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 <p><u>Interviews with the following:</u></p> <ul style="list-style-type: none"> • Agency Head (AH) • Facility Head - Warden • Random Staff <p>Interview notes reflect the AH indicated if he received such information, he would contact the facility where the inmate was housed and if necessary, the inmate could be temporarily transferred while the investigation was completed. If the perpetrator were identified, the perpetrator would be placed in disciplinary segregation pending completion of the investigation.</p> <p>During the interview process, the Warden indicated immediate action to protect the victim (inmate) always takes priority. The victim might be moved to another area of the facility or to another facility all together, depending on what was needed to protect the victim. The perpetrator, if known, would be placed in segregated housing.</p> <p>During random staff interviews, staff reported if they received an allegation from an inmate, they would immediately separate the victim and the perpetrator, safeguard the victim, contact their supervisor, and preserve evidence.</p> <p><u>Provision (a)</u></p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 38, states that when an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediately action to protect the inmate.</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding agency protection duties.</p>

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015

Interviews with the following:

- Agency Head (AH)
- Facility Head - Warden
- Random Staff

Interview notes reflect the AH indicated if he received such information, he would contact the facility where the inmate was housed and if necessary, the inmate could be temporarily transferred while the investigation was completed. If the perpetrator were identified, the perpetrator would be placed in disciplinary segregation pending completion of the investigation.

During the interview process, the Warden indicated immediate action to protect the victim (inmate) always takes priority. The victim might be moved to another area of the facility or to another facility all together, depending on what was needed to protect the victim. The perpetrator, if known, would be placed in segregated housing.

During random staff interviews, staff reported if they received an allegation from an inmate, they would immediately separate the victim and the perpetrator, safeguard the victim, contact their supervisor, and preserve evidence.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 38, states that when an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediately action to protect the inmate.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding agency protection duties.

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015

Interviews with the following:

- Facility Head - Warden
- Random Staff
- First Responders - Custody
- First Responders - Non-Custody

During the interview process, the Warden indicated first responder staff have been trained in the PREA process, and frequent training is conducted to ensure competency and compliance.

During interviews, staff, were able to articulate to the Auditor how to respond to a PREA incident. All staff, volunteers and contractors were aware of the mandate to separate the perpetrator from the victim, preserve physical evidence, as well as the area the incident occurred, seek medical aid, as needed, and report the incident.

During the interview process with a first responder, it was indicated training in the PREA process is through annual in-service training, on-the-job be training, and staff meetings.

Non-custody staff who were interviewed, all stated they would notify custody staff, separate the victim and the perpetrator, direct the victim and the perpetrator not to do anything to destroy evidence and keep the scene secure until custody staff arrived. They all verbalized the importance of, as well as their understanding of the need for confidentiality in all cases.

Provision (a)

FBOP Program Statement (PS) 5324.12 Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 40, (a), 1-4, states that upon learning of an allegation that an inmate was sexually abused, the first custody staff member to respond shall be required to:

1. Separate the alleged victim and abuser
2. Protect and preserve the crime scene until appropriate steps can be taken to collect evidence

3. If the abuse occurred with a time period that still allows for the collection of physical evidence, request the alleged victim not take any actions that could destroy evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating

4. If the abuse occurred with a time period that still allows for the collection of physical evidence, ensure the alleged abuser does not take any actions that could destroy evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating

On the PAQ, the facility indicated they had zero grievances for alleged sexual abuse and harassment in the past twelve months.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 40, (b), states that if the first responder is not a custody staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy evidence, and then notify custody staff.

The Auditor reviewed the PREA training curriculum that all staff, volunteers, and contractors receive, and it identifies whoever received the information first, as a first responder, including staff, volunteers, and contractors. As a first responder these individuals are trained to take steps to isolate and contain the situation, secure the scene, separate the alleged victim from the alleged perpetrator, remove all uninvolved parties, relay any observations to SIS investigators, PCM or the Operations Lieutenant.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding staff first responder duties.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>Documentation Reviewed:</u></p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 • ONESource First Responder Reference Guide, Sexual Assault Crisis Intervention <p><u>Interviews with the following:</u></p> <ul style="list-style-type: none"> • Facility Head - Warden <p>During the interview process, the Warden confirmed, during the interview process that the coordinated response plan breaks down what the various responsibilities are for the respective staff members and positions. Training is provided routinely through annual in-service training, monthly staff meetings and on- the-job training. The Warden further verbalized the staff have access to the ONESource First Responder Reference Guide, Sexual Assault Crisis Intervention, which gives step-by- step instructions for first responders, and states exactly what the next staff member is required to do, etc. The form has a place to mark off when the objective or responsibility has been completed and a place for comments.</p> <p><u>Provision (a)</u></p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 40, states the facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 40, gives the responsibilities of all staff members upon learning of an allegation of a PREA related incident.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 40-41, gives the responsibilities of the Operations Lieutenant upon learning of an allegation of a PREA related incident.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the PREA Compliance Manager upon learning of an allegation of a PREA related incident.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and</p>

Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Correctional Services staff upon learning of an allegation of a PREA related incident.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Psychology Services staff upon learning of an allegation of a PREA related incident.

Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Health Services staff upon learning of an allegation of a PREA related incident.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding coordinated response.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>Documentation Reviewed:</u></p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 • ONESource First Responder Reference Guide, Sexual Assault Crisis Intervention <p><u>Interviews with the following:</u></p> <ul style="list-style-type: none"> • Facility Head - Warden <p>Through the interview process the Warden confirmed the coordinated response breaks down what the various responsibilities are for the respective staff members and positions. Training is provided routinely through annual in-service training, monthly staff meetings and on-the-job training. The Warden further verbalized the staff have access to the ONESource First Responder Reference Guide, Sexual Assault Crisis Intervention, which gives step-by-step instructions for first responders, and states exactly what the next staff member is required to do, etc. The form has a place to mark off when the objective or responsibility has been completed and a place for comments.</p> <p><u>Provision (a)</u></p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 40, states the facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 40, gives the responsibilities of all staff members upon learning of an allegation of a PREA related incident.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 40-41, gives the responsibilities of the Operations Lieutenant upon learning of an allegation of a PREA related incident.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the PREA Compliance Manager upon learning of an allegation of a PREA related incident.</p>

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Correctional Services staff upon learning of an allegation of a PREA related incident.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Psychology Services staff upon learning of an allegation of a PREA related incident.

Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Health Services staff upon learning of an allegation of a PREA related incident.

The facility coordinates actions taken in response to an incident of sexual abuse among first responders, medical and mental health professions, investigators, and executive staff. First responders are guided by the One Source First Responders guide. Following the initial response, continued coordination between departments is achieved through PREA after action meetings and use of the One Source First Responders guide.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding coordinated response.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor DiscussionDocumentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- ONESource First Responder Reference Guide, Sexual Assault Crisis Intervention

Interviews with the following:

- Facility Head - Warden

Through the interview process the Warden confirmed the coordinated response breaks down what the various responsibilities are for the respective staff members and positions. Training is provided routinely through annual in-service training, monthly staff meetings and on-the-job training. The Warden further verbalized the staff have access to the ONESource First Responder Reference Guide, Sexual Assault Crisis Intervention, which gives step-by-step instructions for first responders, and states exactly what the next staff member is required to do, etc. The form has a place to mark off when the objective or responsibility has been completed and a place for comments.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 40, states the facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 40, gives the responsibilities of all staff members upon learning of an allegation of a PREA related incident.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 40-41, gives the responsibilities of the Operations Lieutenant upon learning of an allegation of a PREA related incident.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the PREA Compliance Manager upon learning of an allegation of a PREA related incident.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and

Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Correctional Services staff upon learning of an allegation of a PREA related incident.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Psychology Services staff upon learning of an allegation of a PREA related incident.

Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 41, gives the responsibilities of the Health Services staff upon learning of an allegation of a PREA related incident.

The facility coordinates actions taken in response to an incident of sexual abuse among first responders, medical and mental health professions, investigators, and executive staff. First responders are guided by the One Source First Responders guide. Following the initial response, continued coordination between departments is achieved through PREA after action meetings and use of the One Source First Responders guide.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding coordinated response.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>Documentation Reviewed:</u></p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Federal Bureau of Prisons (FBOP) Form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation. • FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 <p><u>Interviews with the following:</u></p> <ul style="list-style-type: none"> • Facility Head - Warden • PREA Compliance Manager (PCM) <p>Through the interview process the Warden and the PCM confirmed zero inmates were placed in segregated housing in the past twelve months for PREA related allegations.</p> <p><u>Provision (a)</u></p> <p>The PAQ indicates the facility has not used segregated housing in the past twelve months for PREA related allegations.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 43, specifies that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of §115.43. FBOP Form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation, is also used in cases of post-allegation protective custody.</p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 34, the completed BOP-A1002 is stamped "FOI EXEMPT" and placed in the Privacy Section of the Inmate Central File to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. If information gathered leads to an investigation, the BOP-A1002 becomes part of the investigative file. The completed form is emailed to BOP-RSD-PREACORDINATOR@bop.gov and filed with the investigative case.</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding post allegation protective custody.</p>

115.71

Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- .Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015.
- DOJ/OIG PREA Series 1811 Criminal Investigators Special Training for Investigators (Special Agents, Assistant Special Agents in Charge, Special Agents in Charge).
- Training records, Investigative Intelligence – BOP (CSV-0600-BXX)
- SIS/PREA National Video Conference Agenda
- SIS/SIA PREA Instructor Guide
- Office of Internal Affairs (OIA) Conducting Interviews & Union Issues lesson plan

Interviews with the following:

- National PREA Coordinator (NPC)
- Facility Head - Warden
- PREA Compliance Manager (PCM)
- Investigative Staff

During interviews, the investigative staff reported when it appears a crime may have been committed; all questions immediately stop, and the Warden is contacted. The perpetrator is immediately read their Miranda rights and the case, including all evidence, is turned over to the FBI or OIG, whichever is appropriate. At this point, SIS will only conduct compelled interviews after consultation with the investigating agency or the prosecutors, and a definite determination is made such interviews will not be an obstacle for subsequent criminal prosecution.

During the interview process with investigative staff, it was confirmed investigations begin immediately following notification of the incident. Furthermore the same protocols are used regardless of how the incident is reported, whether it is in person, telephonically, third party, by mail or anonymously.

