

# PREA Facility Audit Report: Final

Name of Facility: Wilkinson County Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/11/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Robert Manville	Date of Signature: 06/11/2022

AUDITOR INFORMATION	
Auditor name:	Manville, Robert
Email:	robertmanville9@gmail.com
Start Date of On-Site Audit:	05/03/2022
End Date of On-Site Audit:	05/05/2022

FACILITY INFORMATION	
Facility name:	Wilkinson County Correctional Facility
Facility physical address:	2999 US-61, Woodville , Mississippi - 39669
Facility mailing address:	

Primary Contact	
Name:	Tracey Arbuthnot
Email Address:	tracey.arbuthnot@mtctrains.com
Telephone Number:	601-888-3199 ext. 2

Warden/Jail Administrator/Sheriff/Director	
Name:	Darrel Vannoy
Email Address:	darrel.vannoy@mtctrains.com
Telephone Number:	601-888-3199 ext.

Facility PREA Compliance Manager	
Name:	Emma Taplin
Email Address:	emma.taplin@mtctrains.com
Telephone Number:	O: 601-888-3199 2215

Facility Characteristics	
Designed facility capacity:	952
Current population of facility:	925
Average daily population for the past 12 months:	901
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	21-65
Facility security levels/inmate custody levels:	minimum, medium, close
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	165
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	2
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	5

AGENCY INFORMATION	
Name of agency:	Management & Training Corporation, Inc.
Governing authority or parent agency (if applicable):	
Physical Address:	500 N. Marketplace Drive, Centerville, Utah - 84014
Mailing Address:	
Telephone number:	801-693-2600

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

Agency-Wide PREA Coordinator Information			
<b>Name:</b>		Heather Manuz	<b>Email Address:</b> heathermanuz@gmail.com

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
<b>Number of standards exceeded:</b>	
3	<ul style="list-style-type: none"> <li>• 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</li> <li>• 115.51 - Inmate reporting</li> <li>• 115.65 - Coordinated response</li> </ul>
<b>Number of standards met:</b>	
42	
<b>Number of standards not met:</b>	
0	

# POST-AUDIT REPORTING INFORMATION

## GENERAL AUDIT INFORMATION

### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-05-03
2. End date of the onsite portion of the audit:	2022-05-05

### Outreach

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

## AUDITED FACILITY INFORMATION

14. Designated facility capacity:	952
15. Average daily population for the past 12 months:	925
16. Number of inmate/resident/detainee housing units:	9
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	917
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	2
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	3
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	1
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	5
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	165
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	5
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	22
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	23
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Offender from each housing unit were interviewed
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	9
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1

<b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b> 	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
<b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b> 	Prior to beginning the interviews with offenders, the medical and mental health staff was asked to bring all information on ADA offenders to a meeting. The classification supervisor, the PREA compliance manager, and the mental health staff went through the alpha roster and identified offenders in the targeted population based on screening instrument and medical and mental health documentation. From the list the auditor randomly developed a list of residents to interview.
<b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b> 	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
<b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b> 	Prior to beginning the interviews with offenders, the medical and mental health staff was asked to bring all information on ADA offenders to a meeting. The classification supervisor, the PREA compliance manager, and the mental health staff went through the alpha roster and identified offenders in the targeted population based on screening instrument and medical and mental health documentation. From the list the auditor randomly developed a list of residents to interview.
<b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b> 	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to beginning the interviews with offenders, the medical and mental health staff was asked to bring all information on ADA offenders to a meeting. The classification supervisor, the PREA compliance manager, and the mental health staff went through the alpha roster and identified offenders in the targeted population based on screening instrument and medical and mental health documentation. From the list the auditor randomly developed a list of residents to interview.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>3</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to beginning the interviews with offenders, the medical and mental health staff was asked to bring all information on ADA offenders to a meeting. The classification supervisor, the PREA compliance manager, and the mental health staff went through the alpha roster and identified offenders in the targeted population based on screening instrument and medical and mental health documentation. From the list the auditor randomly developed a list of residents to interview.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>1</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>



