

PREA Facility Audit Report: Final

Name of Facility: Lexington Assessment & Reception Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 07/11/2025

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



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.



Auditor Full Name as Signed: Elaine Bridschge

Date of Signature: 07/11/2025

AUDITOR INFORMATION

Auditor name: Bridschge, Elaine

Email: risingsunauditing@gmail.com

Start Date of On-Site Audit: 06/05/2025

End Date of On-Site Audit: 06/06/2025

FACILITY INFORMATION

Facility name: Lexington Assessment & Reception Center

Facility physical address: 15151 State Highway 39, Lexington , Oklahoma - 73051

Facility mailing address:

Primary Contact

Name:	Miciah Ahrnsbrak
Email Address:	Miciah.Ahrnsbrak@doc.ok.gov
Telephone Number:	405-425-2724

Warden/Jail Administrator/Sheriff/Director

Name:	David Louthan
Email Address:	david.louthan@doc.ok.gov
Telephone Number:	405-527-5676

Facility PREA Compliance Manager

Name:	Amado Garcia
Email Address:	amado.garcia@doc.ok.gov
Telephone Number:	580-889-0342

Facility Health Service Administrator On-site

Name:	Tiffany Powell
Email Address:	tiffany.powell@doc.ok.gov
Telephone Number:	405-760-6283

Facility Characteristics

Designed facility capacity:	1465
Current population of facility:	1482
Average daily population for the past 12 months:	1465
Has the facility been over capacity at any point in the past 12 months?	Yes
What is the facility's population designation?	Men/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18-86
Facility security levels/inmate custody levels:	Minimum - Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	145
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	144

AGENCY INFORMATION	
Name of agency:	Oklahoma Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	4345 North Lincoln Boulevard, Oklahoma City, Oklahoma - 73105
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Miciah Ahrnsbrak	Email Address:	miciah.ahrnsbrak@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:	
15	• 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.13 - Supervision and monitoring • 115.15 - Limits to cross-gender viewing and searches • 115.17 - Hiring and promotion decisions • 115.18 - Upgrades to facilities and technologies • 115.31 - Employee training • 115.32 - Volunteer and contractor training • 115.33 - Inmate education

	• 115.34 - Specialized training: Investigations • 115.35 - Specialized training: Medical and mental health care • 115.41 - Screening for risk of victimization and abusiveness • 115.54 - Third-party reporting • 115.64 - Staff first responder duties • 115.65 - Coordinated response • 115.83 - Ongoing medical and mental health care for sexual abuse victims and abusers
Number of standards met:	
30	
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:	2025-06-05
2. End date of the onsite portion of the audit:	2025-06-06

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?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Women's Resource Center

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1465
15. Average daily population for the past 12 months:	1465
16. Number of inmate/resident/detainee housing units:	8
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ 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

18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1440
19. 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:	168
20. 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:	125
21. 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:	3
22. 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:	5
23. 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:	40
24. 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:	22

25. 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:	5
26. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
27. 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:	4
28. 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
29. 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	
30. 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:	181
31. 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:	144

32. 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:	825
33. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	25
35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☒ Age ☒ Race ☒ Ethnicity (e.g., Hispanic, Non-Hispanic) ☒ Length of time in the facility ☒ Housing assignment ☐ Gender ☐ Other ☐ None
36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Through conversations with facility leadership and by review of detailed inmate rosters provided to the auditor. This is an all-male facility.
37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No

38. 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	
39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	15
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".	
40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
41. 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:	1
42. 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

43. 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
44. 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:	3
45. 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:	2
46. 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:	3
47. 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:	0
47. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

47. 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).	Based on conversations with staff, interviews with inmates, and a review of detailed inmate rosters.
48. 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:	3
49. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
49. 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).	Based on conversations with staff, interviews with inmates, physical observations made by the auditor, and a review of detailed inmate rosters.

50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
51. Enter the total number of RANDOM STAFF who were interviewed:	12
52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☒ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☒ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
If "Other," describe:	Gender
53. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
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.	

55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	11
56. Were you able to interview the Agency Head?	☒ Yes ☐ No
57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No
58. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
59. 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)

60. 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

	☐ Other
61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
61. Enter the total number of VOLUNTEERS who were interviewed:	2
61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☒ Religious ☐ Other
62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
62. Enter the total number of CONTRACTORS who were interviewed:	1
62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☒ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
63. 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.

64. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

65. 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)?

☒ Yes

☐ No

66. 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)?

☒ Yes

☐ No

67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

68. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
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Documentation Sampling

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

70. 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?	☒ Yes ☐ No
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71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

72. 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	4	0	3	1
Staff-on-inmate sexual abuse	0	0	0	0
Total	4	0	3	1

73. 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	1	0	1	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	2	0	2	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

74. 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	1	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	1	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	2	0	1	1
Staff-on-inmate sexual abuse	0	0	0	0
Total	2	0	1	1

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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	1	0
Staff-on-inmate sexual harassment	0	1	0	0
Total	0	1	1	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

78. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

4

79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	4
81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2
87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

1

92. 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)

93. 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)

94. 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**

95. 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

96. 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

97. 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 Services LLC

Standards	
Auditor Overall Determination Definitions	
- Exceeds Standard (Substantially exceeds requirement of standard) - Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) - Does Not Meet Standard (requires corrective actions)	
Auditor Discussion Instructions	
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.11 Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator Evidence Analyzed: - Organizational Chart - Facility Operations OP-030601 (PREA Policy) - Memo by the Agency PREA Coordinator - Site review observations – zero tolerance signage - Interviews with the Agency PREA Coordinator (PC) and the PREA Compliance Manager (PCM) Findings: A) The agency has a written policy that mandates zero tolerance toward all forms of

	sexual abuse and sexual harassment. Victims of forced and/or pressured sexual acts may suffer severe physical and psychological harm and could possibly be infected with a life-threatening disease. Consequently, each facility has implemented a Sexual Assault Prevention Program that includes prevention, detection, response, and prosecution/discipline of assailants. Oklahoma Department of Corrections (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 are displayed throughout the facility and are visible to all staff, inmates, and visitors. 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. B) A PREA Coordinator is assigned at the agency level. This individual holds an upper-level position with sufficient authority and time to oversee compliance. Exceeding this standard, the Oklahoma Department of Corrections has created a position, Project Manager, to serve as secondary PREA Coordinator. This primary goal of the Secondary Coordinator is to manage the day-to-day operations of the PREA unit, which includes managing PREA background requests from other agencies, responding to third party PREA allegations, monitoring internal agency reporting avenues, monitoring PREA investigations, and researching methods to further the agencies' goal of excellence in PREA compliance. This allows the primary coordinator to spend approximately 70% of the work time within the agency facilities, which allows for better compliance monitoring at an agency level. C) Exceeding this standard, the facility has designated a primary PCM and a secondary PCM, who are given adequate time and authority to coordinate facility-level PREA compliance activities. A deputy warden is designated by the facility/unit head at each facility to assist the facility/unit head in ensuring elements of the PREA Act are met in a coordinated fashion.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.12 Contracting with Other Entities for the Confinement of Inmates Evidence Analyzed: 1. PAQ (Pre Audit Questionnaire) Findings:

