

PREA Facility Audit Report: Final

Name of Facility: Dr. Eddie Warrior Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 07/27/2024

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: Mark McCorkle	Date of Signature: 07/27/2024

AUDITOR INFORMATION	
Auditor name:	McCorkle, Mark
Email:	mamccork2015@sbcglobal.net
Start Date of On-Site Audit:	06/03/2024
End Date of On-Site Audit:	06/05/2024

FACILITY INFORMATION	
Facility name:	Dr. Eddie Warrior Correctional Center
Facility physical address:	601 North Oak Street, Taft, Oklahoma - 73703
Facility mailing address:	

Primary Contact

Name:	
Email Address:	
Telephone Number:	

Warden/Jail Administrator/Sheriff/Director	
Name:	Christe Sweat
Email Address:	christe.sweat@doc.ok.gov
Telephone Number:	918-221-4517

Facility PREA Compliance Manager	
Name:	Bobby Brinkley
Email Address:	bobby.brinkley@doc.ok.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Joseph Casner
Email Address:	joseph.casner@doc.ok.gov
Telephone Number:	918-683-8365 x 4479

Facility Characteristics	
Designed facility capacity:	999
Current population of facility:	939
Average daily population for the past 12 months:	964
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Females

Age range of population:	19 to 72
Facility security levels/inmate custody levels:	minimum and community
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	90
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	9
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	511

AGENCY INFORMATION	
Name of agency:	Oklahoma Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	3400 Martin Luther King Ave., Oklahoma, Oklahoma - 73111
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Carla Braggs	Email Address:	Carla.Braggs@doc.ok.gov

Facility AUDIT FINDINGS

Summary of Audit Findings

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.

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.

Number of standards exceeded:

8

- 115.31 - Employee training
- 115.33 - Inmate education
- 115.34 - Specialized training: Investigations
- 115.35 - Specialized training: Medical and mental health care
- 115.51 - Inmate reporting
- 115.62 - Agency protection duties
- 115.65 - Coordinated response
- 115.67 - Agency protection against retaliation

Number of standards met:

37

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:	2024-06-03
2. End date of the onsite portion of the audit:	2024-06-05

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:	Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	999
15. Average daily population for the past 12 months:	959
16. Number of inmate/resident/detainee housing units:	8
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:	962
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:	26
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:	17
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:	14
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:	14
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:	12
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:	84

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	1
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:	55
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
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:	90
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:	511

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:	0
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 utilizes contractors to provide college-level courses at the facility. At the time of the onsite audit, all contractors were on summer break.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	15
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input checked="" type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The Auditor was provided a roster of all inmates housed at the facility, sorted by housing location. The Auditor randomly selected inmates from that roster from all housing locations utilizing the criteria cited above.

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):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	16
<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:	3
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:	3

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:	1
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:	1
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:	2
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:	3
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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<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>

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>In addition to the information provided by the facility, the Auditor conducted informal interviews with staff, inmates, and medical/health staff to determine there were no identified transgender inmates at the facility at the time of the onsite audit.</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>1</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>2</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>0</p>
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><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>

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>In addition to the information provided by the facility, the Auditor conducted informal interviews with staff, inmates, and medical/health staff to determine there were no identified inmates placed in segregated housing for risk of sexual victimization at the facility at the time of the onsite audit.</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>No text provided.</p>
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	<p>12</p>
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<p> <input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </p>
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </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>The Auditor was provided a roster of all staff members assigned to the facility, along with shift rosters. The Auditor randomly selected staff members from both shifts (the facility uses 12-hour shifts) to ensure security and non-security staff was included, along with a variety of ranks and assignments.</p>

Specialized Staff, Volunteers, and Contractor Interviews

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.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):

22

76. Were you able to interview the Agency Head?

☒ Yes

☐ No

77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?

☒ Yes

☐ No

78. Were you able to interview the PREA Coordinator?

☒ Yes

☐ No

79. Were you able to interview the PREA Compliance Manager?

☒ Yes

☐ No

☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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
- ☒ Intake staff

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS 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 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 type="radio"/> Yes <input checked="" type="radio"/> No
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

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
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).	Throughout the facility tour, the Auditor spoke with staff and inmates at each location, tested systems, and observed signage.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	The Auditor sampled employee records, inmate records and electronic medical records.
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	5	0	1	4
Total	5	0	1	4

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	1	1	0	0	0
Total	1	1	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	2	0
Total	0	0	2	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:

2

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:	2
101. Did your sample of INMATE-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 inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-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 inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	5
107. Did your selection of SEXUAL HARASSMENT 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 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 type="radio"/> No <input checked="" 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 type="radio"/> No <input checked="" 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:

5

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ 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?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

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.

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☐ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☒ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Identify the name of the third-party auditing entity

Corrections Consulting, LLC

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> Oklahoma Department of Corrections Prison Rape Elimination Act Policy (OP-030601) EWCC Organizational Chart <p>INTERVIEWS</p> <ul style="list-style-type: none"> Acting PREA Coordinator (A/PC) PREA Compliance Manager

115.11 (a)

OP-030601 states that the ODOC maintains a zero tolerance for inmate-on-inmate sexual assault, staff sexual misconduct and sexual harassment toward inmates. Every allegation of sexual assault, abuse, misconduct and harassment is thoroughly investigated. PREA posters will be displayed throughout each facility and will be visible to all staff, inmates, and visitors.

During the admission process, all inmates are provided information about sexual assault, abuse or harassment to include prevention/intervention, self-protection, reporting sexual assault, treatment and counseling.

OP-030601 provides the following definitions:

- Sexual abuse and/or rape includes, but is not limited to; sexual intercourse, oral or anal sodomy, sexual acts with instruments, sexual assault with an object, sexual fondling of a person, or sexual exploitation
- The intentional touching, mauling or feeling, either directly or through clothing, of the genitalia, anus, groin, breast, inner thighs or buttocks, or kissing, of any inmate, when such touching is unrelated to the necessary performance of job duties. Conversation or correspondence, which may demonstrate or suggest a romantic or intimate relationship exists
- Sexual Harassment is defined as:
 - a. Repeated sexually offensive comments, gestures or any physical conduct which is of a sexual nature or sexually suggestive.
 - b. Influencing, promising or threatening an inmate's safety, custody or security level (including recommendations for court actions), privacy, housing, privileges, work detail or program status in exchange for sexual favors.
 - c. Creating an intimidating, hostile or offensive environment for an inmate or others by engaging in or permitting sexually offensive behavior or language that is directed at or observable by inmates or others.

This same policy addresses sanctions against staff and inmates for sustained violations that include sexual abuse or sexual harassment. The presumptive discipline for staff, volunteers, and contractors who violate this policy is termination.

OP-030601 says that it is the policy of the Oklahoma Department of Corrections (ODOC) to provide a safe, humane, and secure environment for all inmates. The agency supports and administers a program of education, prevention, detection, response, investigation and tracking of all reported acts of sexual assault, abuse and harassment. Punishment for the perpetrator is enforced.

The program includes treatment for the victim and the perpetrator and includes ongoing required support for the victim. The agency also provides education to inmates and staff regarding staff sexual misconduct and harassment.

115.11 (b)

The agency has appointed a PREA Coordinator who reports directly to the agency's General Counsel, who in turn reports to the agency Director (agency head). This was confirmed by the Auditor with a review of the agency's Organizational Chart.

OP-030601 specifically states that this position shall have sufficient time and authority to develop, implement and oversee the agency's efforts to comply. The current PREA Coordinator retired shortly before the initiation of this audit and an Acting PREA Coordinator has assumed that role.

The Auditor interviewed the A/PC and he confirmed he has sufficient time and authority to develop, implement and oversee the agency's efforts to comply with the PREA standards.

115.11 (c)

OP-030601 states that a deputy warden at each facility (minimum security and above) shall serve as the facility PREA Compliance Manager (PCM) with overall responsibility of coordinating facility efforts to comply with PREA standards.

	<p>Based on a review of the facility organizational chart, and the Auditor's interview with the PCM (the facility's Deputy Warden), this position reports directly to the facility Warden. Additionally, the PCM told the Auditor during his interview that he does have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p> <p>Based on a review of agency policies and interviews with the A/PC and the PCM, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · Bridgeway Fixed Rate Contract · GEO FY24 Contract <p>INTERVIEWS</p> <ul style="list-style-type: none"> · A/PC <p>115.12 (a)(b)</p> <p>The Auditor reviewed contracts the agency has with Bridgeway, Inc. and The GEO Group, Inc. to house inmates in the custody of the Oklahoma Department of Corrections.</p> <p>In each case the contracts require the two organizations to adopt and comply with PREA standards. Both of these contracts were initiated prior to the previous PREA audit in 2020.</p>

	<p>In the Auditor's interview with the A/PC, he confirmed that the agency monitors the contractors' compliance with the PREA standards.</p> <p>Based on a review of the current contracts and interview with the A/PC, the Auditor has determined that the agency is in compliance with this standard.</p>
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · EWCC Staffing Plan · Shift Rosters · Camera Overlays <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Warden · PCM <p>115.13 (a)(b)</p> <p>The Auditor reviewed the facility staffing plan, shift rosters and video camera overlays for EWCC and determined that it makes its best effort to comply with the staffing plan and provides adequate levels of staffing, along with video monitoring to protect inmates from abuse.</p> <p>Since the last audit the facility has housed a daily average of 964 inmates. The staffing plan was developed and predicated on a capacity of 999 inmates.</p> <p>The Auditor interviewed the Warden and she confirmed that she is actively involved in</p>

developing, reviewing and amending when necessary the facility staffing plan. She confirmed that video surveillance is a crucial part of monitoring and that she continually reviews camera placements, and assessing what adjustments need to be made. The staffing plan is reviewed annually and the most recent plan was signed by facility and agency leadership in March of 2024.

The Warden stated that the facility supervisory and leadership consider the following areas for the staffing plan:

- Generally accepted detention and correctional practices
- Judicial findings of inadequacy
- Any inadequacy findings from federal investigations
- Any inadequacy findings from internal or external oversight bodies
- All components of the facility's physical plant
- Composition of the inmate population
- Number and placement of supervisory staff
- Programs occurring across all shifts
- Prevalence of substantiated and unsubstantiated incidents of sexual abuse

The Auditor also interviewed the PCM and he stated he is actively involved in developing, reviewing and amending the facility staffing plan. He confirmed that when the staffing plan is reviewed, they ensure all of the areas stated above by the Warden are considered.

During the onsite portion of the audit, the Auditor toured the entirety of the facility and observed the number of staff in housing locations, educational spaces, recreation, work areas, vocational, medical, and mental health areas of the facility. In each of those areas, the Auditor observed security and non-security staff moving about those areas, making observations. On only one occasion, did the Auditor see a security staff member in an office area and not on the floor of the housing area. In that instance, the dormitory Unit Manager was in the common area of the dorm speaking with inmates.