<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to beginning the interviews with offenders, the medical and mental health staff was asked to bring all information on ADA offenders to a meeting. The classification supervisor, the PREA compliance manager, and the mental health staff went through the alpha roster and identified offenders in the targeted population based on screening instrument and medical and mental health documentation. From the list the auditor randomly developed a list of residents to interview.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>Prior to beginning the interviews with offenders, the medical and mental health staff was asked to bring all information on ADA offenders to a meeting. The classification supervisor, the PREA compliance manager, and the mental health staff went through the alpha roster and identified offenders in the targeted population based on screening instrument and medical and mental health documentation. From the list the auditor randomly developed a list of residents to interview. The Lt assigned to the Restrictive Housing Unit and Warden were also interviewed.</p>

## Staff, Volunteer, and Contractor Interviews

### Random Staff Interviews

<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>16</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>I interviewed all staff that were on shift during the audit with the exception of officers assigned to towers and outside security staff.</p>

### Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	10
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

<p><b>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<p><input type="checkbox"/> Agency contract administrator</p> <p><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Medical staff</p> <p><input checked="" type="checkbox"/> Mental health staff</p> <p><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input checked="" type="checkbox"/> Administrative (human resources) staff</p> <p><input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input checked="" type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input type="checkbox"/> Other</p>
<p><b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>a. Enter the total number of CONTRACTORS who were interviewed:</b></p>	<p>2</p>

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

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

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

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>During the site review the locations of cameras and mirrors, room layout, restrooms and the placement of PREA posters and information was observed. Facility Notices in English and Spanish provided to the facility during the Pre-Onsite Audit Phase were found displayed in various locations throughout the facility. PREA reporting information and other PREA posted information is in both</p>

English and Spanish and posted in all housing units and in numerous locations throughout the facility. Reminders of opposite gender announcements are stenciled near the entries of housing units. Auditor observed the location of staff in the sub control rooms to ensure that there is no direct view of inmate taking showers. The showers are half walls, with shower curtains covering the entrance of the showers. Some showers were cages. The cameras from the main control room was viewed to ensure that the control staff could not view inmates fully nude while showering. The camera views do not allow for the viewing of inmates. The facility has installed a multitude of mirrors based on previous audits showing blind spots. There were no blind spots noted during this tour. The inmate's cells were equipped with individual toilets and sinks. All toilets not located in the offenders' cells had partitions and walls in front of the toilet area. The medical area had a wraparound curtain to provide privacy for examinations. The speed dial offender telephone was tested in several living units. Inmates are not required to utilize a PIN to contact the Indiana Coalition Against sexual abuse or MDOC speed dial or MTC speed dial. All call were answered in a timely manner. The MDOC PREA coordinator answered the MDOC hotline and the Director of the MCASA answered the Victim and emotional support hotline on two of the telephone calls. During the site review, the auditors spoke informally to offenders questioning them about their overall knowledge of the agency's zero-tolerance policy and methods of reporting available to them. Several offenders were able to show me how to utilize the telephone system. Most offender were talkative and could articulate the agency policies about zero- tolerance. As speaking with one offender, several offenders joined in the conversation. They wanted me to know, that the offender population does not allow offenders to engage in sexual activities and this is a safe prison. Staff interviewed were engaging with the auditor and it was noted that they were also engaging with the offender population. All offenders knew the facility administrator, the PREA compliance manager and the other staff that were on the tour. When asked how staff would manage an offender that claims to be in imminent danger of sexual assault since there is no segregation unit, staff indicated they would stay with the resident and take him to the Captains office. They would follow the protocol of not brushing his teeth, not take a shower, not defecating, and would notify the major and medical since they would escort the offender to the observation room. Offender stated they are not seen by staff when showering or using the restroom. The offenders stated that female announce their presence when entering their living unit and don't come in the area where they shower and use the toilet when that area is being utilized by offenders in medical. Some offenders claimed that staff purposely look in their cells when they are using the bathroom and they are not allowed to put anything to keep people from looking in their room. When asked if they didn't know when count time occurs, they dismissed my interview. The intake room includes holding areas and private rooms. There is a television in the intake areas for residents to view PREA video. The strip down room is private with a door leading to that area. Staff indicated that male staff and a male staff observe are present during all searches. Later it was noted that the nurse, and staff who conduct the screening was in the area conducting the screening. During this time the Intake provide the offender with a PREA pamphlet, and offender handbook and documentation that offenders are requested to sign.