	A) B) As evidenced by the PAQ, the standard is not applicable as the facility has not entered into a contract for the housing of inmates, therefore this standard is compliant.
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115.13	Supervision and monitoring
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.13 Supervision and Monitoring A) As evidenced by the staffing plan submitted the facility has developed a staffing plan designed to ensure adequate staffing levels and video monitoring to protect individuals from sexual abuse. The development of this plan takes into account: • Accepted correctional practices • Relevant findings from oversight bodies • Facility layout and physical plant, including areas of isolation • Population characteristics • Number and placement of supervisory staff • Program schedules and work assignments • Applicable laws, regulations, and standards • Trends in substantiated and unsubstantiated allegations of sexual abuse The facility has never had a judiciary finding of inadequacy for staff supervision and monitoring. In addition, at all times, there is at least one captain and one lieutenant on shift. In addition, each officer is equipped with a body camera. During the site review the auditor compared the written staffing plan against the observations made and determined the staffing plan adequately assesses the staffing and/or electronic monitoring needs of the facility with sexual safety in mind, and, the facility is staffed according to the plan, as it is written. B) When deviations from the staffing plan occur, they must be documented and justified. No deviations were reported during the review period. C) Staffing plans are reviewed annually, and any updates needed are documented. Reviews are conducted collaboratively to maintain PREA compliance. D) As evidenced by the staff tour logs, the facility conducts unannounced rounds by supervisory staff on all shifts. These rounds are documented, and staff are not permitted to alert others in advance of these rounds unless operationally necessary. The captains conduct constant unannounced tours of all housing units as well as any additional areas of the facility where inmates may be present. During the tours they identify blind spots, inoperable equipment such as cameras, any issues with facility movements, and field concerns from inmates and staff members. They immediately address any issues and provide reports to administration if necessary. Captains are also responsible for ensuring any area of the facility experiencing camera issues are toured and monitored multiple times each hour. When staffing allows, the captains

	are authorized to post additional officers in areas experiencing camera issues. Each unit at LARC is assigned building Lieutenants who monitor the unit operations. The Lieutenants provide the same oversight as the captains and report any issues to the on-duty Captain. The Lieutenants also provide policy and procedure insight to the unit officers when they are faced with situations where they may be unsure of certain ODOC policy. When camera issues are identified, the Unit Lieutenant conducts unannounced rounds in addition to the rounds being conducted by the on-duty Captain. Additionally, exceeding the standard, every officer at LARC is assigned an AXON body camera at the beginning of each shift. ODOC policy prohibits the officers from removing the cameras for any reason with the exception of restroom breaks. The body cameras are reviewed regularly to ensure compliance with policy and procedure. Any issues noted during these reviews are addressed at the facility level or referred to the Inspector General's Office for investigation.
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14 Youthful Inmates Evidenced Analyzed: 1. PAQ (Pre Audit Questionnaire) 2. Site review observations - youthful inmates Findings: A) B) C) According to information in the PAQ and based on site review observations, this standard is not applicable, therefore compliant, as the facility does not house youthful inmates.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.15 Limits to Cross-Gender Viewing and Searches Evidence Analyzed: 1. Security Procedures OP-040110

2. Security Procedures OP-040102
3. Facility Operations OP-030601 (PREA Policy)
4. Training curriculum for Searches
5. Staff PREA training Records
6. PAQ (Pre audit questionnaire)
7. Site review observations – cross-gender searches; cross-gender viewing
8. Interviews with random staff, transgender/intersex inmates and random inmates. The facility does not hold female inmates.

Findings:

A) Cross-gender strip searches and visual body cavity searches are prohibited except in exigent circumstances or when performed by medical practitioners. During the site review, the auditor observed areas used to conduct strip searches, visual body cavity searches, and pat-down searches and assessed that opposite-gender staff (i.e., non-medical personnel) cannot watch or partake in the conduct of a strip search (absent exigent circumstances). Central control posts are male (gender specific) posts and strip searches are conducted by male staff. Additionally, informal conversations with staff and inmates regarding search procedures confirmed that there are limits to cross-gender viewing.

B) According to the PAQ and site review observations, the facility does not hold female inmates.

C) The facility has not had any instances of cross-gender searches in the last 12 months. The facility does not have female inmates. The facility will document, as needed, all:

1. Cross-gender strip searches
2. Cross-gender visual body cavity searches
3. Cross-gender pat-down searches of female inmates

D) Policies ensure inmates can shower, use the toilet, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental during routine cell checks. Staff of the opposite gender are required to announce their presence before entering housing areas. When the gender of the staff on the housing unit changes to the opposite gender, a notification will be made to inmates announcing the staffing change. Interviews, informal conversations with staff and inmates, and site review observations confirmed that the opposite gender staff announce themselves when entering housing units. Exceeding this standard, the facility employs extra precautions to reduce the risk of

	cross-gender viewing by utilizing curtains and other physical barriers; and identifying central control as a same gender post assignment. Only three suicide cells have cameras within the cell and are supervised by non-medical male staff. E) Interviews confirmed there are no cross-gender strip-or-cavity searches conducted at the facility. The facility does not conduct searches or examinations of transgender or intersex inmates solely to determine genital status. When necessary, status is determined through: 1. Private conversations 2. Medical records review 3. Private examination by a medical professional F) According to the PAQ and staff training records, all security staff are trained in how to conduct: 1. Cross-gender pat-down searches 2. Searches of transgender and intersex inmates Training emphasizes professionalism, respect, and the least intrusive method consistent with security needs. The auditor reviewed the training curriculum and staff training records. The training met all the requirements of the standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.16 Inmates with Disabilities and Inmates Who Are Limited English Proficient Evidenced Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. Interpreter list 3. Inmate Handbook in Spanish 4. Staff PREA training records 5. Site review observations – Interpretation services 6. Interviews with the General Counsel (General Counsel (agency head)), random

staff, and inmates with disabilities and who are limited English proficient

7. Inmate PREA training acknowledgment forms

Findings:

A) As confirmed through interviews and review of policy, the agency has implemented procedures to ensure that individuals with disabilities—including those who are deaf, hard of hearing, blind, have low vision, or have intellectual, psychiatric, or speech-related disabilities—have equal access to all aspects of sexual abuse prevention, detection, and response. This includes:

- Qualified interpreters for effective communication with deaf or hard-of-hearing individuals
- Accessible written materials or alternate formats for individuals with limited reading skills or visual impairments
- Compliance with the Americans with Disabilities Act (ADA), including exceptions only in cases of undue burden or fundamental alteration as defined under 28 CFR 35.164

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.

The auditor interviewed inmates who were limited English proficient (LEP) and was able to test the facility's access to interpretation services by securing an interpreter in real-time. The facility utilizes an agency-wide comprehensive list of staff interpreters for translation and can use a language line service when necessary. The auditor had informal conversations with staff and inmates regarding accessibility of interpretation services when needed. Tablets are provided to each inmate containing PREA information and the PREA video. Tablets are available in the following languages:

- Deutsch (Dutch)
- Espanol (Spanish)
- Francais (French)
- Italiano (Italian)
- Portugues (Portuguese)
- English

B) Reasonable steps are taken to ensure that individuals who are LEP have

	meaningful access to all aspects of PREA compliance efforts. This includes the use of professional interpretation services capable of interpreting both effectively and impartially, using any necessary specialized vocabulary. According to interviews, every inmate receives 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. C) As confirmed through policy and interviews, the facility does not rely on inmate interpreters, readers, or assistants, except in limited and exigent circumstances where delays could compromise safety, first-response duties, or the integrity of an investigation. All inmate PREA education is provided to inmates by staff. No inmate interpreters are utilized except in exigent circumstances. However, approved community or facility volunteers may be utilized. The agency maintains a staff interpreter list. In addition, on-demand language line services can be utilized.
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.17 Hiring and Promotion Decisions Evidenced Analyzed: - Human Resources OP-110235 - Personnel OP-110210 - Memo from the PREA Coordinator - Staff Pre-Hire Questionnaires - Interviews with HR staff - Review of background records Findings: A) The agency policy prohibits the hiring, promotion, or contracting of any individual who may have contact with inmates and who: - Has engaged in sexual abuse in any custodial or institutional setting - Has been convicted of engaging in non-consensual sexual activity involving force, coercion, or incapacitation