During interviews, the investigative staff reported when it appears a crime may have been committed; all questions immediately stop, and the Warden is contacted. The perpetrator is immediately read their Miranda rights and the case, including all evidence, is turned over to the FBI or OIG, whichever is appropriate. At this point, SIS will only conduct compelled interviews after consultation with the investigating agency or the prosecutors, and a definite determination is made such interviews will not be an obstacle for subsequent criminal prosecution.

During the interview with investigative staff, it was confirmed all training session had been completed. The Auditor reviewed the investigators training records and verified his attendance and participation in all mandated training.

During the interview, the investigative staff indicated all investigations follow practically the same investigative format. The victim is interviewed first, then any witnesses, leaving the perpetrator for last. He stated it varies slightly if it is an alleged Sexual Harassment rather than an alleged Sexual Assault or Sexual Abuse. If it is an alleged Sexual Assault or Sexual Abuse incident, he will go to the dedicated SAFE/SANE location where the victim is being seen. Except in the cases where the SAFE/SANE team collects the evidence, the investigator indicated he collects and secures all evidence. He was trained in evidence collection through the agency's investigator training and NIC training. The Auditor reviewed training records, which confirmed this training.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 43, (a), states when the agency conducts its own investigations into allegations of sexual abuse or sexual harassment, it shall do it promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

The auditor reviewed documentation confirming the investigators completed the specialized investigative BOP training. SIS completes all administrative investigations. If the evidence suggests a crime has been committed, SIS will notify the Warden who contacts the FBI or OIG, whichever is the appropriate investigating agency. SIS continues to work with the investigating agency to ensure an open and fluid investigation. All substantiated criminal cases are referred for prosecution to the US Attorney's Office in the District in which the crime occurred.

The DOJ/OIG PREA Series 1811 Criminal Investigators Special Training for Investigators (Special Agents, Assistant Special Agents in Charge, Special Agents in Charge) confirms the investigators have been provided special training per PREA guidelines.

In the past twelve months there had been a total of one allegation made. The allegation was staff-on-inmate sexual abuse. The female staff member resigned and the inmate was transferred. It was investigated administratively and found to be unsubstantiated. It was referred for prosecutorial review.

The singular case had appropriate documentation of the inmate rights, direct and circumstantial evidence, witness statements, proper time frames, effective communication, safety of the inmate, as well as other mandated guidelines. After reviewing it was determined all guidelines had been met.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and

Intervention Program, dated 6/4/2015, p. 44, (b), indicates where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to §115.34.

SIS investigators receive additional training including interviewing techniques for sexual abuse victims, conducting sexual abuse investigations in a confinement setting, investigation and evidence collection for inmate sexual offenses, sexual harassment, and custodial sexual misconduct. This training is documented and was verified by the Auditor through employee electronic signatures on training sheets.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 44, (c), Mandates investigators shall gather and preserve direct and circumstantial evidence, including any available physical evidence 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 (previous unsubstantiated or unfounded complaints and reports may not be used as evidence).

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 44, (d), specifies that when the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

Provision (e)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 44, (e), indicates 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 inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of such an allegation.

The investigative staff reported credibility of anyone involved in the investigation is determined through the investigative process. Everyone is treated as credible and truthful unless the investigation proves otherwise. A polygraph is not used in the investigative process of PREA cases.

Provision (f)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 44-45, (f), indicates administrative investigations:

1. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and
2. Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

Investigative staff reported in administrative investigations the evidence is followed as the investigation unfolds. In following the evidence, he attempts to determine if staff actions or failure to act contributed to the allegation. All findings are summarized in the final investigative report.

In the past twelve months there had been a total of one allegation made. The allegation was staff-on-inmate sexual abuse. The female staff member resigned and the inmate was transferred. It was investigated administratively and found to be unsubstantiated. It was referred for prosecutorial review.

When reviewing the documentation of the cases the Auditor looked for inmate rights, direct and circumstantial evidence, witness statements, proper time frames, effective communication, safety of the inmate, as well as other mandated guidelines.

The documentation review included the original complaint, the referral for investigation, referrals for mental health and/or medical, and all subsequent available paperwork, including administrative remedy forms and responses where applicable. The allegations were investigated appropriately and timely and a finding was made as indicated previously.

Provision (g)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 45, (g), indicates criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

When asked about handling criminal investigations, the investigative staff reported he thoroughly documents all steps of the process, including investigative steps, interviews, facts, and findings, up until the point he determines it is criminal in nature and he notifies the Warden who turns it over to the FBI or OIG, whichever is appropriate.

Provision (h)

BOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 45, (h), mandates that substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.

Per the PAQ, in the past twelve months there have been zero criminal cases prosecuted.

Investigative staff indicated when evidence points to a crime being committed, the case is referred to OIG or FBI for investigation by the Warden. If the investigation uncovers evidence that a crime has been committed the case is forwarded to the US Attorney's Office in the District where the crime was allegedly committed.

Provision (i)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 45, (i), indicates the agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years.

During the interview, the investigator confirmed that if a principle (victim or abuser) is released or terminated from the agency, it in no way alters the investigation. The investigation continues to its natural end regardless of the employment or residence of the individuals involved.