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

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>Inmate Files Reviewed: Twenty-four (24) resident records were reviewed. These records included the following information. • Identification Number • Date of Birth • Date of Arrival • Date of Screening • Date of Follow-up Screening • Date of Initial PREA notification • Date of PREA orientation/education: Employee Background Checks: Fifteen (15) background clearance files including five (5) new hired staff, five (5) staff that had been promoted and five (5) employees that had over five years tenure at the facility. Five (5) background checks for contractors were reviewed. One volunteer file was reviewed. All background checks had been completed for staff and contractors prior to contact with inmates or prior to promotion or over 5 years tenure at the facility: Employee Training Records: Reviewed Fifteen (15) employee training records were reviewed. Included in the employee training records were random monitors (direct care staff), supervisors, Investigator, PREA Compliance manager. All training has been completed in the last 12 months: Interviews with random staff indicated they had received refresher training during the last six (6) months. The correctional staff indicated during the tour they are provided weekly briefings about PREA. This was confirmed by interviews with shift supervisors and daily briefing logs. Most staff interviewed stated they had received the questionnaire for their specific duties prior to the audit and were prepared for the audit. Investigations: There were a total of eighteen (18) reported allegations of sexual abuse/sexual harassment. All investigative files were reviewed. Unannounced Rounds: The logbooks and computerized unannounced rounds were reviewed in each housing unit and the control rooms.</p>

## SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

### Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	11	0	11	0
Staff-on-inmate sexual abuse	1	0	1	0
Total	12	0	12	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	8	0	8	0
Staff-on-inmate sexual harassment	1	0	0	0
Total	0	0	1	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	5	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	5	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	2	2	7	0
Staff-on-inmate sexual abuse	0	1	0	0
Total	2	3	6	0

**Sexual Harassment Investigation Outcomes**

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	2	6	0
Staff-on-inmate sexual harassment	0	1	0	0
Total	0	3	6	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

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

10

99. 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**

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:

9



101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	9
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	8

<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>Staff-on-inmate sexual harassment investigation files</b></p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The facility had five offenders that were transported to a SANE. A review of the allegations all five of these allegations would rise to the level of criminal if substantiated and should have been forwarded to DOC Corrections Investigation division. A corrective action plan has been implemented and now all allegations of sexual abuse will be sent to DOC CID prior to beginning the investigations. DOC will determine if they provide an investigator to collect evidence and go to the SANE to receive any evidence and DOC will manage conduct the investigation prior to an administrative investigation. As part of the corrective action plan DOC has received all of the investigations and is reviewing to determine if they are going to conduct an investigation on all sexual abuse allegation, however specifically all of the investigations when an allegation resulted in an offender going out for a SANE. Included in this corrective action plan includes notification to the MDOC PREA coordinator of all allegations that occur at the facility in a timely manner.</p>
<p><b>SUPPORT STAFF INFORMATION</b></p>	
<p><b>DOJ-certified PREA Auditors Support Staff</b></p>	

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>Non-certified Support Staff</b></p>	
<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>AUDITING ARRANGEMENTS AND COMPENSATION</b></p>	
<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<p>Identify the name of the third-party auditing entity</p>	<p>Correctional Management and Communication Group</p>