	3. Has been civilly or administratively adjudicated for the conduct described above The auditor reviewed files of staff hired or promoted in the past 12 months and determined that proper criminal record background checks have been conducted and questions regarding past conduct were asked and answered. B) Incidents of sexual harassment are considered when evaluating individuals for hiring, promotion, or contracting positions involving inmate contact. C) Before hiring any new employee who may have contact with inmates, the agency conducts criminal background checks and makes best efforts to contact prior institutional employers regarding any substantiated allegations or resignations during ongoing sexual abuse investigations. The auditor confirmed this through review of files of personnel hired in the past 12 months and determined that the agency has completed checks consistent with 115.17(c). D) A criminal background check is also required for any contractor who may have inmate contact. Review of records of background checks of contractors who might have contact with inmates and interviews confirmed this practice. E) Exceeding this standard, the Oklahoma Department of Corrections conducts NCIC criminal background check on each employee upon hire, and also every 5 years. In addition, the agency utilizes the automated criminal infractions system (ACIS) system, which alerts agency authorities when an employee of the agency is arrested. F) As evidenced by the pre-hire questionnaire, applicants, employees, and contractors are asked directly about any past misconduct, as outlined in section (a), through written applications, interviews, and evaluations. Employees have an ongoing affirmative duty to report such misconduct. G) Material omissions or false statements regarding past misconduct are grounds for termination. Pursuant to 21 O.S. § 358.B, it is unlawful for any person applying for employment with the State of Oklahoma to make a materially false, fictitious or fraudulent statement or representation on an employment application, knowing such statement or representation to be materially false, fictitious or fraudulent. Any person found guilty of violating this title will be guilty of a misdemeanor punishable by a fine not exceeding \$1,000.00, or by imprisonment in the county jail for a term not exceeding one year, or by both such fine and imprisonment. H) HR staff stated that unless prohibited by law, the agency provides information on substantiated allegations of sexual abuse or harassment to institutional employers upon request when a former employee applies to work with that employer. The auditor reviewed the pre-hire questionnaires asking about the history of sexual misconduct.
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	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.18 Upgrades to Facilities and Technologies Evidenced Analyzed: 1. PAQ (Pre Audit Questionnaire) 2. Memo regarding body cameras 3. Interviews with the General Counsel (agency head) and the Warden 4. Camera location map Findings: A) Interviews confirm that when planning new construction, facility acquisition, or substantial expansion/modification of existing structures, the agency considers the impact of the design on its ability to protect individuals from sexual abuse. This includes reviewing how the physical layout, housing configurations, and traffic flow may enhance or hinder safety. B) The agency also evaluates the impact of surveillance technologies—such as video monitoring and electronic systems—when installing or upgrading such systems. Consideration is given to how these technologies can be used to prevent and detect sexual abuse and improve supervision in vulnerable or hard-to-monitor areas. Exceeding this standard, the LARC requires each officer to utilize body-worn cameras while on shift. The Warden also has access to every camera in the facility from his desktop and State cell phone.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.21 Evidence Protocol and Forensic Medical Examinations Evidenced Analyzed: 1. OP-040117 Security Procedures 2. OP-140118 Security Procedures 3. OP-140118 Health Services Procedures 4. OP-030601 Facility Operations

5. MOU with Women's Crisis Center

6. The National Protocol for Sexual Assault Medical Forensic Examinations

7. Interviews with random staff and PREA Compliance Manager (PCM). There were no inmates at the time of the audit who reported sexual abuse.

8. PAQ (pre audit questionnaire)

9. Victim advocacy services tracking sheet

Findings:

A) The agency uses a standardized, professional evidence protocol for sexual abuse investigations to make sure physical evidence is collected properly and can be used in administrative or criminal proceedings. Staff knew and understood the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. Staff also identified the Office of Inspector General as the investigative department.

B) The protocol follows federal guidelines and is appropriate for youthful inmates when needed. However, the facility does not house youth.

C) Victims of sexual abuse are offered forensic medical exams at no cost. These exams are conducted by SAFE or SANE professionals at a local hospital. The facility partners with a medical provider that has trained SAFE/SANE staff. The PAQ states that two forensic medical exams were conducted during the past 12 months by SANE nurses. Documentation was reviewed onsite to corroborate that all inmate victims of sexual abuse had access to forensic medical examinations.

D) A memorandum of understanding (MOU) with Women's Crisis Center ensures access to a victim advocate during the forensic process. The documentation that this service was offered was reviewed onsite.

E) Confirmed through interviews and policy, if requested by the victim, an advocate or qualified support person accompanies them through the medical forensic exam and any investigative interviews, offering emotional support, crisis intervention, information, and referrals throughout the process.

F) The agency is the investigative body.

G) The agency is the investigative body.

H) The agency always makes a victim advocate from a rape crisis center available to victims as documented in the MOU. Supporting documentation was reviewed.

Women's Crisis Center on behalf of its member programs agrees to respond to requests from the ODOC facilities located in the same area development district to provide support services related to sexual violence including hospital accompaniment for an offender victim during the forensic medical examination process, in-hospital investigatory interviews, emotional support services, referrals, and follow-up crisis counseling on request of the facility or offender-victim. If requested and approved, up

	to two sessions may be provided for each requesting offender-victim as deemed necessary by the facility and the rape crisis personnel. Crisis counseling may be provided via approved access to a crisis line, toll free hotlines, and mailing addresses for local, state or national advocacy rape crisis organizations. Prior to responding to a request for services, rape crisis center personnel will contact the facility Warden or District Supervisor office to identify exactly who will be arriving to provide the service and to ensure approval for facility entry.
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.22 Policies to Ensure Referrals of Allegations for Investigations Evidence Analyzed: 1. Security OP-040117 2. Facility Operations OP-030601 (PREA Policy) 3. Protocol for the investigative process 4. Interviews with the General Counsel (agency head) and investigators 5. Website review 6. Investigation file review worksheets Findings: A) The agency ensures that every allegation of sexual abuse or sexual harassment results in a completed administrative or criminal investigation, regardless of how the report is received (e.g., staff report, third-party report, or anonymous). According to the PAQ, 6 allegations of sexual abuse and sexual harassment were received. Of those, zero resulted in an administrative investigation while 6 were referred to criminal investigation. This was confirmed during interviews. While onsite, the auditor reviewed documentation of investigations, including full investigative reports with findings and completed a documentation review worksheet for each investigation reviewed. B) A written policy is in place requiring the referral of all allegations of sexual abuse or harassment to an appropriate investigative authority with legal jurisdiction to conduct criminal investigations. The auditor verified that this policy is published publicly on the agency website. Documentation of referrals of allegations were reviewed onsite and documented on a documentation review worksheet. The protocol

	is outlined in policy for the investigation process. C) The agency is responsible for criminal investigations. The policy is on the agency website. D) Auditor is not required to audit this provision. E) Auditor is not required to audit this provision.
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.31 Employee Training Evidenced Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PREA training curriculum for new employees 3. Staff PREA training acknowledgement forms 4. Interviews with random staff Findings: A) Exceeding this standard, as evidenced by the staff training curriculum and attendance records submitted and through staff interviews, all new employees who have contact with inmates are trained annually in: · The agency's zero-tolerance policy · Their responsibilities in prevention, detection, reporting, and response · Inmates' rights to be free from sexual abuse and harassment · Protection from retaliation for reporting or cooperating with investigations · The dynamics of abuse and harassment in confinement · Common reactions of victims · How to detect and respond to signs of abuse · How to avoid inappropriate relationships · How to communicate professionally, including with LGBTI individuals

	· Mandatory reporting requirements to outside authorities B) Training is gender-specific to the population served. Staff reassigned between facilities with different populations (e.g., male to female) receive additional, population-specific training. Employee training records were reviewed. C) All employees with inmate contact will receive annual training on PREA, exceeding this standard. Additionally, refreshers are available online. Employee training records were reviewed. The Oklahoma Department of Corrections provides new employee training PREA training before an employee enters a facility. In addition, each employee receives in-service PREA training yearly. This training is written each year by the PREA Coordinator, who trains all training officers throughout the agency. D) Training is documented through electronic verification to confirm understanding.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.32 Volunteer and Contractor Training Evidence Analyzed: 1 Contractor/Volunteer PREA Training Curriculum 2. Contractor/Volunteer Training Records 3. Memos from the PREA Coordinator 4. Facility Operations OP-030601 (PREA Policy) 5. Interviews with volunteers and contractors who have contact with inmates Findings: A) All volunteers and contractors with inmate contact are trained in their PREA responsibilities, including prevention, detection, reporting, and response protocols. The auditor reviewed the training curriculum to ensure compliance with the PREA Standard. Exceeding this standard, it is the Oklahoma Department of Corrections policy to train all volunteers initially at the same level, regardless of level of contact, which is part of a detailed two-day training session. Each volunteer retains detailed PREA training. In addition, these training courses are required by all volunteers every two years. Long-term contractors are also trained yearly as employees. The auditor verified this by reviewing the training curriculum. B) The level and content of training are appropriate to the volunteer or contractor's role and level of inmate contact. According to interviews, all are notified of the zero-tolerance policy and are informed on how to report incidents. Training records were reviewed.