Each of these areas has video cameras placed in locations that covered areas where

line of sight is not always possible. These cameras are monitored at the main control area of the facility and by leadership staff. The Auditor viewed the camera placements and found they covered nearly all of the areas that may be blocked by line of sight. Additionally, the facility is utilizing convex mirrors to cover areas that otherwise would be impractical to cover with cameras.

The Auditor spoke informally with security and non-security staff who said that they spend the majority of their shifts moving about their assigned area and each had a keen awareness of their role to prevent sexual abuse and sexual harassment in the facility. This was also made evident in informal conversations with inmates who said that staff is constantly moving about and does so in intervals that are not consistent, meaning that they are never sure when staff may be in their immediate area.

The facility reported no instances when it was unable to meet the staffing plan. This was confirmed with the Auditor's interview with the Warden, and also with informal conversations with other staff members.

115.13 (c)

At least once every year the facility/agency, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

The Auditor reviewed the current staffing plan, which was approved and signed by the Acting Warden and the PC on March 21, 2024. The Auditor also confirmed this with the PC (the Acting Warden at the time the plan was signed) and with the A/PC.

115.13 (d)

OP-030601 states that each facility shall ensure written policy and practice of having intermediate level or higher-level supervisors conduct and document unannounced rounds during day and night shifts to identify and deter staff sexual abuse and sexual harassment.

	<p>The Auditor reviewed log books for each housing area in the facility and multiple work locations and confirmed that unannounced rounds are being performed by intermediate or higher level staff. The unannounced rounds are logged as such in the log books, and the Auditor confirmed they are being conducted routinely across all shifts. These rounds were also confirmed by line staff, who said that supervisory staff are routinely inside housing and work areas. Policy OP-030601 specifically states that staff is prohibited from alerting others to the unannounced rounds. This was by security staff who said that staff does not alert others when the rounds are being conducted. Each staff member who spoke with the Auditor said it is normal to have supervisory staff in their assigned work areas, therefore it is not unexpected and never a surprise to see them.</p> <p>The Auditor also interviewed intermediate and higher level staff who confirmed the above policy, statements and practice.</p> <p>Based on a thorough review of agency policies, the Auditor's observations, formal interviews with intermediate and higher level staff, and informal conversations with line staff and inmates, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · Pre-Audit Questionnaire (PAQ) <p>INTERVIEWS</p> <ul style="list-style-type: none"> · PCM <p>Based on information provided by the facility in the PAQ and the Auditor's interview with the PCM, EWCC does not house youthful offenders.</p>

	Based on the above, the Auditor has determined that the facility is in compliance with this standard.
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none">· OP-030601· PAQ· EWCC Dorm Post Orders· Security Search/Seizure Curriculum; Search and Seizure Standards (OP-040110) <p>INTERVIEWS</p> <ul style="list-style-type: none">· PCM· Random Sample of Staff· Random Sample of Inmates <p>115.15 (a)</p> <p>OP-030601 states a person of the same gender as the inmate will be available to perform gender specific tasks (e.g., strip and visual body cavity searches) as defined in OP-040110 entitled “Search and Seizure Standards.”</p> <p>Based on information provided in the PAQ and the Auditor’s interview with the PCM, there have been no cross-gender strip or cross-gender visual body cavity searches of inmates in the past 12 months.</p>

The Auditor observed areas used to conduct strip searches, visual body cavity searches, and pat-down searches and saw that in all cases privacy screens were in place to obstruct any opposite-gender viewing. The areas still allowed for adequate supervision of opposite-gender supervisory staff from the immediate area.

The Auditor also had informal conversations with staff and inmates, all who confirmed that cross-gender strip, body cavity, and pat-searches are never conducted at the facility.

115.15 (b)

The facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Additionally, the facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

Based on information provided in the PAQ and confirmed by the PMC, there have been no instances of cross-gender pat-down searches of female inmates at the facility.

The Auditor was provided a roster of all staff members at the facility, along with shift rosters. The Auditor randomly selected 12 staff members from those rosters, ensuring diversity of assignment, tenure and gender. The Auditor interviewed those 12 and all stated that no inmates had been unable to participate in activities because female staff was unavailable to conduct pat-down searches.

The Auditor was also given a roster of all inmates housed at the facility, organized by housing area. The Auditor randomly selected 15 of those inmates ensuring diversity of housing location, race, and age. The Auditor interviewed those 15 and none stated that they had been unable to participate in activities because female staff was unavailable to conduct pat-down searches.

115.15 (c)

OP-030601 states that all cross-gender strip searches and any cross-gender body

cavity searches shall be documented as described in OP-050109 entitled “Reporting of Incidents.” Any cross-gender pat searches of inmates will be documented.

EWCC Dorm Post Orders state that all inmate pat searches and strip searches will be conducted in accordance with OP-040110 entitled “Search and Seizure.” The officer will notify the shift supervisor if a female officer is not assigned to the dorm and request assistance prior to conducting a strip search of an inmate. The officer will ensure written documentation of the shakedown results are submitted to the shift supervisor prior to end of shift.

115.15 (d)

OP-030601 states that an inmate shall be able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.

EWCC Dorm Post Orders state that male officers will announce, “Man on the floor,” prior to entrance to the housing unit and prior to entering the bathroom.

The Auditor interviewed 15 randomly selected inmates. Of those 15, 14 stated that male officers announce themselves at the beginning of their shift if working as the dorm officer, and anytime they enter a bathroom area. One inmate stated that she has never heard an announcement. All 15 inmates said they are never naked in front of male staff in any circumstances.

The Auditor also interviewed 12 randomly selected staff, all of whom stated that male officers announce themselves when entering a housing area or restroom. All 12 staff members said they believed inmates were able to change clothes and use the shower and restroom with privacy

During the tour of the facility, the Auditor observed that in each instance a male officer was entering a housing area, an announcement was made. The same occurred when entering a restroom. The Auditor also observed that each shower and toilet had a privacy curtain that would protect a female inmate from being seen naked, but also provided an officer the ability to see that the area was occupied by seeing the feet and ankles of any occupant.

During the facility tour the Auditor reviewed the video surveillance system and observed no areas where inmates' privacy was compromised.

115.15 (e)

OP-040110 states that the facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by review of medical records by the qualified health care/medical provider or, if necessary, by learning that information as part of a broader medical determined during conversations with the inmate, by review of the medical records by the qualified health care/medical provider or, if necessary, by learning that information as part of a broader medical examination conducted in private by a qualified health care/medical provider.

The Auditor interviewed 12 randomly selected staff and all stated that inmates are never searched for the sole purpose of determining genital status.

At the time of the audit, there were no identified transgender or intersex inmates assigned to the facility. The Auditor conducted informal conversations with inmates and staff, and none were aware of any transgender inmates at the facility at the time of the onsite audit.

115.15 (f)

The Auditor randomly selected 12 names from the facility's employee roster and confirmed that all had received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

Additionally, the Auditor interviewed 12 randomly selected staff, all of whom stated they had received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

	Based on a review of agency policies, review of training curriculum, and interviews with staff and inmates, the Auditor has determined that the facility is in compliance with this standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none">· OP-030601· ODC Interpreter List 2024 <p>INTERVIEWS</p> <ul style="list-style-type: none">· Warden· Inmates with Disabilities or who are Limited English Proficient· Random Sample of Staff <p>115.16 (a)(b)</p> <p>OP-030601 states that every inmate will receive a written copy of the agency's orientation material in formats or through methods to ensure effective communication. Inmates whose primary language is not English will normally be provided a copy or translation of the orientation material in their own language. If literacy problems, intellectual disabilities/disabilities (visual/hearing impairments) exist, the inmate will be assisted in understanding the material.</p>

The Auditor interviewed the Warden, and she indicated that the agency has established procedures to provide inmates with disabilities and inmates who are limited English proficient equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

The Auditor also interviewed two inmates who were limited English proficient, and one inmate with a cognitive disability. All three said they had received materials they could understand. The inmate with a cognitive disability stated that if she needs assistance understanding written materials, she has resources available to assist, such as staff members.

Both LEP inmates stated they have access to interpretive services if necessary.

The facility also provided a roster of ODC employee interpreters who speak a combined 21 languages and can be reached via the telephone in any of the housing units, or via the Securus Technology tablet phone application, which each inmate has in their possession.

115.16 (c)

OP-030601 states that all inmate education shall be provided to inmates by staff. No inmate interpreters will be utilized except in exigent circumstances. However, approved community or facility volunteers may be utilized.

Based on information provided by the facility, and confirmed in interviews with staff, inmates, and informal conversations with staff and inmates, there have been on instances in the past 12 months where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations.

Based on a review of agency policy, interviews and informal conversations with inmates and staff, the Auditor has determined that the facility is in compliance with this standard.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-110235, Human Resources · OP-110210, Personnel · Employee Records <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Human Resources Staff <p>115.17 (a)</p> <p>OP-030601 states that policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: (1) 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); (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> <p>The Auditor randomly selected 10 employee records, ensuring that the newest hired, tenured employees, and those recently promoted were included to ensure a breadth of facility staff. Each record contained proper criminal record background checks and questions regarding past conduct were asked and answered.</p> <p>115.17 (b)</p>

OP-110235 states that the appointing authority will consider any incidents of sexual harassment in determining whether to hire or promote any applicant/employee.

The Auditor interviewed two members of the Human Resources staff who confirmed that they consider any incidents of sexual harassment in determining whether to hire or promote any applicant/employee.

115.17 (c)

OP-110235 states that policy requires that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

In the past 12 months, the facility reported that 22 individuals had been hired who may have contact with inmates.

The Auditor interviewed Human Resources staff who confirmed that the agency performs criminal background checks and considers pertinent civil or administrative adjudications for all newly hired employees who may have contact with inmates, and employees who are considered for promotion, who may have contact with inmates.

115.17 (d)

OP-110235 states that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates.

The facility reported that no contractors had been hired in the past 12 months.

The Auditor interviewed Human Resources staff who confirmed that the agency performs criminal background checks and considers pertinent civil or administrative

adjudications for all contractors who may have contact with inmates.

115.17 (e)

OP-110235 states that criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates.

The Auditor interviewed Human Resources staff who stated that the agency utilizes the National Crime Information Center (NCIC) to conduct criminal background checks for current employees and contractors who may have contact with inmates.

115.17 (f)(g)

The Auditor reviewed the records of 10 employees and observed that all were asked directly about previous misconduct described in paragraph (a) of this section in written applications for hiring or promotions.

The Auditor interviewed Human Resources staff who confirmed this practice and that these questions are asked in interviews. They also stated that the facility imposes an affirmative duty to disclose any such previous misconduct.

OP-110210 states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination, or discontinuation of the hiring process.