## 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
	<p data-bbox="293 195 755 226"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="293 254 479 285"><b>Auditor Discussion</b></p> <p data-bbox="293 289 1295 338">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="293 352 824 390">MDOC SOP 20-14-01, Prison Rape Elimination Act of 2003</p> <p data-bbox="293 411 695 443">WCCF Policy 12.004, Ensuring Safe Prisons</p> <p data-bbox="293 464 797 495">Memo Designating WCCF PREA Compliance Manager</p> <p data-bbox="293 516 558 548">WCCF Organizational Chart</p> <p data-bbox="293 558 1052 600">Management and Training Corporation (MTC) Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="293 621 423 653">MTC Website</p> <p data-bbox="293 674 529 705">MTC Organization Chart</p> <p data-bbox="293 726 699 758">Pre-Audit Questionnaire/Adult Prisons &amp; Jail</p> <p data-bbox="293 800 1430 1230">115.11 (a): MDOC SOP 20-14-01,.2 and WCCF Policy 12.004 and the agency and facility's emphasis on PREA exceeds the requirements of this standard. The agency's zero tolerance against sexual abuse is clearly established and the policy outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment allegations. Definitions are provided to make clear the agency and facilities mandates for all staff, volunteers, contractor and visitors to comply with PREA standards. When you enter the front entrance of the facility there are the agency and institution policies outline a zero-tolerance policy for all forms of sexual abuse and sexual harassment. Inmates are informed orally about the zero-tolerance policy and the PREA program during in-processing and additional admission and orientation presentations. The orientation is offered in English and in Spanish. Additional program information is contained in the Offender manual, and postings distributed throughout the facility (observed during the tour). All written documents are available in English and Spanish. Additional interpretive services are available for inmates who do not speak or read English. Both institution staff and inmates are provided with a wealth of opportunities to become aware of PREA policies and procedures. All employees receive initial training and annual training, as well as updates throughout the year. The institution meets the standards with all the programs they have implemented to ensure the inmates and staff understand its position on zero tolerance.</p> <p data-bbox="293 1220 1430 1314">Yearly MTC conducts a PREA review of the facility to determine level of compliance and to identify concerns that need to be addressed by the PREA compliance manager and the facility administrator.</p> <p data-bbox="293 1304 1438 1524">115.11 (b): MTC employs an upper-level, agency-wide PREA Coordinator at the corporate level. The agency's organizational chart depicts her position within the agency. The PREA Coordinator oversee the agency's efforts to comply with the PREA standards in all of MTC's facilities. MTC has a team of staff that support the PREA coordinator efforts in meeting all PREA standards. The administrative team meets on a regular basis to develop strategies to establish a culture that provides a safe environment for staff and inmates. The PREA Coordinator and her team or very knowledgeable about PREA and best practices to carry out the Agency's approach to prevent, detect, and respond to sexual abuse or sexual allegations.</p> <p data-bbox="293 1514 1438 1818">115.11 (c): MTC ensures that all its facilities have a PREA Compliance Manager with sufficient time and authority to coordinate the facilities PREA efforts. The facility's organizational chart illustrates the PREA Compliance Manager's position within the facility. WCCF provides support staff for assisting the PREA compliance manager with her task in carrying out the PREA mandates from MTC. The administrative team meets on a regular basis to develop strategies to establish a culture that provides a safe environment for staff and inmates. Though out the tour, staff, and inmates new the PREA compliance managers name and role at the facility. Both the MTC PREA Coordinator and Facility Compliance Manager advised they have sufficient time and authority to coordinate efforts to comply with PREA standards. The facility provides additional support for PREA related investigations, policy reviews, mock audits and follow up to cooperate office PREA coordinator's office questions or concerns.</p> <p data-bbox="293 1808 1406 1923">Exceed compliance was determined by review of agency organization chart, agency, and facility policies, both staff and inmate training orientation power point presentations, posters, offender manual and interviews with staff, contractors, volunteer, and inmates further provided exceed compliance with this standard.</p>

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Contract for Service</p> <p>Statement of Fact</p> <p>MTC is a private provider and does not contract for the confinement of their offenders; therefore, this standard is not applicable to this facility.</p>