	C) As evidenced by the review of training records the agency maintains documentation confirming that volunteers and contractors understand the training provided.
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115.33	Inmate education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.33 Inmate Education Evidence Analyzed: 1. Facility Operations OP-030601 2. Samples of Zero Tolerance Acknowledgements for Inmates 3. Inmate education materials, posters, etc. 4. Interviews with the intake staff and inmates 5. Site review observation – Intake PREA Information; Interpretation Services; Comprehensive PREA Education 6. PAQ (pre audit questionnaire) 7. PREA posters 8. Inmate handbook (English and Spanish) Findings: A) During assessment and reception, all new inmates will receive verbal and written information about sexual abuse and harassment. This information addresses 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 have instructions for using the PREA Hotline posted in a conspicuous location on or near the phones. According to the PAQ, 5582 inmates (100%) admitted during the past 12 months were given this information at intake. During the site review observation, the auditor observed the sexual safety information (PREA information/zero-tolerance information) provided at the point of intake or transfer. Written information is clear and provided at an appropriate reading-level and is accessible for all persons confined in the facility, including those who are limited English proficient (LEP). The facility provides written information in the languages most commonly spoken in the facility and/or provides translation services on-demand. The facility provides interpreters, when needed, to assist Deaf and non-

English speaking persons confined in the facility. Staff are prepared to read written information out loud, if applicable, to make accommodation for inmates when necessary (e.g., Blind or have low vision, limited reading skills). Mental health staff or other skilled educators/staff are involved in providing the required information to confined persons with cognitive or functional disabilities. The auditor interviewed inmates who are LEP and were able to test the facility's access to interpretation services. The facility utilizes agency-wide staff interpreters on demand. As a backup, a language line service is available over the phone.

B) Within 30 days of arrival, inmates receive comprehensive education, either in person or via video, covering the right to be free from abuse and retaliation and the agency's policies and response procedures. Exceeding this standard, it is the Oklahoma Department of Corrections policy for inmates to be educated on PREA within 7 days. In addition, the facility is regularly visited by the Disability Law Firm to measure compliance for inmates with disabilities, and the facility will address any issues identified. This provides further assurance that inmates who are cognitive disabled are provided with education. In addition, training is available on the inmate tablets in English, Spanish, closed captioning, and ASL. The auditor observed the comprehensive education process with an inmate.

C) Agency policy requires that inmates who are transferred from one facility to another be educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility.

D) The agency ensures that education is accessible to all inmates, including those who are:

- Limited English proficient
- Deaf or hard of hearing
- Visually impaired
- Cognitively or developmentally disabled
- Or who have limited literacy

E) The agency documents inmate participation in all education sessions. Samples of Zero Tolerance Acknowledgements for Inmates were reviewed.

F) In addition to direct education, key information is posted and made continuously available, including through:

- Posters in housing units and common areas
- Inmate handbooks
- Other written or visual formats

During the site review, the auditor observed posted or printed signage throughout the

	facility. Signage included audit notices, how to report sexual abuse and sexual harassment, access to outside victim emotional support services, and other relevant PREA information. The auditor reviewed the information provided on signage and determined that it is readable and accessible, consistent, and placed throughout the facility to convey vital sexual safety information specific to the facility. Other PREA signage is posted in areas where staff and inmates can read and retain the information being provided.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.34 Specialized Training: Investigations Evidenced Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PREA Investigations training curriculum through the National Institution of Corrections 3. NIC (National Institute of Correction) training certificates for investigators 4. Memo from the PREA Coordinator 5. Interviews with Investigators Findings: A) Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. Investigators assigned to manage sexual abuse allegations in confinement settings receive specialized training, in addition to general PREA training provided to all staff. 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 “Bloodborne Pathogen Exposure Control Program,” evidence collection protocol and crisis intervention. ODOC Inspector General Agents training shall include conducting sexual abuse investigations in confinement settings. Training documentation is retained in the employee personnel file. Exceeding this standard, the Oklahoma Department of Corrections trains its investigators yearly. In addition, each PCM is also trained as a PREA investigator. This ensures proper treatment of victims and perpetrators during initial information gathering processes. B) Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The Oklahoma Department of

	Corrections, Office of the Inspector General, Investigations Division, currently has 18 investigators. They conduct sexual abuse investigations in all private contract facilities including private prisons, county jails, and halfway houses. All of the Investigation agents have received specialized training. C) The agency maintains documentation showing that investigators have completed the specialized training. The auditor reviewed the NIC (National Institute of Correction) training certificates. D) Auditor is not required to audit this provision.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.35 Specialized Training: Medical and Mental Health Care Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PREA Training acknowledgments for Medical and Mental health staff 3. Memo from the PREA Coordinator 4. Interviews with medical and mental health staff Findings: A) PREA policy states, and evidenced by the training curriculum, Mental Health and Medical staff are 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 when hired and annually. Documentation shall be retained in the employee's file. The PAQ indicates that 100% of medical and mental health staff have been trained. All full- and part-time medical and mental health practitioners who work regularly in confinement facilities are trained on: · Recognizing signs of sexual abuse and harassment · Preserving physical evidence of abuse · Responding effectively and professionally to victims · Reporting requirements for allegations or suspicions of abuse or harassment B) Confirmed during interviews, medical staff at this facility do not conduct forensic exams. The facility will contact the Women's Crisis Center (WCC) and the WCC instructs them to transport the inmate to Norman Regional Hospital. The WCC will

	provide a SANE nurse to conduct the exam at the hospital. C) The agency maintains documentation verifying that this training has been completed, whether through in-house sessions or external providers. The auditor reviewed the training acknowledgements for PREA training. Exceeding this standard, the Oklahoma Department of Corrections medical staff are trained yearly. The standard requires medical staff to be only trained once. D) These practitioners also complete general PREA training. Training logs of medical and mental health staff were reviewed to ensure they received the training for employees and contractors/volunteers (depending on their status) in the referenced standard.
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.41 Screening for Risk of Victimization and Abusiveness Evidenced Analyzed: 1. Facility Operations OP-030102 2. Facility Operations OP-030601 (PREA Policy) 3. Screenings on inmates 4. Site review observations – PREA Risk Screening; Records Storage 5. Cell Assessment Form 6. Interviews with staff responsible for risk screening, inmates, PREA Coordinator (PC), and the PREA Compliance Manager (PCM) Findings: A) As evidenced by the “Self-Report Form” (assessment form), all individuals are assessed upon intake and transfer for their risk of being sexually victimized or sexually abusive. The facility uses information from the risk screening (Self Report Form) evaluation to fill out the “Cell Assessment Form” in order to inform staff making housing, work, education, and program assignments; with the goal of keeping those inmates who are at risk of being sexually victimized separate from those at high risk of being sexually abusive. During the site review, the auditor asked intake staff to walk through the process and do a mock intake for demonstration purposes. Case Managers complete the risk screening. The screening process occurs in a setting that ensures as much privacy as possible given the potentially sensitive information that

could be discussed (e.g., screening takes place out of earshot of other staff and inmates who would not otherwise participate in the screening process). Screening questions are asked in a manner that fosters comfort and elicits responses. Screening staff use an electronic instrument to collect information during the risk screening process. Screening staff affirmatively ask inmates about their sexual orientation and gender identity by directly inquiring if they identify as LGBTI (in addition to making a subjective determination about perceived status). Screening staff use additional sources of information to complete the initial risk screening assessment. Completion of the risk screening instrument returns a subsequent determination of risk of being sexually abused or being sexually abusive.

B) Intake screening is typically conducted within 72 hours of arrival. A sample of records for inmates admitted to the facility within the past 12 months was reviewed for evidence of appropriate screening within 72 hours.

C) The screening process uses an objective tool to ensure consistency and fairness. The Cell Assessment Form and the Self Report Form were reviewed. This screening instrument is built into an online system.