Provision (k)

The Auditor is not required to audit this provision.

Provision (l)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 45, (l), states when outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the facility meets every provision of the standard regarding criminal and administrative agency investigations.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>Documentation Reviewed:</u></p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 <p><u>Interview with the following:</u></p> <ul style="list-style-type: none"> • Investigative Staff <p>The Auditor interviewed investigative staff who relayed that during an investigation, all available evidence is collected (from the victim, from the perpetrator, from the scene; interviews; etc.) and submitted to the Warden and PCM for their review and consideration.</p> <p><u>Provision (a)</u></p> <p>FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 45, is clear the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding evidentiary standard for administrative investigations.</p>

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Sample Memorandums for PREA File, PREA Allegation, Notification to victim of investigation outcomes, substantiated, unsubstantiated, unfounded
- PREA Compliance Manager Information Tracking Log

Interview with the following:

- Facility Head - Warden
- Investigative Staff

Through the interview process, the investigative staff specified the final step of the investigation process, takes place after all findings have been determined. At the conclusion of any PREA investigation SIS submits, through the Warden's office, a close out memorandum to the victim and the perpetrator, notifying each of the conclusion of the investigation and the findings. The Warden was asked a similar question and echoed the response of the investigative staff.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, pp. 45-46, (a), specifies following an investigation into an inmate's allegation that he suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The Special Investigative Services Lieutenant provides all information to inmates required under this section.

Additional information received provided an overview of the administrative and criminal cases, including status. There was one sexual abuse and sexual harassment allegation received during the previous twelve months. It was staff-on-inmate. The female staff member resigned and the inmate was transferred. It was investigated administratively and found to be unsubstantiated. It was referred for prosecutorial review.

In the past twelve months there were zero SAFE/SANE examinations.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and

Intervention Program, dated 6/4/2015, p. 46, (b), indicates if the agency did not conduct the investigation, it shall request the relevant information from the investigative agency to inform the inmate.

According to the PAQ, during the past twelve months there have been no criminal investigations by outside agencies.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 46, (c), 1-4 states following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:

1. The employee/staff is no longer posted within the inmate's unit
2. The employee/staff is no longer employed at the facility
3. The employee/staff has been indicted on a charge related to the sexual abuse within the facility
4. The employee/staff has been convicted on a charge related to the sexual abuse within the facility

All notifications shall be documented.

As previously stated in provision (a), the victims are notified via memorandum, issued through the Warden's office, from the SIS Lieutenant to the alleged victim.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 46, (d), 1-2, states following an inmate's allegation that he has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever:

1. The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
2. The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

All notifications shall be documented.

Provision (e)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 46, (e), states all such notification or attempted notification shall be documented.

Provision (f)

The Auditor is not required to audit this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding reporting to inmates.

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- FBOP, Program Statement (PS), 3420.11, Standards of Employee Conduct, dated 12/6/2013

Interviews with the following

- Facility Head - Warden
- PREA Compliance Manager (PCM)

During the interview process, the Warden confirmed in the previous twelve months there had been one resignation of a female staff member because of the agency's sexual abuse or sexual harassment or sexual misconduct policies. The PCM also confirmed this during the interview process.

Provision (a)

According to the PAQ, during the previous twelve months there had not been any terminations or other sanctions against staff for violation of the agency's sexual abuse or sexual harassment or sexual misconduct policies. However, one female staff member resigned because of the agency's sexual abuse or sexual harassment or sexual misconduct policies.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 47, (a), states staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment policies.

FBOP, Program Statement (PS), 3420.11, Standards of Employee Conduct, dated 12/6/2013, p. 7, states employees are subject to administrative action, up to and including removal, for any inappropriate contact, sexual behavior, or relationship with inmates, regardless of whether such contact constitutes a prosecutable crime. Physical contact is not required to subject an employee to sanctions for misconduct of a sexual nature.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 47, (b), states termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

FBOP, Program Statement (PS), 3420.11, Standards of Employee Conduct, dated 12/6/2013, pp. 7, states an employee may not engage in, or allow another person to engage in, sexual behavior with an inmate. There is never consensual sex between staff and inmate.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 47, (c), states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed to comparable offenses by other staff with similar histories.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 47, (d), states 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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding disciplinary sanctions for staff.

115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor DiscussionDocumentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- FBOP, Program Statement (PS), 3420.11, Standards of Employee Conduct, dated 12/6/2013

Interview with the following

- Facility Head - Warden

During an interview with the Warden, it was disclosed that when an issue arises it is immediately referred to SIS for follow-up. During this time, the contractor or volunteer is not allowed access to the facility pending investigation and review of the matter.

Provision (a)

The PAQ indicates there have been no reports of sexual abuse by contractors or volunteers at the facility, during the past twelve months.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 47, (a), indicates any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 47, (b), indicates the facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding corrective action for contractors and volunteers.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor DiscussionDocumentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 48
- FBOP Program Statement (PS) 5270.09, Inmate Discipline Program, dated July 8, 2011, p. 46, Prohibited Act #205

Interview with the following

- Facility Head - Warden
- Medical Staff

Through the interview process, the Warden indicated inmate discipline is based on level of the violation and penalties are imposed comparable to other inmate's penalties. Penalties might include change of housing assignment, loss of good time credit, and possible prosecution, when appropriate.