115.13	Supervision and monitoring
	<p data-bbox="293 195 732 226"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="293 258 480 279"><b>Auditor Discussion</b></p> <p data-bbox="293 289 1295 338">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="293 359 686 386">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="293 417 500 445">MDOC SOP 20-14-01,</p> <p data-bbox="293 470 488 497">WCCF Policy 12.004</p> <p data-bbox="293 522 591 550">Facility Staffing Plan 10/27/2021</p> <p data-bbox="293 575 488 602">Unannounced PREA</p> <p data-bbox="293 627 675 655">Documentation of Unannounced Rounds.</p> <p data-bbox="293 680 553 707">Annual Facility Assessment</p> <p data-bbox="293 732 561 760">Camera Inventory/Locations</p> <p data-bbox="293 785 415 812">Shift Roster</p> <p data-bbox="293 812 1430 1079">115.13 (a)(b): MTC requires the facility to review the staffing plans on an annual basis. Interviews with the facility administrator and executive staff revealed compliance with the PREA, and that other safety and security issues are always a primary focus when they consider and reviewing their respective staffing plans. The facility has a Staffing Report that is developed for each pay period. The Prison provides the bimonthly reports that includes mandatory post and hold over staffing to meet the mandatory posts. This report also includes the number of positions authorized, the number filled, the number vacant, recruitment efforts and any staffing concerns during the pay period. The Warden meets weekly with his executive staff, including Chief of Security, Lieutenant, and the Human Resource Manager (HRM) to address staffing issues as they relate to the PREA. The staffing plan is based on a population 972 offenders.</p> <p data-bbox="293 1094 764 1121">The staffing plan is based on the following criteria:</p> <ul data-bbox="293 1142 1317 1646" style="list-style-type: none"> <li>- Generally accepted detention and correctional practices.</li> <li>- Judicial findings of inadequacy.</li> <li>- Findings of inadequacy from Federal investigative agencies.</li> <li>- Findings of inadequacy from internal or external oversight bodies.</li> <li>- All components of the facility's physical plant.</li> <li>- The composition of the inmate population.</li> <li>- The number and placement of supervisory staff.</li> <li>- Institution programs occurring on a particular shift.</li> <li>- Applicable State or local laws, regulations, or standards.</li> <li>- The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and - Other relevant factors.</li> </ul> <p data-bbox="293 1646 1430 1766">The institution has been provided with all necessary resources to support the programs and procedures to ensure compliance with the PREA standards. The audit included staff interviews, and rosters. Supervisory and Administrative staff members routinely make unannounced rounds. These rounds are documented in Unit Logs located in each housing unit.</p> <p data-bbox="293 1766 1446 1940">There have been no judicial findings of inadequacy from federal investigative agencies or findings of inadequacy from internal or external oversight bodies relevant to this standard. All essential posts are filled each shift and no essential posts are kept open for salary savings. When programs are offered, staffing is increased to provide additional supervision. There has been no deviation from the staffing plan based on interviews with facility administrator and PAQ. The facility is presently fulfilling the contracting compliance through overtime, incentive pay and an exerted attempt to hire more staff.</p> <p data-bbox="293 1940 1455 2024">115.13 (c): MTC Policy mandates that whenever necessary and no less that annually, the staffing plan is reviewed and documented on the Annual PREA Facility Assessment This completed form is submitted to the Corporate PREA Coordinator</p>

and the Corporate Divisional Vice President for signature and approval of any recommendations made to the established staffing plan to include the deployment of video monitoring systems and other monitoring technologies or the allocations of additional resources to maintain compliance to the plan. In interview with MTC's PREA Coordinator, she reported being consulted regarding assessments or adjustments to the staffing plan through incident reviews of substantiated and unsubstantiated allegations and through the Annual PREA Facility Assessments she reviews and approves for each of the agency facilities annually.

13 (d): According to facility policy WCCF Policy 12.004 Wilkinson County Correctional Facility has a policy and practice requiring department heads, facility executive staff and intermediate and higher-level custody supervisors conduct and document unannounced rounds on all shifts within their respective areas to identify and deter employee sexual abuse and sexual harassment. Policy also mandates that other staff are prohibited from telling other staff when supervisors are making unannounced rounds. The review of Institution Duty Officer (IDO) unannounced PREA rounds logs confirmed that intermediate-level or higher-level supervisors, including shift supervisors and department heads, conduct and document such visits throughout the institution, during the day, at night and on the weekends. Additionally, the IDO was interviewed. IDO visits areas of the facility during days, evenings, and weekend. The IDO document the visits on logbooks located in housing unit control room. Staff members are prohibited from alerting other employees regarding unannounced rounds. Interviews with inmates and housing unit officers also confirmed that random, unannounced rounds are conducted by Institution Duty Officers daily, including nights and weekends. The administrative Lt. for each shift was interviewed. Each indicated that they visit each living unit a minimum of once per shift. The control room staff document these visit on the unit log. The auditor reviewed logbooks during the tour and found multiple signs in documentation on each shift. While touring the control room, the control room officers showed her PREA rounds documentation. The facility provided a page on one of the logbooks that documented that a supervisors visited the unit on each shift.