D) The risk screening instrument was reviewed to ensure that each item prescribed by the PREA standard is included/assessed. The following risk factors are evaluated to determine vulnerability to victimization:

- Mental, physical, or developmental disabilities
- Age
- Physical build
- Previous incarceration history
- Nonviolent criminal history
- Prior sex offense conviction
- Actual or perceived sexual orientation or gender identity (LGBTI status)
- History of sexual victimization
- Personal perception of vulnerability
- Civil immigration detention status

E) Inmates at risk for sexual victimization are identified by mental health or intake staff, and monitored by mental health, case management or security staff. Inmates are counseled by mental health staff. Risk factors for inmates included in this category are younger, older, of small stature, first time inmates, mental or physically disabled, serving incarceration for a sexual related offense, prior institutional victimization, LGBTQI orientation, or perceived by other inmates as weak. The risk screening instrument was reviewed to ensure that each item prescribed by the PREA standard is included/assessed.

	F) The initial risk assessment is reassessed within 30 days of intake based on any new or additional relevant information. Oklahoma Department of Corrections completes PREA screenings of all inmates within 72 hours of arriving at new facilities, within 30 days after this, and again annually, except for gender nonconforming inmates who are screened twice annually. The standard does not require annual screenings; therefore, the facility exceeds this standard. G) Oklahoma Department of Corrections completes PREA screenings of all inmates within 72 hours of arriving at new facilities, within 30 days after this, and again annually, except for gender nonconforming inmates who are screened twice annually. The standard does not require annual screenings; therefore, the facility exceeds this standard. The policy requires 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. Reassessment is also triggered by: · Referrals · Inmate requests · Incidents of sexual abuse · Additional relevant data H) Inmates are not disciplined for refusing to answer, or for incomplete responses to questions related to sexual orientation, gender identity, sexual victimization history, or personal vulnerability. I) The agency implements confidentiality controls to prevent the misuse of screening information, protecting inmates from potential harm or retaliation. During the site review observation, the auditor observed the physical storage area of the risk screening information and determined that the area is secured. Electronic safeguards of information/documentation collected and maintained electronically are in place with password protection, accessible only in certain areas, and role-based security.
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.42 Use of Screening Information Evidenced Analyzed: 1. Facility Operations OP-030601 (PREA Policy)

	2. Inmate screenings 3. Cell Assessment Form 4. Self-report Form 5. Interviews with PREA Compliance Manager (PCM), staff responsible for risk screening, transgender/intersex inmates, and PREA Coordinator (PC) Findings: A) The facility uses information from the risk screening evaluation to fill out the “Cell Assessment Form” in order to inform staff making housing, work, education, and program assignments; with the goal of keeping those inmates who are at risk of being sexually victimized separate from those at high risk of being sexually abusive. B) As determined by classification or mental health staff, and whenever possible, a single occupancy cell. Any housing concerns noted during the mental health screening regarding an inmate’s history of sexual abuse-victimization or sexual predatory behavior is communicated to the facility job and housing coordinator for entry into the inmate’s record. Individualized safety decisions are made for each inmate, based on the results of their screening. C) Transgender and intersex inmates are considered for housing and programming assignments on a case-by-case basis, evaluating their health and safety and any potential security or management risks. D) Housing and program placements for transgender or intersex individuals are reviewed at least twice annually to identify any safety threats. E) The inmate’s own perception of their safety is given serious consideration in placement decisions. F) Transgender and intersex inmates are given the option to shower separately from others. As stated in interviews, special shower arrangements must be requested and approved. Showers take place during count times when other inmates are locked in their cells. G) The agency does not assign LGBTI individuals to dedicated housing units solely based on sexual orientation or gender identity, unless done in compliance with a consent decree, legal settlement, or legal judgment to protect those individuals. The “Self-Report Form” (assessment form) will be considered in making initial placement housing at the reception center.
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.43 Protective Custody Evidenced Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PAQ (Pre Audit Questionnaire) 3. Interviews with Warden, staff who supervise inmates in segregated. No inmates were being held in segregated housing for risk of sexual victimization/who alleged to have suffered sexual abuse. Findings: A) As evidenced by the information contained in the PAQ and an interview with the Warden, inmates identified as being at high risk for sexual victimization are not placed in involuntary segregated housing unless all other alternatives have been assessed and deemed unavailable. If immediate assessment is not feasible, temporary placement in segregation is limited to less than 24 hours. B) Inmates in protective custody maintain access to programs, privileges, education, and work opportunities as much as possible. If limitations are necessary, the facility documents: · The specific opportunities are limited · The duration of the limitation · The justification for the restriction C) Segregated housing is used only until alternative housing arrangements are secured, and such placement should not exceed 30 days. In the past 12 months, zero (0) inmates at risk of sexual victimization were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. D) If placement is necessary, the facility must clearly document: · The basis for safety concern · The reason no alternative housing could be arranged E) A review of the inmate's status is conducted every 30 days to assess the continued need for protective separation.
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard

Auditor Discussion

115.51 Inmate reporting

Evidence Analyzed:

1. Facility Operations OP-030601 (PREA Policy)
2. MOU with Oklahoma State Bureau of Investigation (OSBI)
3. Pamphlet for Staff on what is Sexual Harassment or Sexual Abuse
4. Sexual Assault Awareness Brochure; Speak up Speak out Get Help signage
5. Incident report on an inmate reporting sexual abuse
6. Inmate Handbook in English and Spanish
7. Site review observation – Signage; Internal and External Reporting Methods; Sending and Receiving Mail; Record Storage; Staff Reporting
8. Interviews with random staff and inmates, and PREA Compliance Manager (PCM)
9. PAQ (Pre audit questionnaire)

Findings:

A. Facility Operations OP-030601 (PREA Policy) outlines how to report 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 (OIG) or the Oklahoma State Bureau of Investigations. Interviews confirmed that inmates are provided with multiple internal avenues to privately report:

- Sexual abuse or harassment
- Retaliation for reporting
- Staff negligence or misconduct contributing to such incidents

During the site review, the auditor observed posted or printed signage throughout the facility. Signage includes audit notices, how to report sexual abuse and sexual harassment, access to outside victim emotional support services, and other relevant PREA information. The auditor reviewed the information provided on signage and determined that it is readable and accessible, consistent, and placed throughout the facility to convey vital sexual safety information specific to the facility. The auditor was able to test the methods provided to inmates for internal reporting and determined that inmates have regular and timely access to reporting methods, and the facility receives these reports in writing using secured drop/mailboxes. The facility has a system by which inmates can report sexual abuse and/or sexual harassment electronically via tablet. Inmates confirmed that they can report verbally to a staff

	member they can trust. Inmates can call, email and message from their tablets. B. The agency has a MOU with the Oklahoma State Bureau of Investigation for external reporting methods. During the site review, the auditor observed posted or printed signage throughout the facility. Signage includes audit notices, how to report sexual abuse and sexual harassment, access to outside victim emotional support services, and other relevant PREA information. The auditor reviewed the information provided on signage and determined that it is readable and accessible, consistent, and placed throughout the facility to convey vital sexual safety information specific to the facility. During the site review, the auditor was able to test access to the external reporting entity. C. Staff must accept reports in any form - verbal, written, anonymous, or third-party and are required to promptly document verbal reports. If physical evidence is not present due to the assault occurring more than 120 hours prior to notification or the event is defined as abusive sexual contact or sexual harassment rather than a non-consensual sexual act, notification will be made by 9:00 a.m. the following business day to the OIG. D. A method is in place for staff to privately report to the OIG any knowledge or suspicions of sexual abuse or harassment. Staff are informed of these procedures through policy, posters, employee handbook, training, PCM training and meetings.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.52 Exhaustion of administrative remedies Evidenced Analyzed: 1. Inmate/Offender Grievance Process OP-090124 2. PAQ (pre audit questionnaire) 3. There were no inmates who reported sexual abuse held at the facility during the audit to interview 4. Website Findings: A) Grievances will formally address complaints about confinement conditions, staff actions, or incidents under ODOC control that aren't resolved informally. The issue must have personally affected the inmate/offender making the complaint. B) There is no time limit to any portion of a grievance regarding an allegation of