115.17 (h)

The Auditor interviewed Human Resources staff who said that if a former employee applies for work at another institution, upon request from that institution, the facility will provide information on substantiated allegations of sexual abuse or sexual harassment involving former employees, unless prohibited by law.

	Based on a review of agency policies and interviews with Human Resources staff, the Auditor has determined that the facility is in compliance with this standard.
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> PAQ <p>INTERVIEWS</p> <ul style="list-style-type: none"> Warden PCM <p>115.18 (a)(b)</p> <p>Since the last PREA Audit, the facility has not acquired or made a substantial expansion or modification to existing facilities. This was confirmed in interviews conducted by the Auditor with the Warden and PCM.</p> <p>Since the last PREA Audit, the facility has incorporated new video surveillance software, which has expanded the facility’s ability to monitor live video and historical events. Additionally, it is the intent to move approximately 18 existing video surveillance cameras in closed buildings, to other locations of the facility to increase sexual safety for inmates and staff.</p> <p>Based on a review of the PAQ, observation of new video surveillance software, and interviews with the Warden and PCM, the Auditor has determined that the facility is in compliance with this standard.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none">· OP-030601· A National Protocol for Sexual Assault Medical Forensic Examinations· OP-140118, Health Services, Emergency Treatment Protocols· Memorandum of Understanding (MOU), ODOC-Women in Safe Homes (WISH) Rape Counselor· MOU, SAFE/SANE Nurse· Sexual Abuse Help is Available Poster <p>INTERVIEWS</p> <ul style="list-style-type: none">· Random Sample of Staff· SAFE/SANE Staff· PCM· Facility Medical Staff· Inmates who Reported Sexual Abuse· Investigative Staff <p>115.21 (a)</p> <p>All allegations of sexual assault and sexual harassment are referred to the Office of Inspector General (OIG). The OIG Agent in Charge (AIC) will make the determination on whether an investigator will respond to initiate a criminal investigation, an administrative investigation, or if the investigation will be returned to the facility for its own investigation.</p>

Based on interviews with the PCM and OIG investigators, the agency and facility follow a uniform evidence protocol.

The Auditor interviewed 12 randomly selected employees and all 12 understood the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. Of the 12, 10 knew that OIG is responsible for conducting criminal investigations. All 12 knew that the facility played at least some role in conducting administrative investigations.

115.21 (b)

Based on a review of the agency's policy, it is developmentally appropriate for youth, although EWCC does not hold youthful offenders. That same review revealed that the protocol was adapted from or otherwise based on the most recent edition of the DOJ'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.

115.21 (c)

Agency policy states that all inmates who experience sexual abuse have access to forensic medical examinations. Forensic medical examinations can be conducted at the facility, but not by facility medical staff. The facility has an MOU with a SANE nurse affiliated with the Muskogee County Child Advocacy Center (MCCAC). If this SANE nurse is not available, inmates who experience sexual abuse have access to forensic medical examinations at the Saint Francis Hospital in Muskogee, about 12 minutes from the facility.

OP-140118 states that alleged victims of non-consensual sexual contact will be provided unimpeded access to emergency medical treatment of crisis intervention services and referred to a local community provider for any additional treatment, gathering of evidence and forensic examination.

This same policy section says that treatment services will be provided to the victim without any co-pay and regardless of whether the victim names the abuser or cooperates with any investigation arising from the reported incident.

The Auditor interviewed Medical Staff who indicated that when an inmate is sent for a forensic exam, the facility will obtain written and/or electronic medical records from the treating facility, and document its efforts to provide a SANE examination.

In the past 12 months the facility reported no forensic examinations as a result of an allegation of sexual abuse.

The Auditor interviewed a SANE nurse at Saint Francis Hospital, who stated that they are indeed responsible for conducting all forensic medical examinations for the facility. She also stated that if SANE nurse were not on duty, they would rely on an on-call nurse to respond to conduct the examination.

115.21 (d)

EWCC has an active MOU with WISH, who provides victim advocate services to victims who have alleged sexual abuse. When those referrals are made, the facility documents them in writing. This was confirmed in the Auditor's interview with the PCM.

The PCM also said in his interview that in the event a representative from WISH was not available, the facility would provide a qualified agency staff member, which typically would be a case manager.

The Auditor observed the Sexual Abuse Help is Available Poster in each of the housing areas, which provides methods to contact WISH.

The Auditor interviewed an inmate who had reported sexual abuse and she said that they were offered advocacy services by the facility, but they chose not to use them. She said that she would prefer to utilize facility Mental Health staff and knows that they are available.

115.21 (e)(h)

	<p>OP-030601 states that with the alleged victim's consent, an approved rape advocate and/or case manager may sit in on investigative interviews. This was confirmed in interviews with the PCM by the Auditor. In her interview with the Auditor, an inmate who had alleged sexual abuse was provided with the opportunity to have an advocate or case manager present during interviews.</p> <p>The Auditor confirmed that advocates and case managers have been screened for appropriateness to serve in the role and have received education concerning sexual assault and forensic examination issues.</p> <p>Standard subsection 115.21 (f) is not applicable and the Auditor is not responsible for auditing subsection 115.21 (g).</p> <p>Based on a review of agency and facility policies, the Auditor's observations, along with interviews with Random Staff, the PCM, OIG investigators, the SANE nurse, facility medical staff, and an inmate who had alleged sexual assault, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-040117, Security · OP-030601 · Investigative Files <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Warden · Investigative Staff

115.22 (a)

OP-030601 states that the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct).

In the past 12 months, the facility reported seven allegations of sexual abuse and sexual harassment were received. All seven of those cases were referred to the OIG, and all resulted in an administrative investigation. One of the seven investigations had not yet been completed at the time of the onsite audit.

The Auditor interviewed the Warden who stated that she ensures that administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. She stated that all allegations are referred to the OIG for review. The Agent in Charge (AIC) will determine if an immediate response is required. The AIC will then determine if a criminal investigation is warranted. If not, the AIC will determine if the OIG will conduct an administrative investigation (as in cases where the alleged perpetrator is a staff member), or if it will be returned to the facility for investigation. The Warden said that if it is returned, a trained facility investigator would conduct the investigation.

115.22 (b)

OP-030601 states that all incidences of sexual abuse/assault or harassment, including third party and anonymous reports, will be reported to the OIG. The facility head/ unit head will ensure immediate verbal notification to the OIG or the OIG duty officer.

The Auditor reviewed the agency website and found that the ODOC makes information regarding the process readily available Prison Rape Elimination Act (oklahoma.gov).

The Auditor reviewed all seven investigative reports (six closed and one pending), and the referrals to OIG were present in each case.

	<p>The Auditor interviewed two investigators from the OIG and one facility investigator. Each state that the agency and facility have policy that require allegations of sexual abuse or sexual harassment be referred for investigation to the OIG.</p> <p>Standard subsection 115.22 (c) is not applicable to this facility and the Auditor is not responsible for auditing subsection 115.22 (d).</p> <p>Based on a review of agency policy, investigative files, and interviews with agency and facility investigators, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · PREA for New Employees Training Curriculum · Employee Training Records <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Random Sample of Staff <p>115.31 (a)</p> <p>OP-030601 states that all staff who may have contact with inmates shall receive training to emphasize the zero tolerance of sexual abuse/harassment, aid in the prevention of sexual abuse and harassment of inmates and promote awareness of the serious impact of sexual victimization within the correctional setting.</p>

This same section says training related to the prevention, detection, reporting and response of sexual abuse and harassment shall be a part of orientation/pre-service training in accordance with OP-100101 entitled "Training and Staff Development."

OP-030601 also states that the agency trains all employees who may have contact with inmates on the following:

- the agency's zero tolerance policy on sexual abuse and sexual harassment.
- the right of inmates to be free from sexual abuse and sexual harassment.
- the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.
- the dynamics of sexual abuse and sexual harassment in confinement.
- the common reactions of sexual abuse and sexual harassment victims.
- how to detect and respond to signs of threatened and actual sexual abuse.
- how to avoid inappropriate relationships with inmates.
- how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates.
- how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The Auditor interviewed 12 randomly selected staff members and each demonstrated a complete understanding of the bulleted items above along with their responsibility regarding prevention, detection, reporting, and response in accordance with agency policy.

115.31 (b)

EWCC houses only female inmates and training provided to staff is tailored to that population, which was confirmed by the Auditor's review of the training curriculum.

Anytime employees are reassigned from another facility, they receive in-service

	<p>training to ensure they are familiar with the management of female inmates at the facility.</p> <p>The Auditor confirmed this through a newly assigned employee and a review of 10 randomly selected employee records, which all demonstrated completion of the training.</p> <p>115.31 (c)(d)</p> <p>Based on a review of training records, along with informal and formal conversations with staff, PREA training is received by all employees at least on an annual basis, if not more. In addition to formal in-service training, the facility also provides on-line training which includes PREA.</p> <p>The Auditor interviewed 12 randomly selected staff members, and all said that PREA is a continual topic at training and at the forefront of the operation. This was also confirmed by the Auditor in a review of employee training records.</p> <p>Each annual training roster contains the signature of the employee affirming that the PREA training they have received has been understood.</p> <p>Based on a review of agency policy, the PREA training curriculum, and informal and formal interviews with staff, the Auditor has determined that the facility has exceeded this standard.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · PREA Contractors Training · PREA New Volunteer Training

- OP-030601
- Contractor and Volunteer Training Records

INTERVIEWS

- Volunteers who have Contact With Inmates

115.32 (a)

The Auditor reviewed the training curriculum for volunteers and contractors and confirmed that volunteers and contractors who have contact with inmates are trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

The facility reported that it has trained 511 volunteers and contractors.

The Auditor was required to complete the training for volunteers before entering the facility for the first time. A binder containing the curriculum is in the central control building. The Auditor reviewed the training as is required for all volunteers entering the facility and signed a roster acknowledging that the material was reviewed and understood.

The Auditor also interviewed a volunteer, who confirmed her training.

At the time of the onsite audit, there were no contractors available. According to facility staff, the only contractors are college educators who provide classes for college-level inmate students. The director of the education department confirmed that the contractors had concluded the semester and were not at the facility at the time of the audit.

115.32 (b)(c)

	<p>Through review of the training curriculum, the Auditor determined that the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates.</p> <p>The training also emphasizes the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents.</p> <p>In her interview with the Auditor, the volunteer stated she was educated on the zero-tolerance policy, how to make reports, along with prevention, detection and response.</p> <p>The Auditor reviewed training rosters for contractors and volunteers which confirmed their participation, along with signatures acknowledging their understanding of the material.</p> <p>Based on a review of training curriculum, the Auditor's personal experience with the training, along with an interview with a volunteer, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.33	Inmate education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · Inmate Records <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Intake Staff · Random Sample of Inmates

115.33 (a)(b)

OP-030601 states that during assessment and reception, all new inmates will receive verbal and written information about sexual abuse and harassment. This information will address the agency and facility zero tolerance standard, prevention/intervention, self-protection, how to report acts or suspicions of sexual abuse, assaults or harassment by inmates or staff to include reporting utilizing the inmate PREA Hotline (073). Inmate phones shall have instructions for using the PREA Hotline posted in a conspicuous location on or near the phones.