An examination of policy and supporting documentation and all interviews confirms compliance with this standard



115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>WCCF Contract for Service</p> <p>Statement of Fact</p> <p>Wilkinson County Correctional Facility does not house youthful offenders. Compliance was determined by review of Contract for Services, Policy and interviews with Intake staff and facility administrator.</p>

115.15	Limits to cross-gender viewing and searches
	<p data-bbox="293 195 732 226"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="293 258 480 289"><b>Auditor Discussion</b></p> <p data-bbox="293 289 1295 342">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="293 352 781 394">MTC Corporate Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="293 415 667 447">Training Presentation (Pat Down Search)</p> <p data-bbox="293 468 488 499">WCCF Policy 12.004</p> <p data-bbox="293 510 1057 552">Training records- Cross Gender Pat Searches &amp; Searches of Transgender &amp; Intersex</p> <p data-bbox="293 573 456 604">Strip Search Log</p> <p data-bbox="293 625 667 657">Shift Logs- Announced gender presence</p> <p data-bbox="293 678 472 709">Statement of Fact</p> <p data-bbox="293 730 350 762">PAQ</p> <p data-bbox="293 762 1414 1087">115.15 (a): WCCF Policy 12.004 mandates that cross-gender strip or cross-gender body cavity searches are prohibited, except in emergency situations or when performed and documented by a medical practitioner. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. All security staff of the WCCF receive training on how to conduct cross-gender pat searches and searches of transgender and intersex inmates in a professional and respectful manner. training on how to conduct cross-gender pat searches and searches of transgender and intersex inmates in a professional and respectful manner. Staff receive Limits to Cross Gender Viewing &amp; Searches training. The lesson plan of this training was provided for review. Staff sign a PREA Basic Acknowledgement form acknowledging receipt and understand of the training received. Review of random staff training records and in interview with security staff, revealed staff are receiving this training at pre-service and annually. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the inmates of the opposite sex except in exigent circumstances</p> <p data-bbox="293 1087 1406 1203">115.15 (b): The facility does not house female offenders. It may house transgender offenders that are in hormone therapy. Each transgender meets with the Transgender Care Committee and are allowed to provide staff preference for pat down searches.</p> <p data-bbox="293 1203 1438 1318">115.15 (c): Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. The facility also maintains a log of all strip searches. This log indicates date, time, purpose and offender's gender and gender of persons conducting the strip searches.</p> <p data-bbox="293 1318 1446 1581">115.15 (d): Policy WCCF Policy 12.004 and MTC Policy 903E.02 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. The living areas showers have curtains that provides for inmate privacy while showering. Toilet areas have partitions with door to allow inmates to use the restroom without being viewed by staff. The medical area has a wraparound curtain for privacy during examinations. All toilets in the living units have partitions and a wall in front of the toile to provide privacy. All other areas that were reviewed during the tour had partitioned or single toilets with a door to provide privacy. All residents stated they can shower, use the toilet and change clothes without being seen by staff members.</p> <p data-bbox="293 1581 1455 1759">The facility has implemented a policy that all opposite gender staff working the units will announce themselves prior to walking the range to allow inmates the opportunity to prepare themselves from a privacy perspective. Inmates interviewed acknowledged they were allowed to shower, dress and use the toilet without being viewed by staff of the opposite gender. Posting are located throughout the living units that female staff are assigned to work in housing units. The facility maintains a log for staff of the other gender to announce their presence when entering housing units.</p> <p data-bbox="293 1759 1455 1938">115.15 (e): MTC Policy 903E.02 and facility policy 12.004 address searches of transgender and intersex offenders. Facilities shall not search or physically examine a transgender or intersex offender solely to determine their genital status. If the genital status is unknown, it may be determined during private conversation with the individual, by reviewing medical records or by learning this information as part of a broader medical examination conducted in private by a medical practitioner. At the time of the onsite audit, there were no offenders who disclosed being transgender or intersex.</p> <p data-bbox="293 1938 1455 2043">115.15 (f): All staff at WCCF receive training on how to conduct cross-gender pat searches and searches of transgender and intersex offenders in a professional and respectful manner. Staff receive Limits to Cross Gender Viewing &amp; Searches training. The lesson plan of this training was provided for review. Staff sign a PREA Basic Acknowledgement form</p>

acknowledging receipt and understand of the training received. Review of random staff training records and in interview with security staff, revealed staff are receiving this training at pre-service and annually. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the inmates of the opposite sex except in exigent circumstances.