	sexual abuse. Grievances of alleged incidents of sexual abuse may be filed at any time, regardless of the time the incident occurred. Inmates are not required to use informal resolution steps before submitting grievance. This provision does not affect the agency's defense based on statute of limitations. C) Inmates can submit grievances without submitting them to the staff involved in the alleged incident. Grievances must not be routed to the subject of the complaint. D) Final agency decisions must be made within 90 days of filing. Time spent preparing appeals is not counted against the 90-day timeframe. The facility may extend the timeline by up to 70 days, if necessary, with written notice to the inmate. If no response is received within the required timeframes, the absence is considered a denial. According to the PAQ, in the past 12 months there have not been any grievances filed that alleged sexual abuse. E) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates are permitted to assist inmate/offenders in filing requests for administrative remedies relating to allegations of sexual abuse and will also be permitted to file such requests on behalf of inmates. The facility requires the alleged victim's consent to continue processing the grievance. If the inmate declines further processing, that decision must be documented. According to the PAQ, in the past 12 months, the facility has not received any grievances alleging sexual abuse filed by inmates in which the inmate declined third-party assistance. A third-party report using the same method provided to the public via the agency website was tested. The information was easy to locate on the webpage and understandable. The third-party reporting method is not the general contact information for the facility but is specific to reporting sexual abuse and sexual harassment in the facility. F) Emergency grievances alleging an imminent risk of sexual abuse must be forwarded immediately to a reviewer who can take action. An initial response is required within 48 hours, and a final decision within 5 calendar days. The response must detail the risk determination and actions taken. According to the PAQ, no emergency grievances alleging substantial risk of imminent sexual abuse have been filed in the past 12 months. G) Inmates may only be disciplined for filing a grievance in bad faith. In the past 12 months, 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 were made.
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.53 Inmate Access to Outside Confidential Support Services

	Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. MOU with Women's Crisis Center 3. Interviews with random inmates. There were no inmates who reported sexual abuse. 4. Site review observations – Signage; Outside Emotional Support Services; Sending and Receiving Mail 5. Mental Health Screening Form Findings: A) As evidenced by the MOU with Women's Crisis Center, the facility provides inmates with access to outside victim advocacy services by making available a mailing address and writing materials. During the site review, the auditor observed posted signage throughout the facility. Signage included audit notices, how to report sexual abuse and sexual harassment, access to outside victim emotional support services, and other relevant PREA information. B) Inmates are informed of the extent to which communications are confidential and whether reports may be forwarded due to mandatory reporting laws. C) The agency maintains an MOU with women's Crisis Center that is capable of delivering confidential emotional support. During the site review, the auditor observed posted signage throughout the facility. Signage includes audit notices, how to report sexual abuse and sexual harassment, access to outside victim emotional support services, and other relevant PREA information. Mental Health reviews all inmates at intake, regardless of their disclosure of sexual abuse history.
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115.54	Third-party reporting
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.54 Third-Party Reporting Evidence Analyzed: 1. Poster "Stop the Violence- Break the Silence" 2. Site review observations – Signage; Third-party Reporting 3. Website review Findings:

	A) As evidenced by the department website the agency has established a process to receive reports of sexual abuse or harassment from third parties. The auditor reviewed the department's website. The website has definitions of sexual abuse or harassment, procedures for reporting and it outlines the investigative process. A test report was made and confirmation received. Exceeding the standard, the Oklahoma Department of Corrections has four third-party reporting methods. These include two different phone hotlines, one email, and one via MOU with OSBI. As evidenced by posters, the inmate handbook, and the department website, publicly available information describes how third parties can submit reports on behalf of inmates. The auditor reviewed the department's website.
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.61 Staff and Agency Reporting Duties Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. Staff PREA Training curriculum outlining requirements for reporting incidents of sexual misconduct 3. Interviews with random staff, medical and mental health staff, Warden and PREA Coordinator (PC) 4. Site review observations – Staff Reporting Findings: A) As stated in the PREA policy, all staff, volunteers and contractors shall immediately report to their supervisor or higher authority any knowledge, suspicion, or other information regarding an incident of sexual abuse, assault or harassment that occurred in a facility/unit or other location, whether or not it is part of the agency. The auditor observed the staff reporting method and determined that it is available to all staff, on-demand. All staff must immediately report any known or suspected: • Sexual abuse or harassment • Retaliation related to such reports • Staff neglect or violate violations that may have contributed to abuse or retaliation B) Confidentiality must be maintained, with disclosures only made as necessary for treatment, investigation, or facility safety. C) Medical and mental health staff are mandated reporters and must inform inmates

	of this obligation at the start of services. D) This facility does not hold inmates under the age of 18. E) All documents associated with claims of sexual assault, including incident reports, investigative reports, inmate information, case disposition, medical and mental health evaluation findings and recommendations for post release treatment and/or counseling are confidential and retained by ODOC. All investigative files are considered confidential information. Copies of the investigative file will be maintained by the OIG. All reports, including anonymous and third-party, must be forwarded to the designated investigators.
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.62 Agency Protection Duties Evidenced Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PAQ (Pre Audit Questionnaire) 3. Interviews with the General Counsel (agency head), Warden and random staff 4. Stats on inmates for substantial risk of imminent sexual abuse Findings: A. When the facility learns an inmate is subject to substantial risk of imminent sexual abuse, it will take immediate action to protect the inmate. According to the information submitted with the PAQ (Pre Audit Questionnaire), the facility has eight inmates who were in substantial risk of imminent sexual abuse.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.63 Reporting to Other Confinement Facilities Evidenced Analyzed: 1. Facility Operations OP-030601 (PREA Policy)

	2. PAQ (Pre Audit Questionnaire) 3. Interviews with the General Counsel (agency head) and Warden Findings: A) The agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined to 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. According to the PAQ, in the past 12 months there have been no allegations received where an inmate was abused while confined at another facility. All information is gathered and a request for investigation is submitted for an appropriate investigation. B) Notification must be sent to the appropriate authority at that facility within 72 hours. C) The notification must be documented. The facility receiving the report must ensure the allegation is investigated in accordance with PREA standards. Notifications to the Division of Institution and Office of Inspector General are documented via Serious Incident Report in the ICON (electronic) Reporting System. D) The policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. The facility had zero sexual abuse allegations received from other facilities in the past 12 months.
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115.64 Staff first responder duties	
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.64 Staff First Responder Duties Evidence Analyzed: 1. Allegations of sexual abuse statistics. 2. Facility Operations OP-030601 (PREA Policy) 3. Interviews with random staff, and security and non-security staff first responders. There were no inmates who reported sexual abuse. 4. PAQ (pre audit questionnaire) Findings: A) When security staff are the first to respond to a sexual abuse allegation, staff immediately:

	• Separate the victim and alleged abuser • Preserve the crime scene • Instruct the victim to avoid actions that may destroy evidence • Ensure the alleged abuser also refrains from such actions According to the PAQ. in the last 12 months there were six (6) PREA allegations received where an inmate was sexually abused. There were six (6) security staff members that were first responders. The victim was separated from the abuser for all six (6) PREA allegations. Zero PREA allegations allowed physical evidence to be collected. Exceeding the standard, each Oklahoma Department of Corrections staff member carries a "PREA Card", which has detailed descriptions of each step in a PREA response situation. In addition, there are multiple "Emergency Books" inside each ODOC facility, strategically placed, which contain detailed PREA response instructions. B) If the first responder is not security staff, they must instruct the victim not to destroy evidence and immediately notify security personnel. The facility has not had any situations where a non-security staff member was the first responder to a PREA allegation.
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115.65	Coordinated response
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.65 Coordinated Response Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. Lexington Correctional Center Coordinated Response Plan 3. Interview with Warden Findings: A) Per policy, the facility will provide safe, humane, and secure environment for all inmates by administering a program of education, prevention, detection, response, investigation and tracking of all reported acts of sexual assault, abuse, harassment, and staff sexual misconduct. The program includes treatment for the victim and the perpetrator, ongoing support for the victim and enforced prosecution/discipline for the perpetrator(s). All inmates are provided information about sexual assault, abuse, or harassment during in-depth facility orientation to include prevention/intervention, self- protection, reporting sexual assault, treatment, and counseling. The facility had a written plan outlining how various roles—first responders, medical/mental health staff, investigators, and facility leadership—coordinate their actions when responding