In the past 12 months the facility reported a total of 515 inmates were received at intake and that all 515 were provided with this information.

During the facility tour, the Auditor observed signage in all housing areas and other conspicuous places in the facility on how to report sexual abuse, and how to obtain advocacy services through the rape crisis center. Additionally, each housing area contains a large, brightly colored "073" PREA Hotline phone number on the wall. The 073-telephone number goes directly to the OIG, it is not monitored, and it is not recorded. The PREA Hotline can be reached without self-identification.

Each inmate is provided with a Securus Technologies tablet, with a telephone application, so inmates can make a more private notification to OIG, opposed to using the wall phone in the dormitory. The Auditor tested the wall phones and had an inmate test the tablet function, successfully reaching the OIG through the 073 number.

Additionally, the Securus tablets contain an FYI application, that includes specific information on PREA in English and in Spanish.

The Auditor interviewed a member of intake staff who stated that every inmate is provided with an information packet that includes specific information regarding PREA. The intake officer ensures that the information is understood, and if it is not, arranges for means (interpreter, reader) so that the inmate can understand the information.

The Auditor interviewed 15 randomly selected inmates. All 15 said they received the information above at intake.

The Auditor also conducted informal conversations with inmates and staff. All confirmed the distribution of PREA materials at intake, and every inmate was aware of the 073 PREA Hotline number to make reports.

In the past 12 months the facility reported that all 515 inmates admitted at intake received comprehensive education on their rights to be free from both sexual abuse and sexual harassment within 30 days of intake.

The education is presented in person and with a video in combination with a broader orientation process.

The Auditor interviewed an intake staff member who stated that every inmate admitted to the facility receives comprehensive education on PREA in a in-person, classroom format, along with a PREA-specific video.

The Auditor interviewed 15 randomly selected inmates; all of whom said they had received the comprehensive PREA training within the first 30 days of having arrived at the facility. Each was able to articulate portions of the training, including their right to be free from both sexual abuse and sexual harassment, how to report sexual abuse or sexual harassment, their right not to be punished for reporting sexual abuse or sexual harassment.

115.33 (c)

OP-030601 states that upon transfer to a different facility, the inmate will receive orientation in regard to PREA policies and procedures which may differ from a previous facility. Community centers shall provide refresher information to transferred inmates.

The Auditor interviewed an intake staff member who stated that all inmates coming to EWCC come from other ODOC facilities and that they do not take direct admissions. She reiterated that all inmates received comprehensive education within

30 days of intake.

115.33 (d)(e)

OP-030601 states that every inmate will receive a written copy of the agency's orientation material in formats or through methods to ensure effective communication. Inmates whose primary language is not English will normally be provided a copy or translation of the orientation material in their own language. If literacy problems, intellectual disabilities/disabilities (visual/hearing impairments) exist, the inmate will be assisted in understanding the material.

During the onsite audit, the Auditor reviewed training rosters for the comprehensive education provided to the inmates and observed that inmates sign the orientation/ education roster acknowledging that they participated and understood the material presented.

115.33 (f)(g)

During the facility tour, the Auditor observed that the facility ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, and other written formats. Signage is posted in housing areas, work areas, education areas, and other conspicuous areas of the facility. They include information in English and Spanish and provide resources for the rape crisis center and PREA Hotline.

Additionally, each of the tablets inmates are provided contain written information in English and Spanish, such as the inmate handbook and detailed PREA information.

During the facility tour, the Auditor had inmates demonstrate how to access those resources on the tablet.

Based on a review of agency policy, observations and systems testing by the Auditor, along with interviews of intake staff and inmates, the Auditor has determined that the facility has exceeded this standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · National Institute of Corrections (NIC) Investigating Sexual Abuse in a Confinement Setting Curriculum · Memorandum from the Agency PREA Coordinator · Training Records <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Investigative Staff <p>115.34 (a)(b)(c)</p> <p>OP-030601 states that specialized training is provided for employees who may respond, as part of their job duties, to reported incidents of sexual assault. This training may include, but is not limited to: crime scene management, elimination of contamination in accordance with OP-140125 entitled “Bloodborne Pathogen Exposure Control Program,” evidence collection protocol and crisis intervention.</p> <p>The agency conducts both criminal and administrative investigations. Criminal investigations are conducted by agents of the Office of Inspector General, who are sworn peace officers in the state of Oklahoma. Most administrative investigations are conducted by facility-level investigators. All of the investigators attend a training course provided by the NIC titled Investigating Sexual abuse in a Confinement Setting.</p> <p>The Auditor interviewed two agents from the OIG and one facility investigator. All three stated that they had successfully completed the training course stated above</p>

	<p>and said the following topics were covered:</p> <ul style="list-style-type: none"> Techniques for interviewing sexual abuse victims Proper use of Miranda and Garrity warnings Sexual abuse evidence collection in confinement settings The criteria and evidence required to substantiate a case for administrative or prosecution referral <p>During the investigator interviews, the Auditor found all three to be extremely experienced and knowledgeable about their investigative responsibilities as it related to sexual abuse and sexual harassment allegations. Each demonstrated complete command of investigative techniques, appropriate uses of Garrity and Miranda warnings, and superior knowledge on evidence collection.</p> <p>The Auditor reviewed the training records of nine agency investigators and confirmed that all had successfully completed the specialized NIC training.</p> <p>115.34 (d)</p> <p>The Auditor is not required to audit this provision.</p> <p>Based on a review of agency policy, training curriculum, interviews with investigators, and a review of training records, the Auditor has determined that the facility has exceeded this standard.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	DOCUMENTS REVIEWED

- OP-030601
- PREA Specialized Medical Training
- Training Logs

INTERVIEWS

- Medical and Mental Health Staff

115.35 (a)(b)(c)(d)

OP-030601 states that Mental Health and medical staff will be provided training to detect and assess signs of sexual abuse and/or predation, preserve evidence of sexual abuse, respond to sexual assault victims, and knowledge of department procedures in regard to the PREA reporting process. Specialized training will be conducted upon new hire and annually. Documentation shall be retained in the employee's file.

The facility employs 18 medical and mental health staff and based on a review of training logs, the Auditor was able to determine that all 18 had received the specialized training required.

The Auditor reviewed the training curriculum and found that the following topics were covered:

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

The Auditor interviewed one Medical Staff member and one Mental Health Staff

	<p>member. Each stated they had received the specialized and the training mandated for employees under §115.31. Each staff member was thoroughly knowledgeable regarding their responsibilities of their roles in treating inmates who have alleged sexual abuse or sexual harassment.</p> <p>The Auditor reviewed facility training records and confirmed that both staff members interviewed had successfully completed the training mandated for employees.</p> <p>Based on a review of agency policy, training logs and records, and interviews with Medical and Mental Health Staff, the Auditor has determined that the facility has exceeded this standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · OP-030102, Facility Operations Inmate Housing · Cell Assessment Form · Self-Report Form <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Staff Responsible for Risk Screening · Random Sample of Inmates · A/PC · PCM <p>115.41 (a)(b)(c)</p>

OP-030601 states that all inmates upon admission to a facility or transfer to another facility shall be screened for risk of sexual victimization or sexual abusiveness toward other inmates.

During the onsite visit, the Auditor learned that each inmate who arrives at the facility completes a self-report form prior to being housed. The intake staff member interviewed said that referrals to Medical and Mental Health are made in accordance with PREA standards. Within 72 hours of arrival at the facility, a unit manager will formally interview each inmate using an objective screening instrument to confirm their responses and elicit any additional information.

The Auditor interviewed an intake staff member and a unit manager and each stated that inmates are screened upon admission to the facility, or transfer to another facility for risk of sexual victimization or sexual abusiveness toward other inmates.

During the Auditor's interview with 15 randomly selected inmates, 13 stated they had been asked questions about whether they had been sexually abused, identified as gay or lesbian, or bisexual, and whether they might be in danger of sexual abuse at the facility. The two who did not answer affirmatively had been at the facility for more than two years and did not specifically remember if they had been asked those questions.

The Auditor also conducted informal conversations with staff members and inmates, all of whom confirmed the process as stated above. Although no intakes occurred during the Auditor's onsite visit, the intake staff member demonstrated how the process is conducted. Additionally, the unit manager stated that each of the inmate screening interviews takes place in their private office.

During the past 12 months, all 515 inmates entering the facility whose length of stay was for 72 hours or more had been screened within 72 hours of entry.

The Auditor reviewed the records of the 15 randomly selected inmates and confirmed that each had completed the self-report form, and each had been formally screened by a unit manager within 72 hours of entry into the facility.

115.41 (d)(e)

The Auditor reviewed the objective screening instrument, called a Cell-Assessment Form, and it assesses the following:

- Whether the inmate has a mental, physical, or developmental disability
- The age of the inmate
- The physical build of the inmate
- Whether the inmate has been previously incarcerated
- Whether the inmate's criminal history is exclusively non-violent
- 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 nonconforming
- 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

The Auditor interviewed a intake staff member who identified each of the areas above considered in the screening instrument. The staff member also reiterated that inmates initially complete the self-report form to immediately identify potential concerns, and then within 72 hours, the inmate will meet face-to-face with the unit manager to have a full screening completed.

115.41 (f)

OP-030102 states that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.

During the past 12 months all 515 inmates whose length of stay in the facility was for

30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake. This was also confirmed in an interview with intake staff and unit managers.

The Auditor interviewed 15 randomly selected inmates and all 15 stated they had been asked the same types of questions within the first 30 days after arrival at the facility.

The Auditor also reviewed the records of the 15 inmates, and all contained the initial assessment along with the reassessments.

115.41(g)

OP-030102 states that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. This was confirmed through interviews by the Auditor with intake staff and the 15 randomly selected inmates.

The Auditor reviewed the record of an inmate who had reported sexual abuse and confirmed that she had been reassessed.

115.41 (h)

OP-030601 prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability.

The Auditor interviewed a unit manager who stated that inmates are not disciplined in any manner for refusing to answer or disclose the information stated above.