During the interview process, the Warden confirmed if the inmate has a mental health history, mental health staff will be involved to assist in determining appropriate sanctions.

During the interview process with the Warden, the Auditor learned in the past twelve months there had not been any disciplinary action taken against any inmates for a report of sexual abuse made in good faith.

During interviews with medical staff, the Auditor was informed that medical staff can make recommendations for referrals for inmates for therapy, counseling, or other interventions to address underlying issues related to abuse. The inmate's issues would be addressed during regular counseling sessions or group counseling sessions. Participation in interventions is not a condition for access to other programming or benefits.

Provision (a)

The PAQ reflects in the past twelve months there have been one administrative investigation of staff-on-inmate sexual abuse at the facility.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 48, (a) states inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmates engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

Information received regarding the allegations of sexual abuse indicate in the past twelve-months there had been a total of one allegation made. The allegation was staff-on-inmate sexual abuse. The female staff member resigned and the inmate was transferred. It was investigated administratively and found to be unsubstantiated. It was referred for prosecutorial review.

In the past twelve months there were zero SAFE/SANE examinations.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 48, (b) states sanctions shall be commensurate with the nature and circumstance of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 48, (c) indicates the disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed.

Provision (d)

The PAQ indicates the facility does offer therapeutic services and interventions to inmates.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 48, (d) indicates if the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for abuse, the facility shall consider whether to require the offending inmate to participate in such intervention as a condition of access to programming or other benefits.

Provision (e)

The PAQ reflects the facility only disciplines inmates for sexual contact with staff when it is determined the staff member did not consent.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 48, (e) states the agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

Provision (f)

The PAQ reflects the facility prohibits disciplinary action for a report of sexual abuse made in good faith.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and

Intervention Program, dated 6/4/2015, p. 48, (f) states for the purpose of disciplinary action, a report of sexual abuse made in good faith 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 sufficient to substantiate the allegation.

Provision (g)

The PAQ indicates the facility prohibits all sexual activity between inmates. Further, it states the facility only considers sexual activity between inmates to be sexual abuse if it is coerced.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 48, (g) indicates that an agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

FBOP Program Statement (PS) 5270.09, Inmate Discipline Program, dated July 8, 2011, p. 46, Prohibited Act #205, says engaging in sexual acts is prohibited.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding disciplinary sanctions for inmates.

115.81

Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Warden Memorandum, PREA Standard 115.81 (a)/(c)-1, (a)/(c)-4, (d)-1, (e)-1, dated October 6, 2022
- Warden Memorandum, PREA Standard 115.81 (a)/(c)-4, (b) -4, dated October 6, 2022
- Warden Memorandum, PREA Standard 115.81 (d)-1, dated October 6, 2022
- Warden Memorandum, PREA Standard 115.81 (e)-1, dated October 6, 2022

Interview with the following

- Warden
- PREA Compliance Manager
- Medical Staff
- Intake Staff

The Auditor interviewed staff who conduct the intake screenings. These staff confirmed inmates are offered a follow-up meeting with a medical or mental health professional, within 14-days of intake, if the intake screening indicates the inmate is at substantial risk for possible victimization, aggressiveness or has a history of victimization.

The Auditor interviewed staff who conduct the intake screenings and was informed that all medical and mental health records are contained in a separate and secure database. This database is accessed only through medical or mental health staff, and information is only provided to classification and high-level staff on a need-to-know basis.

During the interview process, the Warden indicated most information related to sexual victimization or abusiveness that occurred in the institution setting is strictly limited to medical and mental health professions, some tracking information and/or safeguarding information may be seen by custody and non-health care personnel. For example, if the inmate is deemed to be at-risk for victimization or abusiveness, non-healthcare personnel would have access to this designation through the inmate's SENTRY assignments and TRUSCOPE advisory lists. Additionally, if an inmate has a Security Threat Group (STG) designation, this information would also be available to non-health care personnel.

During the interview process, medical staff confirmed the facility utilizes Bureau

Electronic Medical Records (BEMR) to document cases of sexual abuse and/or sexual harassment.

The Warden indicated during the interview process, there have been zero instances of a medical or mental health practitioner reporting information about prior sexual victimization that did not occur in an institutional setting. If an instance should occur that involved the need to report such information, informed consent would be obtained prior to the disclosure of that, unless the inmate is under the age of 18.

Provision (a)

The PAQ reflects in the past twelve months, the facility referred 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health professional.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 49, (a) states 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, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

Warden Memorandum, PREA Standard 115.81 (a)/(c)-1, dated October 6, 2022, confirms all inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to 115.41 are offered follow-up meeting with a medical or mental health practitioner.

During the documentation review, the Auditor discovered all mental health referrals, because of disclosure during intake, were timely made. All referrals were evaluated within the appropriate time frame.