	to a sexual abuse allegation. Exceeding this standard, the agency PREA Coordinator reviews and approves the facility's coordinated response plan annually.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.66 Preservation of Ability to Protect Inmates from Contact with Abusers Evidence Analyzed: 1. PAQ (Pre Audit Questionnaire) 2. Interview with the General Counsel (agency head) Findings: A) B) The Agency has not entered into or renewed any collective bargaining agreements.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.67 Agency Protection Against Retaliation Evidenced Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PAQ (Pre Audit Questionnaire) 3. Interviews with General Counsel (agency head), Warden, and designated staff charged with monitoring retaliation. There were no inmates who reported sexual abuse or held in segregated housing for risk of sexual victimization or who alleged to have suffered sexual abuse. 4. Retaliation monitoring documentation reviewed onsite and documented on a file review worksheet Findings: A) The facility ensures 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 agency has designated the Deputy Warden with monitoring for possible retaliation. B) Multiple protection strategies are employed, such as: · Housing or work assignment changes · Removal of alleged abusers from victim contact · Provision of emotional support services C) Monitoring occurs for at least 90 days following a report to detect signs of retaliation. Monitoring should continue if needed for over 90 days if the initial monitoring indicates a continuing need. According to the PAQ, the facility has not had an incident of retaliation occur in the past 12 months. Monitoring includes: · Disciplinary reports · Housing or job changes · Performance reviews D) Monitoring includes periodic status checks for inmates. E) Any individual expressing fear of retaliation receives appropriate protection. F) Auditor is not required to audit this provision.
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.68 Post-Allegation Protective Custody Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PAQ (Pre Audit Questionnaire) 3. Interviews with the Warden and staff who supervise inmates in segregated housing. There were no inmates held in segregated housing for risk of sexual victimization or who are alleged to have suffered sexual abuse. Findings: A) Any use of segregated housing to protect inmates after a sexual abuse allegation

	must follow the requirements outlined in 115.43, including assessments and documentation. Information submitted with the PAQ (Pre Audit Questionnaire) indicates: · The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to twenty-four hours awaiting completion of assessment – 0 · The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregate housing in the past 12 months for longer than 30 days – 0
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.71 Criminal and Administrative Agency Investigations Evidence Analyzed: 1. Facility Operations OP-030601 (PREA policy) 2. Security OP-040117 (Investigation Policy) 3. Interviews with investigators, Warden, PREA Coordinator (PC), and PREA Compliance Manager (PCM). There were no inmates who reported sexual abuse 4. Site review observations – Record Storage 5. Administrative and criminal investigation reports, including four (4) cases referred to prosecution were reviewed onsite and documented on a document review worksheet 6. PAQ (pre audit questionnaire) Findings: A) 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. OIG or designee may authorize investigations and information or intelligence gathering operations for any reason involving allegations of policy violations and/or violations of state and federal law. Samples of investigation reports for allegations of sexual abuse or sexual harassment were reviewed onsite by the auditor and a document review worksheet was completed.

B) The facility uses specially trained investigators for sexual abuse cases. The OIG will ensure an inspector general agent, who has received special training in sexual abuse investigations in confinement settings, is assigned to investigate all allegations of inmate-on-inmate nonconsensual sexual acts. The OIG or designee may authorize the official reporting to investigate reported incidents of inmate-on-inmate abusive sexual contact and harassment.

C) Investigation reports were reviewed and determined that investigators are required to:

- Collect physical, DNA, and electronic evidence.
- Interview with all relevant parties.
- Review prior similar allegations against the accused.

D) Agencies must consult prosecutors before conducting compelled interviews in potential criminal cases. Investigation reports were reviewed by the auditor.

E) Polygraphs or truth-telling devices are not used as a condition for proceeding with investigations.

F) Administrative investigations must examine whether staff actions or omissions contributed to the abuse and be documented with clear findings, credibility assessments, and evidence. The assigned Inspector General Agent will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Investigation reports are kept secured with limited access. Investigation reports were reviewed onsite, and a document review worksheet was completed for each report.

G) Criminal investigations must also be documented with supporting evidence attached where feasible. Criminal investigation reports were reviewed onsite, and a document review worksheet was completed for each report.

H) Substantiated criminal allegations must be referred to prosecution. Lexington Assessment & Reception Center has referred four (4) allegations of conduct that appeared to be criminal to prosecution.

I) Reports must be retained for the duration of the alleged abuser's employment or incarceration, plus five years. Samples of investigation reports were reviewed onsite.

J) Investigations must continue even if the alleged abuser or victim leaves the agency's control.

K) Auditor is not required to audit this provision.

L) Confirmed through interviews, when outside agency investigators investigate sexual abuse, they must adhere to these standards, and facilities must cooperate and stay informed about those investigations.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.72 Evidentiary Standard for Administrative Investigations Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. Interviews with investigators 3. Investigation reports reviewed onsite with a document review worksheet completed for each Findings: A) According to the PREA policy there is not any standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Investigation reports were reviewed onsite and a document review worksheet completed.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.73 Reporting to Inmates Evidence Analyzed: 1. Facility Operations OP-030601 2. Inmate Notifications of Investigation Results 3. PAQ (pre audit questionnaire) 4. Interviews with Warden and investigators. There were no inmates who reported sexual abuse 5. Six (6) sexual abuse investigation reports reviewed onsite with a document review worksheet completed Findings: A) Inmates are informed of the outcome (substantiated, unsubstantiated, or unfounded) of any sexual abuse investigation they initiate. The auditor reviewed the notifications to inmates at the completion of the investigations. According to the PAQ,

	there were six (6) criminal and/or administrative investigations of alleged sexual abuse that were completed by the agency in the past 12 months. Of the alleged sexual abuse investigations that were completed in the past 12 months, all inmates were notified, verbally and in writing, of the results of the investigation. B) The agency is responsible for conducting administrative and criminal investigations. C) When staff is the subject of the allegation, and the allegation is not unfounded, the inmate must be informed if the staff member is no longer assigned to the unit or employed at the facility and the staff member is indicted or convicted in connection with the abuse. D) When another inmate is the subject of a substantiated allegation, the alleged victim must be informed of any indictment or conviction related to the incident. E) All notifications or attempted notifications must be documented. Notification of Investigation Status forms were reviewed by the auditor while onsite. Notification of Investigation Status forms are signed and dated by the inmate. F) Auditor is not required to audit this provision.
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 Disciplinary Sanctions for Staff Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PAQ (Pre Audit Questionnaire) Findings: A) Staff are subject to disciplinary action, up to and including termination, for violations of agency sexual abuse or harassment policies. B) Termination is the presumptive action for substantiated sexual abuse. According to the PAQ, in the past 12 months, no staff from the facility have violated agency sexual abuse or sexual harassment policy. C) Sanctions for other violations are based on the severity of the offense, disciplinary history, and consistency with sanctions imposed on others for similar behavior. In the past 12 months, there were no staff from the facility who was disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse).

	D) All terminations or resignations in lieu of termination related to sexual abuse or harassment must be reported to law enforcement (unless clearly non-criminal) and licensing bodies. In the past 12 months, no staff from the facility have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.77 Corrective Action for Contractors and Volunteers Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. PAQ (Pre Audit Questionnaire) PAQ 3. Interview with the Warden Findings: A) Contractors or volunteers found to have engaged in sexual abuse are prohibited from inmate contact and must be reported to law enforcement and licensing bodies (if applicable). In the past 12 months, there have not been any contractors or volunteers that have been reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of inmates. B) Other policy violations require appropriate remedial action, including possible termination of facility access.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.78 Disciplinary Sanctions for Inmates Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. OP-060125 Attachment A (Inmate disciplinary codes) 3. Interviews with the Warden and medical and mental health staff 4. Six (6) investigation reports reviewed onsite, and document review worksheets

	completed 5. PAQ (pre audit questionnaire) Findings: A) Inmates may face disciplinary sanctions after a substantiated administrative or criminal finding of inmate-on-inmate sexual abuse. Ensuring all inmates or staff members found guilty of committing sexual assault are disciplined in accordance with agency procedures they will be referred for criminal prosecution by the office of the Inspector General. In the past 12 months, zero administrative findings of inmate-on-inmate sexual abuse occurred at the facility. B) Sanctions must be proportional to the offense, the inmate's history, and comparable sanctions. C) The process must consider mental illness or disability as mitigating factors. Investigation reports were reviewed. D) The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. E) Inmates may only be disciplined for sexual contact with staff if the staff member does not consent. F) Good faith reports are protected—even if unsubstantiated. G) The agency prohibits consensual inmate sexual activity. The agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. The Agency ensures 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.
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.81 Medical and Mental Health Screenings: History of Sexual Abuse Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. Health Services OP-140100