	<p>115.41 (i)</p> <p>The Auditor interviewed the A/PC, PCM, unit manager, and intake staff, all of whom stated that only those personnel who have a need to know sensitive information are allowed access to that information.</p> <p>The Auditor observed that physical inmate records are located in locked filing cabinets in offices not accessed by staff members, other than those who work in that area and are responsible for the maintenance of those records. Unit managers, who conduct the screenings via computer, access the system through password-protected means, which are not available to other staff members.</p> <p>The Auditor also conducted informal conversations with staff who said that only personnel who are on a need-to-know basis have access to sensitive information.</p> <p>Based on a review of agency policy, inmate records, and interviews with the A/PC, PCM, unit managers, intake staff, and inmates, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> OP-030601 <p>INTERVIEWS</p> <ul style="list-style-type: none"> PCM Staff Responsible for Risk Screening

115.42 (a)(b)

OP-030601 states that the facility uses information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

The Auditor interviewed the PCM and staff responsible for risk screening, who confirmed that individual determinations are made to determine housing, bed, work, education and programming assignments to separate high risk inmates of sexual victimization from those at high risk of being sexually abusive.

The Auditor was provided with documentation that demonstrated that risk-based housing decisions were indeed being made.

115.42 (c)(d)(e)(f)(g)

OP-030601 states that in 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 facility shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

The Auditor interviewed the PCM who said that when determining housing assignments for transgender or intersex inmates, they consider whether the placement ensures the inmate's health and safety and whether the placement presents management or security problems.

The PCM also said that any programming assignments for transgender or intersex inmates would be reassessed at least twice each year to review any threats to safety of the inmate. This was also confirmed in an interview with a unit manager. Each also stated that the inmate's own view of their safety would be given serious consideration.

The PCM and unit manager also stated that transgender and intersex inmates are

	<p>afforded the opportunity to shower separately from other inmates. They also said that the facility does not segregate lesbian, gay, transgender, bisexual, or intersex inmates into dedicated facilities, units, or wings based solely on their identified status.</p> <p>At the time of the onsite audit, the facility did not have any identified transgender or intersex inmates. Additionally, the Auditor conducted informal conversations with staff and inmates who confirmed that there have been transgender inmates housed at the facility in the past, but none were aware that any were present at the time of the onsite audit.</p> <p>The Auditor also interviewed the A/PC who stated that the agency never places lesbian, gay, transgender, bisexual, or intersex inmates in designated housing areas based on their sexual orientation.</p> <p>During the onsite audit, the Auditor toured each housing area, which provides individual showers with shower curtains, affording transgender, or intersex inmates to shower separately from other inmates.</p> <p>Based on a review of agency policy, and interviews with the A/PC, PCM and unit manager, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <p>· OP-030601</p> <p>INTERVIEWS</p>

- Warden
- Staff who Supervise Inmates in Segregated Housing

1154.43 (a)

OP-030601 states that inmates at high risk for sexual victimization shall not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for no more than 24 hours while completing the assessment.

The Auditor interviewed the Warden who confirmed this policy.

During the past 12 months the facility reported that no inmates had been placed in involuntary segregated housing due to a high risk of sexual victimization.

115.43 (b)(c)(d)

OP-030601 says that inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education or work opportunities the facility shall document:

1. The opportunities that have been limited
2. The duration of limitation
3. The reasons for such limitations

During the past 12 months the facility reported that no inmates had been placed in involuntary segregated housing due to a high risk of sexual victimization, therefore there were no inmate interviews conducted.

	<p>The Auditor interviewed Staff who Supervise Inmates in Segregated Housing and they stated that if an inmate is placed into segregated housing as stated above, they would still have access to programs, education and work opportunities to the extent possible and that the facility would document if the opportunities had been limited, for how long, and the reason for the limitations. The staff member also stated that no inmate would be housed beyond the point when alternative means of separation could be identified. The Warden also concurred with this in her interview with the Auditor.</p> <p>During the past 12 months the facility reported that no inmates had been placed in involuntary segregated housing due to a high risk of sexual victimization.</p> <p>115.43 (e)</p> <p>OP-030601 states that every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. This was confirmed by the Auditor in an interview with Staff who Supervise Inmates in Segregated Housing.</p> <p>Based on a review of agency policy and interviews with the Warden and Staff who Supervise Inmates in Segregated Housing, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · MOU with the Oklahoma State Bureau of Investigation (OSBI) · Inmate Handbook

INTERVIEWS

- Random Sample of Staff
- Random Sample of Inmates
- PCM

115.51 (a)(b)

OP-030601 establishes multiple internal ways for inmates to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.

This policy says that reporting of sexual abuse/harassment; retaliation by other inmates or staff for reporting sexual abuse or harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. This will include information that the inmate victim has the option to report the incident to a designated staff member or any other staff. Other reporting methods include: facility/unit head, third party contacts, PREA Hotline, sick call, request to staff, anonymous, office of Inspector General or the Oklahoma State Bureau of Investigations.

The Auditor interviewed 12 randomly selected staff members, all of whom were able to name multiple methods inmates have to privately report sexual abuse and sexual harassment.

The Auditor also interviewed 15 randomly selected inmates. All 15 were able to provide at least two methods to privately report sexual abuse or sexual harassment. All 15 specifically stated they can call 073 on any inmate telephone, or through the phone application on their Securus tablet.

The Auditor tested the phone system and was able to easily reach the OIG through the 073-phone number. The Auditor also had three inmates demonstrate the phone app on the tablet, and each were easily able to show how the system works and the ease of reaching the OIG through 073.

During the onsite audit the Auditor observed signage in all housing locations, and many other conspicuous locations, which provided addresses for the Oklahoma State Bureau of Investigations and a rape crisis center.

The Auditor also conducted informal conversations with staff and inmates, all of whom knew multiple ways of making private reports. It was clear that reporting mechanisms were common knowledge among all staff and inmates.

The facility does not house inmates solely for civil immigration purposes.

115.51 (c)(d)

OP-030601 states that staff, volunteers or contractors shall accept reports made verbally, anonymously, in writing and from third parties. Verbal reports shall be documented in an "Incident/Staff Report (OP-050109, Attachment A) in Section-03 Facility Operations OP-030601 Page: 20 Effective Date: 12/01/2021 accordance with OP-050109 entitled "Reporting of Incidents."

The Auditor interviewed 12 randomly selected staff members who all said that they must accept, and document all reports of sexual abuse and sexual harassment. Each said these reports must be documented in writing through official agency reporting mechanisms.

The staff members were also asked by the Auditor how they can privately make a report of inmate sexual abuse or sexual harassment. Each said they would contact either the OIG, OSBI, or both.

The Auditor also interviewed 15 randomly selected inmates who stated that they can make reports verbally, or in writing. Fourteen of the 15 said they could notify a family member and have them make a report. One inmate said she had no family member to contact on the outside.

Based on a review of agency policy, and interviews with randomly selected staff and inmates, the Auditor has determined that the facility has exceeded this standard.

115.52	Exhaustion of administrative remedies
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 600 376">DOCUMENTS REVIEWED</p> <ul data-bbox="256 488 890 521" style="list-style-type: none"> · OP-090124, Inmate Grievance Process <p data-bbox="256 633 432 667">INTERVIEWS</p> <ul data-bbox="256 779 866 813" style="list-style-type: none"> · Inmates who Reported Sexual Abuse <p data-bbox="256 925 483 958">115.52 (a)(b)(c)</p> <p data-bbox="256 1059 1469 1216">OP-090124 states that grievances may be submitted directly to the reviewing authority without informal resolution process when the complaint is of a sensitive nature or when substantial risk of personal injury, sexual assault, or other irreparable harm exists. The inmate/offender must use the “Inmate/Offender Grievance” form.</p> <p data-bbox="256 1328 1477 1485">OP-090124 also says that inmate’s may submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred, and that they are not required to use an informal grievance process, or otherwise to attempt to resolve with staff any alleged incident of sexual abuse.</p> <p data-bbox="256 1597 1469 1753">This same policy allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The policy also requires that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.</p> <p data-bbox="256 1865 408 1899">115.52 (d)</p> <p data-bbox="256 2011 1477 2089">OP-090124 requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.</p>

This same policy states that the agency will always notify an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made.

The Auditor interviewed an inmate who had reported a sexual abuse and she stated that she was notified in writing regarding the decision made about her report. Although she said she did not specifically recall the time frame, she was confident it was within 90 days.

The Auditor reviewed the investigative file related to this inmate's report and confirmed that notification was made within 90 days.

115.52 (e)

OP-090124 permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates.

OP-090124 requires that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

The facility received no grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance.

During the onsite audit, the Auditor observed signage and posters in all housing areas and other conspicuous locations containing PREA information, methods of reporting, access to outside victim services and the manner in which third-party reports could be filed.

The Auditor also visited the agency's website and tested the third-party reporting methods and tested the email, and telephonic reporting systems, receiving prompt responses in each case.

	<p>115.52 (f)</p> <p>OP-090124 states that upon receipt of a grievance marked “emergency” or “sensitive,” the reviewing authority will have 24 hours to determine if it is in fact an emergency or sensitive grievance. If so, an expedited review will be conducted, and a response provided to the inmate/offender within 48 hours of receipt.</p> <p>The facility reported that in the past 12 months no emergency grievances were filed related to sexual abuse.</p> <p>OP-090124 says that grievances alleging substantial risk of imminent sexual abuse require that a decision be issued within 48 hours. The facility reported no such instances in the previous 12 months.</p> <p>115.52 (g)</p> <p>OP-090124 limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith.</p> <p>The facility reported no inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.</p> <p>Based on a review of agency policy, a test of third-party reporting systems, and an interview with an inmate who reported sexual abuse, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

DOCUMENTS REVIEWED

- OP-030601
- Inmate Handbook
- “Help is Available” Poster
- MOU with WISH
- MOU with SANE Nurse

INTERVIEWS

- Random Sample of Inmates
- Inmates who Reported Sexual Abuse

115.53 (a)

OP-030601 states that the facility shall maintain or attempt to enter into a memorandum of understanding (MOU) or other agreements with community service providers who are able to provide inmates with confidential emotional support services related to sexual abuse. If an MOU/agreement is entered into, the facility will provide inmates with access to the contact information for the community service provider as outlined in the MOU/agreement.

The inmate handbook (available to all inmates electronically through a provided Securus tablet) and signage throughout the facility provides inmates with access to community providers (WISH Foundation) by giving inmates mailing addresses and telephone numbers for local victim advocacy or rape crisis organizations.

The facility provides inmates with toll free numbers and addresses which enable reasonable communication between inmates and these organizations. The use of the Securus tablets allows inmates to make contact at any time.

The Auditor interviewed 15 randomly selected inmates. Fourteen of the 15 were able

to name at least two services available to them. Of those 14, 12 were able to articulate the types of services available, stating that contact information is posted in the dorms and accessible via the tablets. One of the 15 inmates was not sure what services were available but was aware that there was likely information on the tablet. Two of the 14 said they knew they could get assistance but were not aware of exactly what type of help was available.

The Auditor also interviewed an inmate who reported sexual abuse. They were aware of the full breadth of services available and said that the use of the tablet makes it relatively easy to reach out.

The Auditor was able to test the available services, confirm that WISH serves the interests of inmates at the facility, and are available to assist when necessary.