Provision (b)

The PAQ reflects in the past twelve months, the facility referred 100% of inmates who disclosed previously perpetrated sexual abuse during screening were offered a follow-up meeting with a medical or mental health professional. As stated in Provision (a), all referrals and evaluations were made timely.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 49, (b), states 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, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

Warden Memorandum, PREA Standard 115.81 (a) /(c)-4, (b)-4, dated October 6, 2022, confirms mental health staff maintain secondary materials documenting compliance that all inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115 .41, or who have previously perpetrated sexual abuse, as indicated during the screening pursuant to §115.41, are offered a follow-up

meeting with a medical or mental health practitioner within 14 days of the intake screening.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 49, (c), states 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, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

The facility is not a jail.

Provision (d)

The PAQ indicates the facility limits information obtained in intake screening relating to sexual abuse to those who need to make management, security, or treatment plan decisions.

Warden Memorandum, PREA Standard 115.81 (d)-1, dated October 6, 2022, confirms information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners, except when there is necessity to share information with other staff in order to inform security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by Federal, State or local law.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 49, (d) indicates that any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, or as otherwise required by Federal, State, or local law.

Provision (e)

The PAQ indicates medical and mental health professionals obtain informed consent prior to reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18.

Warden Memorandum, PREA Standard 115.81 (e)-1, dated October 6, 2022, confirms in the past 12 months, there have been no instances which required medical and mental health practitioners to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 50, (e), states medical and mental health practitioners shall obtain informed consent from inmates before reporting information

about prior sexual victimization that did not occur in an institution setting, unless the inmate is under the age of 18.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding medical and mental health screenings, history of sexual abuse.

115.82

Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Warden Memorandum, Assurance Memo: 115.82 (a) - 3, dated October 6, 2022

Interview with the following

- Medical Staff
- First Responders
- SAFE/SANE

Through the interview process, medical and mental health staff reported treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

Interviews with first responders revealed notification is made via the telephone to the medical staff who are on duty when they are informed of an incident of sexual abuse. The inmate is then transferred to a local hospital for a Sexual Assault Response Team (SART) exam by a SAFE/SANE practitioner.

Through the interview process it was revealed the SANE exam includes a forensic exam, prophylaxis for pregnancy and sexually transmitted diseases, photographic documentation, referrals for appropriate medical and psychological follow-up, as well as support and participation in legal proceedings. An advocate is provided for medical accompaniment for all SANE examinations. SANE personnel confirmed the forensic exams are free to the inmate. All inmates are transported to the hospital for forensic exams.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 50, (a), states inmate 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.

Warden Memorandum, Assurance Memo: 115.82 (a) - 3, dated October 6, 2022,

indicates the facility provides immediate treatments and intervention, within 24 hours of report, for all inmate victims of sexual abuse. All documentation is kept in BEMR and PDS/BEMR (electronic records) and are available for review on-site.

All forensic medical exams are conducted by SANE personnel at St. Elizabeth Youngstown Hospital which is a designated Sexual Assault Nurse Examiner (SANE) site hospital.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 51, (b), states if no qualified medical or mental health practitioners are on duty at the time a report of sexual abuse is made, custody staff first responders shall take preliminary steps to protect the victim pursuant to §115.62 and shall immediately notify the appropriate medical and mental health practitioners.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 51, (c), states inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, when medical appropriate.

As previously cited in provision (a) Medical and Mental Health staff interviewed by the Auditor reported treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 51, (d), states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding access to emergency medical and mental health services.

115.83

Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015

Interview with the following:

- Medical and Mental Health Staff
- SANE Personnel
- PREA Compliance Manager (PCM)

Through the interview process, SANE personnel indicated the SANE exam includes a forensic exam, prophylaxis for pregnancy and sexually transmitted diseases, photographic documentation, referrals for appropriate medical and psychological follow-up, as well as support and participation in legal proceedings. An advocate is provided for medical accompaniment for all SANE examinations. SANE personnel confirmed the forensic exams are free to the inmate. All inmates are transported to the hospital for forensic exams.

Medical and mental health staff interviewed reported treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

In interviews with the PCM, as well as medical staff indicated zero inmates were referred for Sexual Assault Response Team (SART) examinations by SAFE/SANE practitioners in the previous twelve months.

Interviews with Medical and Mental Health staff support compliance in evaluation, follow-up, treatment plans and referral services. The statement of medical and mental health staff reflects an in-depth understanding of the importance of appropriate evaluation, follow-up, treatment planning and service referral.

During the interview process it was confirmed all treatment services are provided to alleged victims without financial cost, regardless of whether the victim names the abuser or cooperated with any investigation arising out of the incident.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 51, (a), indicates the facility shall offer medical and mental health evaluations and, as appropriate treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

All forensic medical exams are conducted by St. Elizabeth Youngstown Hospital which is designated a Sexual Assault Nurse Examiner (SANE) site hospital.

The Auditor reviewed records produced by the facility documenting the community standard of care, the evidence of sexually transmitted infection testing, prophylaxis treatment, psychiatry and psychology services, crisis intervention. These services are free of charge to inmates regardless of whether the abuser is named or whether the inmate cooperates with an investigation.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 51, (b), states the evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referral for continued care following their transfer to, or placement in, other facilities, or their release from custody.