	3. Health Services OP-140113 4. Site review observation – Record Storage 5. Mental health assessment screening forms 6. List of inmates who disclosed a history of being sexually abused 7. Interviews with medical and mental health staff, inmates who disclosed sexual victimization at risk screening and staff responsible for risk screening Findings: A) Inmates identified through screening as having experienced or perpetrated sexual abuse must be offered a follow-up with a medical or mental health provider within 14 days. According to the PAQ, in the past 12 months, 100% of inmates who disclosed prior sexual victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Secondary materials were reviewed. B) 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. The follow-up meeting is offered within 14 days of the intake screening. In the past 12 months, 100% of inmates who have previously perpetrated sexual abuse, as indicated during the screening, were offered a follow-up meeting with a mental health practitioner. Secondary materials were reviewed. C) This provision does not apply to this facility. D) The information 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. During the site review, the auditor observed that risk screening, medical and mental health records were securely retained and password protected with restricted access. E) Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.82 Access to Emergency Medical and Mental Health Services Evidence Analyzed: 1. Health Services OP-140118

	2. Screening forms and follow-up documentation 3. Interviews with medical and mental health staff, and security and non-security staff first responders. There were no inmates who reported sexual abuse. Findings: A) Victims of sexual abuse receive timely and unrestricted access to medical and crisis intervention services. Medical and mental health staff maintain secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided were reviewed. B) First responders notify medical staff on duty at the time a report of recent abuse is made. Medical staff are available 24 hours a day, seven days a week. C) Victims are offered emergency contraception and STI prophylaxis, as medically appropriate. D) All treatment is provided free of cost, regardless of the victim's participation in the investigation. The Auditor reviewed Health Services screening and follow up documentation and Mental/Medical health screenings from the facility with progress notes.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.83 Ongoing Medical and Mental Health Care Evidence Analyzed: 1. Health Services OP-140118 2. Facility Operations OP-030601 (PREA Policy) 3. Interviews with medical and mental health staff. There were no inmates who reported sexual abuse 4. Mental health evaluations Findings: A) The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Exceeding this standard, the facility completes a mental health evaluation on all inmates upon arrival.

	B) 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. C) The facility shall provide such victims with medical and mental health services consistent with the community level of care. D) E) These provisions do not apply as this is an all-male facility. F) Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. G) Treatment remains free, regardless of whether the victim names the abuser or cooperates. H) The facility attempts to conduct mental health evaluations of known abusers within 60 days, offering treatment if deemed appropriate.
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.86 Sexual Abuse Incident Reviews Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. Incident review forms 3. PAQ (pre audit questionnaire) 4. Interviews with the Warden, PREA Compliance Manager and incident review team Findings: A) 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. In the past 12 months, according to the PAQ, six (6) criminal and/or administrative investigations of alleged sexual abuse were completed at the facility, excluding unfound incidents. Notification of Investigation Status forms and Sexual Abuse/Harassment Incident Review forms were reviewed for compliance. B) This review shall occur within 30 days of the receipt by the facility or of OIG investigative findings. In the past 12 months, six (6) criminal and/or administrative investigations of alleged sexual abuse had an incident review completed within 30 days. Sexual Abuse/Harassment Incident Review forms were reviewed for compliance.

	C) The review team shall include administrative staff, with input from line supervisors, investigators, medical/mental health professionals and facility PREA compliance managers. D) The facility prepares a report of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made and any recommendations for improvement and submits such report to the facility head and PREA Compliance Manager. The team reviews: · Policy and practice implications. · Potential motivations behind the abuse (e.g., bias or gang dynamics). · Physical environment and blind spots. · Staffing adequacy and monitoring technology. E) The facility implements recommendations for improvement or will document the reasons for not doing so. The Sexual Abuse/Harassment Incident Review form and documentation of implementation of recommendations will be submitted to the affected administrator of Institutions and agency PREA Coordinator within 30 days after the review team's conclusion. The auditor examined incident reviews, and the committee assessed policies, potential motivations, incident locations, and staffing, making recommendations for changes if necessary.
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.87 Data Collection Evidence Analyzed: 1. Facility Operations OP-030601 2. Agency Website 3. Sexual abuse data Findings: A) 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. B) The agency annually aggregates incident-based sexual abuse data. C) Data must support the completion of the Survey of Sexual Violence (SSV) and be collected from all contracted facilities. D) The agency collects, reviews, and maintains data from all incident-based documents, including reports, investigation files, and sexual abuse incident reviews. E) The agency collects both detailed and summary data from all private facilities it contracts with for inmate confinement, when applicable. F) All data is retained and made available upon request from the Department of

	Justice by June 30 of each year. The auditor reviewed 5 years of PREA annual reports located on the agency's website.
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.88 Data Review for Corrective Action Evidence Analyzed: 1. Five years of PREA Annual Reports and Corrective Action Plans 2. Interviews with General Counsel (agency head), PREA Coordinator (PC) and the PREA Compliance Manager (PCM) 3. Review of agency website https://oklahoma.gov/doc/prison-rape-elimination-act.html 4. Facility Operations OP-030601 (PREA Policy) 5. 2020 stats on sexual misconduct for ODOC Findings: A) The Agency must review the aggregated data to identify problem areas, take corrective action and prepare 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. PREA Annual Reports and Correction Action Plans were reviewed. B) The report must include year-to-year comparisons and assess agency progress in addressing sexual abuse. C) The agency makes its reports available on the agency website. The reports are approved by agency leadership. The auditor checked the department's website, which posts all PREA reports. D) The agency redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	15.89 Data Storage, Publication, and Destruction Evidence Analyzed: 1. Facility Operations OP-030601 (PREA Policy) 2. Agency website 3. Interview with the PREA Coordinator 4. Site review observation – Record Storage Findings: A) All sexual abuse data collected under § 115.87 must be securely retained. During the site observation, the auditor observed that data is stored electronically, and safeguards are in place for the security of this information. B) Aggregated data from both agency-run and contracted facilities must be made publicly available at least annually, usually through the agency’s website. The department website contains all information as required by this standard. The website was reviewed to verify that sexual abuse data is publicly made available and does not include any personally identifiable information. C) All personal identifiers must be removed prior to publication. D) Data must be retained for at least 10 years unless the law requires otherwise. The department website contains all information as required by this standard. The website was reviewed to verify that sexual abuse data is publicly made available and does not include any personally identifiable information. The Auditor reviewed five (5) years of PREA annual reports located on the agency's website.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion 115.401 Frequency and Scope of Audits Evidence Analyzed: 1. Agency website review 2. Site review observation 3. Notice of Audit Postings Findings: A) During the three-year period starting on August 20, 2013, and during each three-

	year period thereafter, the agency has ensured that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once. The agency met this standard during the prior three-year audit cycle. Audit reports can be found on the agency website. B) During each one-year period starting on August 20, 2013, the agency has ensured that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited. The agency met this standard during the prior three-year audit cycle. Audit reports can be found on the agency website. H) The auditor had full access to all areas of the facility and completed a thorough site review observation. I) The facility provided the auditor with copies of all requested documentation, including electronically stored information. Investigation files and human resource documents were reviewed onsite. M) The auditor conducted private interviews with inmates. N) A Notice of Audit was posted in all housing units. Photos of postings were provided to the Auditor six weeks prior to the site visit. The information provided to the inmates included accurate information regarding the confidential nature of any correspondence and communication with the auditor. The agency/facility have provided inmates with a method of sending confidential information or correspondence to the auditor. Such method provided the same level of confidentiality as if the inmates were communicating with legal counsel. The auditor received one (1) written correspondence from an inmate.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 Audit Contents and Findings Evidenced Analyzed: 1. Agency website Findings: A) The agency has published on its agency website all Final Audit Reports for all its facilities during the past three years.

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.)	na
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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	na
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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.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

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

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	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.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	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.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	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.	yes
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?	no
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	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.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

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

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	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)			
	<table><tr><td data-bbox="316 174 1289 568">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.)</td><td data-bbox="1289 174 1490 568">yes</td></tr></table>	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes
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