115.53 (b)

OP-030601 requires that it informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored, and the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

The Auditor interviewed 15 randomly selected inmates and one inmate who had reported sexual abuse. All stated that they did not believe any conversation was truly "private." Thirteen of the 16 believed that there would be some level of confidentiality in conversations with support services, two were not sure, and one had no confidence in confidentiality of any conversation.

115.33 (c)

The facility provided the Auditor with a copy of its MOU with WISH, who has agreed to provide emotional services related to sexual abuse to inmates at the facility.

Based on a review of agency policy, a test of available resources, and interviews with

	inmates, the Auditor has determined that the facility is in compliance with this standard.
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · “Break the Silence” Poster · Agency Website <p>INTERVIEWS</p> <p>NONE</p> <p>115.54 (a)</p> <p>The Auditor visited the agency website and was easily able to access methods to make a third-party report, including via email, and through two telephone numbers. One of the numbers is directed to the OIG and the other to the ODOC Fugitive Apprehension and Investigations. The Auditor tested all three methods, each with successful results. The website also states that verbal reports can be made directly to the facility.</p> <p>The Auditor also observed signage in all housing areas and other conspicuous locations of the facility on directions for third-party reporting.</p> <p>Based on a review of the agency’s website, and a test of third-party reporting mechanisms, the Auditor has determined that the facility is in compliance with this standard.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Random Sample of Staff · Medical and Mental Health Staff · Warden · A/PC <p>115.61 (a)(b)(c)</p> <p>OP-030601 requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility. It also requires all staff to report immediately and according to agency policy any retaliation against inmates or staff who reported such an incident, and to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>The Auditor interviewed 12 randomly selected staff, all of whom stated they must report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility. Each also said they have an obligation to report any retaliation against staff or inmates for reporting such an incident.</p> <p>All 12 staff members stated they would notify a supervisor immediately and would be required to document their knowledge in writing. Of the 12 staff members, 11</p>

	<p>indicated they would be prohibited from revealing any information regarding the incident outside of what was necessary for treatment or management of the facility.</p> <p>The Auditor also interviewed a Medical Staff member and a Mental Health staff member. Each said that at the initiation of services, they disclose the limitations of confidentiality to the inmate. Additionally, they stated they would contact a supervisor upon learning of the alleged sexual abuse or sexual harassment. Neither of the staff members had ever become aware of such incidents in this manner.</p> <p>115.61 (d)(e)</p> <p>The Auditor interviewed the Warden and the A/PC, both of whom acknowledged that if an alleged inmate were considered a vulnerable adult (the facility does not house youthful offenders), they a report of the allegation to the designated State or local services agency under mandatory reporting laws.</p> <p>The Warden also said that the facility would report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to facility investigators.</p> <p>Based on a review of agency policy and interviews with the Warden, A/PC, Medical and Mental Health Staff, and a random sample of staff, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <p>· OP-030601</p> <p>INTERVIEWS</p>

	<ul style="list-style-type: none"> · Warden · Random Sample of Staff <p>115.62 (a)</p> <p>OP-030601 states that when the agency learns an inmate is subject to substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</p> <p>In the past 12 months the facility reported that 10 inmates were subject to substantial risk of imminent sexual abuse. In each case the facility took immediate action. Based on this number and the facility's response, it was clear to the Auditor that the facility takes the sexual safety of its inmate population extremely seriously.</p> <p>The Auditor interviewed the Warden who stated that any time an inmate is subject to substantial risk of imminent sexual abuse, the facility will take immediate action.</p> <p>The Auditor interviewed 12 randomly selected staff, and each said that if an inmate were at risk of imminent sexual abuse, they would immediately separate or move the inmate from the area and contact a supervisor. None of the 12 staff members hesitated in their answer and confidently stated the first course of action was to separate the inmate from the immediate area.</p> <p>Based on a review of agency policy, and interviews with the Warden and a random sample of staff, the Auditor has determined that the facility has exceeded this standard.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	DOCUMENTS REVIEWED

· OP-0302601

INTERVIEWS

· Warden

115.63 (a)(b)(c)

OP-030601 states that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.

In the past 12 months the facility reported that two inmates alleged that they were abused while confined at another facility. In each case, the facility where the alleged abuse occurred was notified telephonically and via email. Each inmate was then immediately referred to the medical and mental health.

The agency policy requires that the facility head provide such notification as soon as possible, but no later than 72 hours after receiving the allegation, and documents that notification.

115.63 (d)

OP-03601 states that the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards.

In the past 12 months the facility reported that no allegations of sexual abuse the facility received from other facilities.

The Auditor interviewed the Warden who said that when the facility receives an allegation from another facility that an incident of sexual abuse occurred in her

	<p>facility, they would immediately initiate an investigation and make notifications to the OIG. She said they would coordinate with the reporting facility to ensure the inmate is treated medically and by mental health when necessary. She said the OIG, based on the circumstances, would determine if they would respond immediately, and ultimately decide who would conduct the investigation. The Warden stated that in her tenure, no such allegations had been made.</p> <p>Based on a review of agency policy and interview with the Warden, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.64 Staff first responder duties	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · Investigative Files <p>INTERVIEWS</p> <ul style="list-style-type: none"> · Security Staff and Non-Security Staff First Responders · Inmates who Reported Sexual Abuse · Random Sample of Staff <p>115.64 (a)</p> <p>OP-030601 states that upon learning of an allegation that an inmate was sexually abused:</p> <p>If the first staff member to respond is a correctional officer the following shall be</p>

required:

(1) Separate the alleged victim and abuser

(2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence

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

In the past 12 months the facility reported 11 allegations that an inmate was sexually abused. In each case, the first security officer to respond separated the alleged victim and abuser.

The facility reported that no case was reported within a time frame that allowed for the collection of physical evidence. This was also the case that the first security staff member to respond to the report was able to preserve and protect any crime scene until appropriate steps could be taken to collect any evidence. Given the circumstances of each of these cases, first responders were not able to enact any of the requirements of this section.

The Auditor interviewed one Security Staff and one Non-Security Staff First Responders as First Responders. Both were able to clearly articulate their responsibilities in separating alleged victims and abusers, safeguarding potential crime scenes, and protecting potential evidence.

The Auditor interviewed one inmate who reported sexual abuse. She said she reported the assault approximately one-week after the incident occurred to a facility volunteer while outside of her housing unit. She said she was immediately escorted to Medical and treated. She said she was subsequently transferred to the hospital for an examination of her alleged injuries and returned to the facility. She said that staff acted immediately and did not hesitate to take her for medical treatment.

115.64 (b)

OP-030601 requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any

	<p>actions that could destroy physical evidence. This same policy also requires that if the first staff responder is not a security staff member, that responder shall be required to notify security staff.</p> <p>In the past 12 months the facility reported that one allegation of sexual abuse was reported to a non-security staff member, and that staff member requested that the alleged victim not take any actions that could destroy physical evidence. The staff member immediately notified security staff.</p> <p>The Auditor interviewed one Security Staff and one Non-Security Staff Who Have Acted as First Responders. Both were able to clearly articulate their responsibilities in separating alleged victims and abusers, safeguarding potential crime scenes, and protecting potential evidence.</p> <p>The Auditor also interviewed 12 randomly selected staff members, all of which were able to clearly articulate their responsibilities in accordance to this standard. Each stated the only person they would share information regarding the allegation would be to a supervisor, unless directed otherwise.</p> <p>Based on a review of agency policy, and interviews with Security and Non-Security Staff First Responders, a random sample of staff, and an inmate who reported sexual abuse, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Exceeds Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> EWCC - PREA Coordinated Response Plan <p>INTERVIEWS</p>

	<ul style="list-style-type: none"> Warden <p>115.65 (a)</p> <p>The facility has developed the EWCC – PREA Coordinated Response 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>The Auditor reviewed the Response Plan and found it to be extremely thorough, clearly delineating the responsibilities of first responders, medical and mentally health practitioners, investigators and facility leadership. The document also contains multiple attachments to help direct personnel in their area of responsibility.</p> <p>The Auditor interviewed the Warden, who was extremely articulate and knowledgeable regarding the plan and how it is to be implemented.</p> <p>The plan was reviewed and approved on January 26, 2024 by the Warden, Deputy Warden, and the Chief of Security.</p> <p>Based on a review of the Coordinated Response Plan and interview with the Warden the Auditor has determined that the facility has exceeded this standard.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> None <p>INTERVIEWS</p>

	<ul style="list-style-type: none"> Warden <p>115.66 (a)</p> <p>The Auditor interviewed the Warden who stated that the agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>115.66 (b)</p> <p>The Auditor is not required to audit this provision.</p> <p>Based on the statements of the Warden, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> OP-030601 <p>INTERVIEWS</p> <ul style="list-style-type: none"> Warden Designated Staff Member Charged with Monitoring Retaliation Inmates who Reported Sexual Abuse

115.67 (a)(b)(c)(d)(e)

OP-030601 states that the facility shall ensure any inmate or staff reporting allegations of sexual abuse or sexual harassment or cooperate in an investigation involving such allegations are protected from retaliation by other inmates or staff. The facility/unit head shall designate staff to monitor retaliation and take appropriate action(s) to include:

1. Employing protective measures, such as housing changes or transfers for inmate victims or abusers
2. Removal of alleged staff or inmate abusers from contact with victims
3. Engaging emotional support services such as mental health services for inmates and the Employee Assistance Program for staff who fear retaliation for reporting sexual abuse or harassment or for cooperating with investigations
4. For at least 90 days following a report of sexual abuse or sexual harassment, a facility designated monitor(s) shall assess the conduct and treatment of the inmates or staff who reported the abuse and of inmates who were reported to have suffered sexual abuse for changes that may suggest possible retaliation by inmates or staff. Findings shall be reported to the facility/unit head who shall act promptly to remedy any such retaliation. The facility monitoring will include:
 - a. Inmate discipline or misconducts
 - b. Housing, program or classification changes
 - c. Negative job/performance reviews
 - d. Reassignment of staff
 - e. If the inmate or staff is transferred during this 90 day period, the facility head of the current facility shall notify the receiving facility head of the continued need for monitoring
 - f. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need
 - g. In the case of inmates, such monitoring shall also include periodic status checks

The Auditor interviewed the Warden who was able to clearly and articulately describe

	<p>the measures stated in the agency's policy regarding retaliation.</p> <p>The Auditor interviewed the PCM, who is responsible for monitoring retaliation. He said that he is personally responsible for ensuring that the tenets of the policy are followed and that all staff take the subject of retaliation seriously. He said that he monitors housing and working assignments, along with changes in programming to ensure no retaliation is occurring. He speaks personally with the inmates, and will do so for at least 90 days following an allegation.</p> <p>The Auditor interviewed an inmate who reported sexual abuse and she stated she felt safe after making the allegation. She confirmed that a staff member followed up with her routinely to ensure she was not experiencing retaliation.</p> <p>In the past 12 months the facility reported no incidents of retaliation.</p> <p>The Auditor reviewed seven investigative files and found that all which required retaliation monitoring contained the appropriate documentation. The Auditor found that the entries on the monitoring forms were thorough and that the facility takes retaliation very seriously.</p> <p>Based on a review of agency policy, a review of retaliation monitoring forms, interviews with the Warden, PCM, and an inmate who reported sexual abuse, the Auditor has determined that the facility has exceeded this standard.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <p>· OP-030601</p> <p>INTERVIEWS</p>

- Warden
- Staff who Supervise Inmates in Segregated Housing

115.68 (a)

Agency policy OP-030601 requires the following:

Use of Protective Custody and Segregation

A. Inmates at high risk for sexual victimization shall not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for no more than 24 hours while completing the assessment.

B. Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education or work opportunities the facility shall document

1. The opportunities that have been limited
2. The duration of limitation
3. The reasons for such limitations

C. 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 30 days

D. If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document

	<p>1. The basis for the facility's concern for the inmate's safety</p> <p>2. The reason why no alternative means of separation can be arranged.</p> <p>E. Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.</p> <p>F. Inmates who have alleged to have suffered sexual abuse are subject to the above requirements.</p> <p>In the past 12 months, the facility reported no inmates had been placed in involuntary segregated housing in accordance with this standard.</p> <p>The Auditor interviewed the Warden and Staff who Supervise Inmates in Segregated Housing and both stated that the facility does not involuntarily segregate inmates who are at high risk of sexual victimization or who have alleged sexual abuse.</p> <p>Based on a review of agency policy and interviews with the Warden and Staff who Supervise Inmates in Segregated Housing, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · OP-040117, Security · Training Records · Investigative Training Curriculum

INTERVIEWS

- Investigative Staff
- Inmates who Reported Sexual Abuse
- Warden
- A/PC
- PCM

115.71 (a)(b)

OP-040117 states that all allegations of sexual abuse and harassment, including third party and anonymous reports, will be reviewed to determine if sufficient information exists to complete a formal investigation. If an investigation is conducted, it will be done promptly, thoroughly and objectively.

The Auditor interviewed two investigative agents from the OIG. They said that as soon as a facility becomes aware of an allegation of sexual abuse or sexual harassment, the OIG Agent in Charge (AIC) is contacted and determines if an immediate response is required. All allegations, whether they are deemed to be criminal or not, are referred to the OIG. The AIC will also determine whether an investigation is warranted based on the information received from the facility.

The agents said that if they become aware of a third-party or anonymous allegation, they would immediately contact the facility and initiate an investigation based on the information received in the allegation.

This was also confirmed by an interview with a facility investigator.

The Auditor reviewed seven investigative files and observed that all had been immediately referred to the OIG at the time of the allegation.

At the time of the audit, the OIG had 17 investigators who had received the specialized training to investigate sexual abuse and sexual harassment in a

confinement setting. The Auditor confirmed the training by reviewing training records.

115.71 (c)(d)(e)(f)

The Auditor interviewed two OIG investigative agents. Each said that when notified of a sexual assault, they would immediately contact the facility to ascertain that the crime scene (if known) had been secured, assuming that the incident had occurred within the last 120 hours. They would also ensure that any physical evidence at the scene is safeguarded. A sexual assault that occurred within 120 hours of the allegation would necessitate a forensic medical exam to gather DNA and other physical evidence.

The each said they would interview the victim, any witnesses, gather video, if available, and attempt to speak with the suspect, ensuring proper warnings (Miranda and Garrity) are followed, when necessary. They would collect reports and use all interview statements and evidence to determine whether a criminal filing is warranted. Each said the length of time for an investigation is difficult to gauge based on the many contributing factors.

The agents said they would be responsible for gathering all physical and circumstantial evidence.

The agents also stated that when the quality of evidence supports a criminal prosecution, they would consult with the local district attorney before conducting any compelled interviews.

In their interview, the agents said that the credibility of an alleged victim, or witness will be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff. They also stated that no inmate who alleges sexual abuse will submit to a polygraph examination as a condition for proceeding with an investigation.

The Auditor interviewed an inmate who reported sexual abuse and she said she was not made to take a polygraph examination.

The Auditor interviewed the two OIG investigative agents and a facility investigator regarding administrative investigations. All said that the OIG will determine who conducts an administrative investigation based on the known factors. Regardless, they said that the investigation would include an effort to determine whether staff actions or failures to act contributed to the abuse and shall be documented in written reports.

The agency maintains all investigative files electronically, and are secured through password-protected programs, with access only by investigators and management staff. For the purposes of the onsite audit, the facility and A/PC provided the Auditor with printed copies of each investigation.

115.71 (g)(h)(i)(j)

The Auditor thoroughly examined seven investigative files during the onsite audit. Each criminal investigation contained detailed written reports, that described all the evidence.

The Auditor interviewed two OIG investigative agents, who confirmed this process for all criminal investigations. The agents also said that when substantiated allegations appear to be criminal, they are referred for prosecution.

In the past 12 months one case from the facility had been referred for prosecution and was still pending at the time of the onsite audit.

OP-030601 states that the agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

This same policy says that the departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation. This was confirmed by the Auditors in interviews with all three investigators.

	<p>115.71 (k)</p> <p>The Auditor is not required to audit this provision.</p> <p>115.71 (l)</p> <p>The Auditor interviewed the Warden, A/PC, PCM and three investigators and determined that if an outside agency were to investigate sexual abuse, they would fully cooperate with that investigation and remain informed about its progress.</p> <p>The Warden stated that the PCM would monitor the investigation and keep her informed and updated on progress and any pertinent information.</p> <p>Based on a review of agency policy, and interviews with an inmate who reported sexual abuse, and three investigators, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> OP-030601 Investigative Files <p>INTERVIEWS</p> <ul style="list-style-type: none"> Investigative Staff

	<p>115.72 (a)</p> <p>OP-030601 states that there shall not be any standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>The Auditor interviewed two OIG investigative agents and a facility investigator, all of whom confirmed that the preponderance of the evidence standard is used in determining whether sexual abuse or sexual harassment allegations are substantiated.</p> <p>The Auditor reviewed investigative files regarding this standard to determine compliance.</p> <p>Based on a review of agency policy, interviews with three investigators, and an assessment of investigative files, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.73 Reporting to inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> OP-030601 Investigative Files <p>INTERVIEWS</p> <ul style="list-style-type: none"> Warden Investigative Staff

· Inmates who Reported Sexual Abuse

115.73 (a)(b)

OP-030601 states that following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility (state or contracted with ODOC), the facility head shall inform the inmate victim at the conclusion of the investigation as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.

The facility utilizes Attachment D of the policy, "Notification of Investigation Status" to notify inmates in writing on the disposition of the investigation. The form requires the inmate's signature confirming receipt.

The Auditor interviewed two OIG investigative agents, one facility investigator, and the Warden, all of whom confirmed that it's the agency's policy to notify the alleged victim in writing on the outcome of a sexual abuse or sexual harassment investigation.

The Auditor reviewed seven investigative files and found that all which required notification to the alleged victim contained the appropriate documentation.

Outside agencies are not utilized to conduct investigations.

115.73 (c)

OP-030601 states that following an inmate's allegation that a staff member has committed a sexual offense against the inmate, the facility head shall:

1. Subsequently inform the inmate victim (unless the investigation determines the allegation is unfounded) whenever the staff member is:

a. No longer posted at the inmate's unit

- b. No longer employed at the facility
- c. Indicted on a sexual offense
- d. Convicted of a sexual offense

The facility reports that there were no substantiated or unsubstantiated complaints of sexual abuse committed by a staff member against an inmate in the past 12 months.

115.73 (d)(e)

OP-030601 states that following an inmate's allegation of a sexual offense by another inmate, the facility head or designee shall:

1. Subsequently inform the alleged victim whenever the suspect inmate has been indicted or convicted on the sexual offense
2. The facility head will ensure notifications to inmates are documented on the "Notification of Investigation Status" form and the original placed in the facility investigation file

The Auditor interviewed an inmate who reported sexual abuse, however the suspected abuser was not indicted or convicted of a crime.

OP-030601 states that following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility (state or contracted with ODOC), the facility head shall inform the inmate victim at the conclusion of the investigation as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.

The facility reported three allegations met the requirement for this standard and in each case, notifications were made to the inmate.

The Auditor reviewed seven investigative files and found that all three of the aforementioned cases had documented notifications to the inmate.

	<p>115.73 (f)</p> <p>The Auditor is not required to audit this provision.</p> <p>Based on a review of agency policy, investigative files, and interviews with the Warden, three investigators, and an inmate who reported sexual abuse, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · OP-110215, Human Resources <p>INTERVIEWS</p> <ul style="list-style-type: none"> · PCM <p>115.76 (a)(b)(c)(d)</p> <p>OP-030601 states that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>The facility reported that one staff member had resigned for violating agency sexual abuse or sexual harassment policies.</p> <p>The facility reported that no staff members had been disciplined short of termination</p>

	<p>for violation of the agency’s sexual abuse or sexual harassment policies.</p> <p>OP-030601 requires that 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, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. The facility reported no such reports to law enforcement or licensing boards in the past 12 months.</p> <p>The Auditor interviewed the PCM, who confirmed the facility’s reported information.</p> <p>Based on a review of agency policy, information provided by the facility, and an interview with the PCM, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> OP-030601 <p>INTERVIEWS</p> <ul style="list-style-type: none"> Warden <p>115.77 (a)</p> <p>OP-030601 states that for the purpose of this procedure (Oklahoma Prison Rape Elimination Act), the terms “staff” and “employee” includes all ODOC employees, contract personnel, contract employers, volunteers, official visitors or other agency</p>

	<p>representatives. (PREA 115.77(a)) The term “facility” shall refer to all state institutions, community centers and private prisons. The same policy says that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>OP-030601 also requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates.</p> <p>In the past 12 months no contractors or volunteers were reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of inmates.</p> <p>OP-030601 states that the facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>The Auditor interviewed the Warden and she stated that any contractor who violated the agency’s sexual abuse or sexual harassment policies would not be permitted to work at the facility.</p> <p>Based on a review of agency policy and an interview with the Warden, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <p>· OP-030601</p> <p>INTERVIEWS</p>

- Warden
- Medical and Mental Health Staff

115.78 (a)(b)(c)

OP-030601 states all inmates or staff members found guilty of committing sexual assault are disciplined in accordance with agency procedures and will be referred for criminal prosecution by the office of the Inspector General. The policy also says that inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.

In the past 12 months, the facility found one administrative finding of inmate-on-inmate sexual abuse that occurred at the facility.

In the past 12 months, there have been no criminal findings of guilt for inmate-on-inmate sexual abuse reported by the facility.