Documentation and records review supported attentiveness to follow-up services and treatment plans. The files demonstrated detailed and professional notes on the evaluations conducted by Medical and mental health staff and their follow-up appointments with inmates. Follow-up consisted of routine inmate visits with medical and mental health staff.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 51, (c), indicates the facility shall provide such victims with medical and mental health service consistent with the community level of care.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 51, (d), mandates inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

ELK is an all-male facility.

As previously stated in Provision (a), zero inmates were referred for Sexual Assault Response Team (SART) examinations by SAFE/SANE practitioners in the previous twelve months.

Provision (e)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and

Intervention Program, dated 6/4/2015, p. 52, (e), mandates if pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy related medical services.

ELK is an all-male facility.

Provision (f)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 52, (f), dictates inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

As previously stated in Provision (a), zero inmates were referred for Sexual Assault Response Team (SART) examinations by SAFE/SANE practitioners in the previous twelve months.

Provision (g)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 52, (g), states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperated with any investigation arising out of the incident.

Provision (h)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 52, (h), indicates all prisons shall 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.

There was no documentation of grievances to review.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding ongoing medical and mental health care for sexual abuse victims.

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor DiscussionDocumentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015.

Interviews with the following

- Facility Head - Warden
- PREA Compliance Manager (PCM)
- Incident Review Team (IRT)

During the interview process, the Warden acknowledged the composition of the review team and the willingness to consider and incorporated recommendations from team members.

Members of the IRT were interviewed. Each team member reported the team considers all criteria listed above, as required by PREA policy.

During the interview process the PCM acknowledged the composition of the Sexual Abuse Incident Review Team.

Provision (a)

The PAQ indicates in the past twelve months there has been one criminal and/or administrative investigation of alleged sexual abuse completed at the facility.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 52, (a), states the facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including when allegations have not been substantiated, unless the allegation has been determined to be unfounded.

Provision (b)

The PAQ reflects in the past twelve months there have been zero criminal and/or administrative abuse incident reviews completed at the facility. This is because there have been zero closed cases in the past twelve months.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 53, (b), indicates such a review will ordinarily occur within 30 days of the conclusion of the investigation.

The PCM confirmed during the past twelve months there was one case, and it was

staff-on-inmate. The female staff member resigned and the inmate was transferred. It was investigated administratively and found to be unsubstantiated. It has been referred for prosecutorial review.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 53, (c), states the review team shall include upper management officials, with input from line supervisor, investigators and medical or mental health practitioners.

The multidisciplinary incident review team consists of intermediate or higher-level facility managers, supervisors, investigators, as well as medical and mental health practitioners.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 53, (d), stated the review team shall:

1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse
2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; LGBTQI identification status or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamic 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 the different shifts
5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
6. Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) through (d)(5) of this section, and any recommendations for improvement and submit such report to the Facility Head and PREA Compliance Manager.

Provision (e)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 53, (d), states the facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.

Conclusion

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding sexual abuse incident reviews.

115.87 Data collection

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Most recent annual PREA Reports

Provision (a)

According to the PAQ, the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 54, (a), mandates the agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

A review of the most recent annual PREA report, confirms this provision has been met.

Provision (b)

According to the PAQ the agency aggregates the incident-based sexual abuse data at least annually.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 55, (b), states the agency shall aggregate the incident- based sexual abuse data at least annually.

The FBOP aggregates all its data submitting all required items according to the US Department of Justice. The Auditor reviewed the most recent annual PREA report.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 55, (c), indicates the incident-based data collected shall 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.

PREA policy dictates 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. The Auditor was provided a

copy of the most recent annual PREA report which addressed all questions, as required.

Provision (d)

According to the PAQ, the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 5, (d), states the agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

PREA policy mandates the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews. The Auditor was provided a copy of the most recent annual PREA report which contained relevant areas of concern and noted corrective action items.

Provision (e)

According to the PAQ, the agency obtains incident-based and aggregate data from every private facility with which it contracts for the confinement of its inmates. The data from private facilities complies with the SSV reporting requirement.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 55, (e), states the agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of inmates.

A review of the most recent annual PREA report, confirms this provision has been met.

Provision (f)

According to the PAQ, upon request the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30,

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 55, (f), states upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

The FBOP aggregates all its data submitting all required items according to the US Department of Justice SSV-02 (Survey of Sexual Victimization) and submits all information on June 30 from the previous calendar year to the US Department of Justice.

The Auditor reviewed the most recent annual PREA report, which reflected completion of all data fields within the required timeline.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding data collection.

115.88 Data review for corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 56
- Most recent annual PREA report

Interview with the following

- Agency Head or Designee (AH)
- National PREA Coordinator (NPC)
- PREA Compliance Manager (PCM)

During the interview process, the AH asserted if the incident-based sexual abuse data shows patterns, such as LGBTI inmates are being targeted or a substantial number of assaults occurring in a particular area of an institution, then policies, procedures or training may be modified. Further the AH reviews the annual report for the prior calendar year before placement on the agency website.

As part of the interview with the NPC, the Auditor learned the agency reviews data collected pursuant to §115.87 and assesses the effectiveness of the sexual abuse prevention, detection and response policies, practices, and training. The agency prepares an annual report and posts the information on the website. The Auditor also learned the only information redacted from the agency report is personal identifying information. All other information is included in the annual report.