Based on the review of policies and notices regarding the presence of female staff in the units, observation of the showering/dressing areas and interviews with staff and inmates it has been determined that WCCF is in compliance with this standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard:
	MDOC SOP 20-14-01
	WCCF Policy 12.004
	MTC Policy 903E.02 Ensuring Safe Prisons
	MDOC SOP 22-05- 11 Medical Classification
	PREA Training (English/Spanish)
	Offender Handbook (English/Spanish)
	PREA Brochures English/Spanish
	Language Line Solutions
	<p>115.16 (a): MDOC SOP 20-14-01c mandates that the facility shall not discriminate against offenders with known disabilities and shall provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act and the provisions established in this Policy. MDOC has established a procedure to medically classify offenders including ADA target offenders. The intake staff indicated that when an offender arrives at the facility, intake first responsibility is to interview the offender to determine if he meets the ADA targeted population. If they are not certain they notify medical to access the offender before beginning the intake process.</p>
	<p>Through policy and practice, the facility staff ensures that inmates with all disabilities listed in 115.16a have an equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. The facility has TTY machines for hard of hearing offenders and access to sign language contracted staff. At the time of the audit there were no offenders that had any ADA communications that could not be addressed by the facility.</p>
	<p>115.16 (b)(c): All PREA related information (written information), including postings, brochures and handouts are available in English, and Spanish. The facility has access to translation services and written access in other languages. Through Language Line Contact. Staff also may read information to inmates when necessary. Agency and facility policies prohibit offenders to be relied on as readers or any types of assistants, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety. The facility maintains a list of staff that are bilingual.</p>
	<p>Compliance of this standard was confirmed by review of agency policy, contracting services for language interpretation services and interviews with PCM, Case Manager, Medical Administrator and facility Warden.</p>

115.17	<div data-bbox="280 98 1421 163">Hiring and promotion decisions</div> <div data-bbox="280 163 1421 228">Auditor Overall Determination: Meets Standard</div> <div data-bbox="280 228 1421 294">Auditor Discussion</div>
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The following policies, directives and documentation were reviewed in determining compliance with this standard:

MTC Policy 903E.02 Ensuring Safe Prisons

Background Promotion Letter and PREA Promotion Disclosure Waiver

MDOC NCIC Division

Personnel Records

115.17 (a): The Departmental Policy for Background Investigation and Appointment of Certified Officers does not allow hiring or promotions of anyone who has been convicted of sexual abuse in prison/jail or in community. Background checks are done on all employees, contractors and volunteers. Background checks (NICI) are conducted on all new hires. In interviews with the Human Resources any perspective employee or contractor completes and application that includes PREA questions. This is then forwarded to MDOC NCIC division to conduct the background checks and employment history checks. MDOC will notify the human resources that the NCIC and history has been completed that the outcomes of their investigations. At that time the facility is authorized to offer employment to perspective employees.

115.17 (b): Prior to a transfer to the facility or promotions, employees background review is conducted utilizing the MDOC NCIC division and answer the following questions.

1. Have you engaged in sexual abuse in a prison, jail, lock up, community confinement facility, Juvenile facility, or other institution? (Please note that sexual abuse in this setting includes sexual acts with the consent of inmate, detainee, resident etc.).
2. Have you ever 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?
3. Have you ever been civilly or administratively adjudicated 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?

115.17 (c): The agency requires that all applicants and employees who may have contact with offenders have a criminal background check. Criminal background checks for all potential employees are completed through the Mississippi Department of Corrections background. For those considered for promotions or who transfer from another facility, an internal MTC PREA verification and a background check MDOC are completed. If an applicant answers on their application they are a prior institutional employee, information from prior institutional employers shall be requested.

115.17 (d): The facility performs criminal background checks through the MDOC NCIC division before enlisting the services of any contractor or volunteer. The auditor reviewed random contractors background and found all had background checks completed prior to employment.

115.17 (e): A review of random staff and contractor with five years tenure verified that criminal background checks are conducted every five years for all employees and contractors.