The Warden was interviewed by the Auditor, and she stated that disciplinary sanctions against inmates are proportionate to the nature of the abuse committed and the inmates' disciplinary history. She also said that any mental disability or illness would be considered when determining sanctions.

115.78 (d)

OP-030601 states that the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, and it considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

The Auditor interviewed two members of the Mental Health staff and each confirmed that therapy, counseling, or other interventions are offered to address the underlying reasons or motivations for abuse. They said that if an inmate chose not to participate, it would not prohibit them from participating in other programming.

	<p>115.78 (e)(f)(g)</p> <p>OP-030601 says that the agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.</p> <p>This same policy also states that the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>OP-030601 prohibits all sexual activity between inmates It also prohibits all sexual activity between inmates and disciplines inmates for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.</p> <p>Based on a review of agency policy and interviews with the Warden and Mental Health staff members, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> OP-140100, Health Services <p>INTERVIEWS</p> <ul style="list-style-type: none"> Inmates who Disclose Sexual Victimization at Risk Screening Staff Responsible for Risk Screening Medical and Mental Health Staff

115.81 (a)

OP-140100 states that all inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner, and the follow-up meeting is offered within 14 days of the intake screening.

The facility reported that 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

The Auditor interviewed two inmates who disclosed sexual victimization during risk screening, and both stated they met with medical and mental health staff within 14 days of their initial risk screening at the facility.

The Auditor also interviewed a staff member responsible for risk screening and they said inmates who report sexual victimization at risk screening are immediately referred to medical and mental health.

The Auditor reviewed electronic medical records and confirmed compliance with this standard.

115.81 (b)

OP-140100 states that inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.41, are offered a follow-up meeting with a mental health practitioner, and that the meeting will occur within 14 days.

The facility reported that 100% of inmates who have previously perpetrated sexual abuse during screening were offered a follow-up meeting with a medical or mental health practitioner. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

	<p>The Auditor also interviewed a staff member responsible for risk screening and they said inmates who report prior perpetration of abuse at risk screening are immediately referred to medical and mental health.</p> <p>The Auditor reviewed electronic medical records and confirmed compliance with this standard.</p> <p>115.81 (d)(e)</p> <p>OP-140100 says that the information related to sexual victimization or abusiveness that occurred in an institutional setting shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.</p> <p>The Auditor interviewed medical and mental health staff, who confirmed that 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.</p> <p>The Auditor reviewed the electronic medical records, which are password-protected, with access limited to medical and mental health staff only. This was also confirmed in formal interviews and informal conversations with medical and mental health staff.</p> <p>Based on a review of agency policy, interviews with inmates who disclosed sexual victimization at risk screening, staff responsible for risk screening, and medical and mental health staff, along with a review of the electronic medical records system, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

DOCUMENTS REVIEWED

- OP-140118, Health Services

INTERVIEWS

- Medical and Mental Health Staff
- Inmates who Reported Sexual Abuse
- Security Staff and Non-Security Staff First Responders

115.82 (a)(b)(c)(d)

The Auditor interviewed medical and mental health staff, security and non-security first responders and an inmate who reported sexual abuse, and all confirmed that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

Medical and mental health staff said that the nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment.

The Auditor also learned through interviews and a review of electronic medical records that medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.

The Auditor interviewed security and non-security first responders, who said that if no qualified medical or mental health practitioners are on duty at the time of an alleged sexual abuse, they would take steps to protect the victim pursuant to §115.62 and notify appropriate medical and mental health staff. The first responders stated that the overnight hours and weekends there is limited medical staff, but there are on-call

	<p>medical and mental health staff members who can respond. This was also confirmed with the Auditor's interviews with medical and mental health staff.</p> <p>Medical and mental health staff also said that inmate victims of sexual abuse while incarcerated are 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.</p> <p>OP-140118 says that all Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Based on a review of agency policy, electronic medical records, and interviews with medical and mental health staff, security and non-security first responders, and an inmate who reported sexual abuse, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> OP-030601 OP-140118 <p>INTERVIEWS</p> <ul style="list-style-type: none"> Medical and Mental Health Staff Inmates who Reported Sexual Abuse

115.83 (a)(b)(c)(d)(e)(f)(g)(h)

OP-140118 states that the facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse.

The Auditor interviewed medical and mental health staff who said that evaluation and treatment of victims include follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer or placement in other facilities, or their release from custody. They additionally said that the treatment(s) provided are consistent with the community level of care.

The Auditor also interviewed an inmate who reported sexual abuse, and she said she was offered follow-up services.

The Auditor reviewed electronic medical records and confirmed follow-up treatment referrals.

OP-140118 states that female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests. Additionally, the policy says that If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services. This was confirmed in the Auditor's interviews with medical and mental health staff.

This same policy says that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

OP-030601 states that treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. This was confirmed in an interview with an inmate who reported sexual abuse.

OP-030601 says that it attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. This was

	<p>confirmed in interviews with medical and mental health staff, and the Auditor's review of electronic medical records.</p> <p>Based on a review of agency policy, electronic medical records, and interviews with medical and mental health staff, and an inmate who reported sexual abuse, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> Sexual Abuse/Harassment Incident Review Form OP-030601 <p>INTERVIEWS</p> <ul style="list-style-type: none"> Warden PCM Incident Review Team <p>115.86 (a)(b)(c)(d)</p> <p>OP-030601 states that in all instances where a sexual abuse investigation occurs, regardless of findings, at the conclusion of the investigation the facility shall conduct a sexual abuse incident review. This review shall occur within 30 days of the receipt by the facility or of OIG investigative findings. The review team shall include administrative staff, with input from line supervisors, investigators, medical/mental health professional and facility PREA compliance manager.</p>

The facility reported that in the past 12 months, eight Sexual Abuse/Harassment reviews had been completed.

The review team shall:

1. Convene monthly to review any facility incident or OIG investigation
2. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse
3. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affliction; or was motivated or otherwise caused by other group dynamics at the facility
4. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse

OP-030601 requires that the facility prepares a report of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA Compliance Manager.

The Auditor interviewed the Warden, PCM and a member of the Incident Review Team. All were extremely articulate and knowledgeable about the Team's responsibilities and areas of consideration when reviewing an incident. They were all fully aware of the report's timelines and distribution. It was clear to the Auditor that each staff member took the process very seriously and continually looked for areas of improvement. All said that when improvements are identified that the entire team works toward implementation as quickly as possible.

The Auditor reviewed all Incident Reviews for the past 12 months and determined that they were appropriate for the circumstances of each allegation.

Based on a review of agency policy, completed Incident Reviews, and interviews with the Warden, PCM, and an Incident Review Team Member, the Auditor has determined that the facility is in compliance with this standard.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> · OP-030601 · Sample of Aggregated Data <p>INTERVIEWS</p> <p>None</p> <p>115.87 (a)(b)(c)(d)(e)</p> <p>OP-030601 states that the Office of the Inspector General shall collect accurate, uniform data for every allegation of sexual abuse at facilities using a standardized instrument and set of definitions. The data shall be securely retained.</p> <p>The Auditor reviewed the agency’s annual reports and confirmed that it aggregates sexual abuse related data annually.</p> <p>OP-030601 says that 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. This same policy says that 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.</p> <p>This same policy requires that the agency shall also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. The data from private facilities complies with SSV reporting regarding content.</p>

	<p>The Auditor confirmed that the agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request.</p> <p>Based on a review of agency policy and aggregated incident data, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none">· Corrective Action Report <p>INTERVIEWS</p> <ul style="list-style-type: none">· Warden· A/PC <p>115.88 (a)(b)(c)(d)</p> <p>The Auditor reviewed data collection through the agency’s annual reports and found that it aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including:</p> <ul style="list-style-type: none">• Identifying problem areas;• Taking corrective action on an ongoing basis; and• Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. <p>The annual reports include a comparison of the current year's data and corrective actions with those from prior years, and an assessment of the agency's progress in addressing sexual abuse.</p>

	<p>The Auditor was easily able to locate the annual reports on the agency website and they are approved by the agency head.</p> <p>The Auditor interviewed the Warden, A/PC, and PCM, all of whom acknowledged and confirmed the agency's data collection and reporting practices through its annual report.</p> <p>The Auditor interviewed the A/PC who said that if the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility, and that it would indicate the nature of the material redacted.</p> <p>Based on a review of the agency's data collection, its annual reports, and interviews with the Warden, A/PC, and PCM, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS REVIEWED</p> <ul style="list-style-type: none"> OP-030601 <p>INTERVIEWS</p> <ul style="list-style-type: none"> A/PC <p>115.89 (a)(b)(c)</p> <p>OP-030601 requires that incident-based and aggregate data are securely retained. This policy also says that aggregated sexual abuse data from facilities under its direct</p>

	<p>control and private facilities with which it contracts be made readily available to the public at least annually through its website.</p> <p>Based on a review by the Auditor of data made available to the public, the agency removes all personal identifiers.</p> <p>OP-030601 requires that sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.</p> <p>Based on a review of the agency's publicly released data, and an interview with the A/PC, the Auditor has determined that the facility is in compliance with this standard.</p>
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115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency ensured that each facility operated by the agency is audited at least once, as evidenced by the Auditor's review of the website</p> <p>During each one-year period starting on August 20, 2013, the agency ensured that at least one-third of each facility type operated by the agency is audited, as confirmed by the Auditor's website review.</p> <p>The auditor had access to, and observed, all areas of the audited facility. The auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>The auditor was permitted to conduct private interviews with inmates. Inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel, via United States Post Office mail, as well as email, as evidenced by the Notice of Audit and observations made during the site review.</p>

	<p>The auditor did not receive any written or electronic correspondence from inmates from this facility.</p> <p>Based on the Auditor's review, the facility is in compliance with this standard.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The agency ensures that the auditor's final reports are published on the agency's website, as evidenced by a review of the agency's website. Based on the evidence presented, the facility is in compliance with this standard.

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
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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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
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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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
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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
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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
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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
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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	yes
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	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.)	
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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	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.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
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)?	yes
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	yes

	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?	
	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.)	no
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)?	no

	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.)	na
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).)	na
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	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	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	yes

	suspicious 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.)	
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.)	na
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	yes

	screening instrument?	
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)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
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	yes

	present management or security problems?	
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	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
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	yes

	anonymous upon request?	
	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	yes

	this standard.)	
	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,	na

	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.)	
	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	yes

	abuse or sexual harassment or retaliation?	
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	yes

	response to an incident of sexual abuse?	
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	yes

	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?	
	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	yes

	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).)	
	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.)	na
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	yes

	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?	
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	yes

	evidence sufficient to substantiate the allegation?	
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).	na
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	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
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.)	yes
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.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	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?	
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.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)	
	<div data-bbox="322 185 1273 555"> <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> </div> <div data-bbox="1305 185 1353 219">yes</div>