During the interview process, the NPC indicated the agency reviews data collected pursuant to §115.87 while only redacting personal identifying information. All other information is included in the annual report. The NPC is responsible for ensuring the information is provided for purposes of agency reporting.

During an interview with the PCM, it was indicated the facility ensures the data collected on sexual abuse for inmate-on-inmate and staff-on-inmate cases are forwarded to the Regional PREA Coordinator.

Provision (a)

According to the PAQ, the agency reviews data collected and aggregated pursuant to §115.87 to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies.

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 56, (a), states the agency shall review data

collected and aggregated pursuant to §115.87 to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices, and training, including by:

1. Identifying the problem areas
2. Taking corrective action on an ongoing basis
3. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 56, (b), indicates such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.

The Auditor reviewed the most recent annual report and found it to follow the PREA standards, including a comparison to the findings in previous reports to assess progress in addressing sexual abuse.

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 56, (c), indicates the agency's report shall be 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.

As required by standard, the FBOP places all audit reports on its website, accessible for public view. This website allows access to the FBOP Sexual Abuse Prevention webpage, which contains the most recent annual report.

https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 56, (d), indicates the agency 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.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding data review for corrective action.

115.89 Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015
- Most recent annual PREA report
- Federal Bureau of Prisons publicly accessible website https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp

Interview with the following

- National PREA Coordinator (NPC)

According to the interview notes of the NPC, the Auditor learned there are several locations where the FBOP retains data. At the local level, data is retained within a secure system and access to the system is limited to those staff with a need-to-know. Additional data is retained at the Agency level as required for completion of the SSV-2, and within the FBOP website for public access.

Provision (a)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 56, (a), states the agency shall ensure that data collected pursuant to §115.87 are securely retained.

Provision (b)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 56, (b), indicates the agency shall 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.

The FBOP Inmate Sexual Abuse Prevention webpage provides the most recent annual report relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at:

https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp

Provision (c)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 56, (c), states before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers. According to the NPC, the agency reviews data collected pursuant to §115.87, and that the only information redacted from the agency report is personal identifying information. The agency report reviewed by the Auditor met PREA compliance standards.

Provision (d)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 57, (d), states the agency shall 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.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding data storage, publication, and destruction

115.401	Frequency and scope of audits
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 655 374"><u>Documentation Reviewed:</u></p> <ul data-bbox="352 443 1469 685" style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Federal Bureau of Prisons (FBOP) Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015 • FBOP publicly accessible website • https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp <p data-bbox="280 725 671 759"><u>Interview with the following</u></p> <ul data-bbox="352 828 863 943" style="list-style-type: none"> • Agency Head or designee (AH) • PREA Compliance Manager (PCM) • Random Inmates <p data-bbox="280 985 1406 1061">During the interview process, the AH reported each facility within the FBOP had been audited within the previous three-year audit cycle.</p> <p data-bbox="280 1102 1477 1178">During an interview with the PCM, the Auditor learned the audit for ELK is in the first year of the new three-year audit cycle.</p> <p data-bbox="280 1218 1458 1332">During inmate interviews, all inmates reported they were provided the opportunity to send out confidential mail or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p data-bbox="280 1373 456 1406"><u>Provision (a)</u></p> <p data-bbox="280 1447 1477 1644">FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 57, (a), states during the three-year period starting on August 20, 2013, and each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once.</p> <p data-bbox="280 1684 1477 1839">Copies of all recent audit reports are on the FBOP website for public information and review. FBOP Inmate Sexual Abuse Prevention webpage provides the most recent annual report relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at</p> <p data-bbox="280 1879 1307 1955">https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp</p> <p data-bbox="280 1995 456 2029"><u>Provision (b)</u></p>

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 57, (b), states during each one-year period starting on August 20, 2013, the agency shall ensure that at least one third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.

FBOP webpage provides the most recent report relative to sexual abuse data from the various facilities in accordance with PREA standards.

Provision (c)

N/A

Provision (d)

N/A

Provision (e)

N/A

Provision (f)

N/A

Provision (g)

N/A

Provision (h)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 58, (h), states the auditor shall have access to, and shall observe, all areas of the audited facilities.

During the on-site portion of the audit, the Auditor had complete, unimpeded access to every area of the facility. Throughout the on-site portion of the audit the PCM and other staff were available to accompany the auditor and give her complete access to any part of the facility she requested to see.

Provision (i)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 58, (i) affirms the auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).

At all times throughout the audit process, FBOP and ELK provided the Auditor with all requested information in a timely and complete manner.

Provision (j)

N/A

Provision (k)

N/A

Provision (l)

N/A

Provision (m)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 58, (m), states the auditor shall be permitted to conduct private interviews with inmates, residents, and detainees.

Provision (n)

FBOP Program Statement (PS) 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, dated 6/4/2015, p. 58, (n), states inmates, residents, and detainees shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

Provision (o)

N/A

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding frequency and scope of audits.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>Provision (f)</u></p> <p>The FBOP Inmate Sexual Abuse Prevention web page provides the most recent annual report relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at:</p> <p>https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding audit contents and findings</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	yes

	for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	
	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.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, 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	yes

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

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (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?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of 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.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	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.)	na
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	
	<p>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.)</p>	yes