115.17 (f): WCCF asks all applicants and employees who have contact with offenders directly about previous sexual misconduct. Applicants are asked these questions on the MTC application. Employees and contractors complete a PREA Disclosure and Authorization Form – Annual Performance Evaluation annually. For consideration for promotions or transfers, employees complete a PREA Disclosure and Authorization Form Promotions as well as a MTC internal PREA verification.

115.17 (g): Employees and contractors have a duty to disclose such misconduct referenced in this standard. Material omissions regarding this type of misconduct would be grounds for termination. The submission of false information by any applicant is grounds for not hiring the applicant.

115.17 (h): Unless prohibited by law, MTC will 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 the individual has applied for work.

Compliance was determined by pre audit documentation, the PAQ, interviews with the human resources director and review of 20 random staff files including new hires, promotions and five year tenure and five contractor files. All required information was noted utilizing the PREA Employee/Contractor worksheet.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Memo of Request for Additional Monitoring</p> <p>Statement of Fact</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons and WCCF Policy 12.004 mandates the company will consider the effect of new or upgraded design, acquisition, expansion, or modification of physical plant or monitoring technology might have on the facility's ability to protect offenders from sexual abuse. Based on statement of fact, there have been no additional modifications or expansions to WCCF during the last audit period. If new facilities are designed or there are modifications to existing facilities, the agency's PREA Coordinator works closely with the project development team to ensure the safety of inmates. The facility has request upgrades to the camera systems by replacing older cameras with new high definition and pivoting cameras. Compliance was determined by review of facility camera coverage and interviews with Agency Head Designee, MTC Group PREA coordinator, facility administrator and Major.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Proper Handling and Collection of Sexual Assault Evidence</p> <p>Management and Training Corporation (MTC) Policy 903E.02 Ensuring Safe Prisons</p> <p>MOU MCASA</p> <p>Conversation with MCASA on 5/31/2022 Melanie K. Barton</p> <p>Corrective Action Plan 115. 21</p> <p>Corrective Action Plan Inmate Sexual Assault Advocacy WCCF Form 2022</p> <p>115.21 (a): WCCF is responsible for conducting administrative sexual abuse investigations and MDOC CID has authority and responsibility to conduct criminal investigations.</p> <p>115.21 (b): The agency and the facility follow a protocol developmentally appropriate for youth where applicable and adapted from or otherwise based on the U.S. Department of Justice's office on Violence Against Women Publication,</p> <p>115.21 (c): The facility uses Field Health System Hospital to conduct SANE or SAFE. The Warden has issued a memo for the audit to document. Field Health System Hospital has been trained in the proper collection, handling and documenting of evidence in the event of PREA (using the State of Mississippi Crime Laboratory Sexual Assault Evidence Collection Kit) of any inmate at Wilkinson County Correctional Facility. In information reported on the Pre-Audit Questionnaire, in the last 12 months there were 5 SANE exams performed during the last 12 months. During the last 12 months the Victim Advocate was not contacted prior to the victim being taken to the hospital and the facility did not provide a trained advocate for this requirement. A corrective action plan was required. The facility has issued a memorandum and check list that requires a victim advocate be present prior to a SANE evaluation The MCASA Executive Director will be providing training with staff at Wilkinson in establishing a SART program to includes staff trained to provided victim advocacy services on June 12, 2022. In the meantime the facility will call the advocate and if she is not available will utilize a staff trained by Indiana Department of Corrections as a Victim Advocate. The facility will notify the DOC CID and MDOC PREA Coordinator when a resident is transported for a SANE</p> <p>115.21 (d): WCCFF has a MOU with MCASA. for victim advocate service. Inmates are made aware of the confidential emotional support services available to them and how to access them in the Inmate Handbook and on PREA posters displayed throughout the facility in both English and Spanish.</p> <p>115.21 (e): The terms of the require an advocate to accompany and support the victim through the forensic medical exam process and the investigatory process and provide additional emotional support services.</p> <p>15.21 (f): Based on statement of fact by WCCF facility administrator, the center has conducted all investigations in the last 12 months. However, the center would send emails, make phone calls a least weekly to determine outcome of the investigation.</p> <p>Compliance of this standard were confirmed by review of the Corrective Action Plan, policies, MOUs, Statement of Fact, PAQ, investigative files.</p>



115.22	Policies to ensure referrals of allegations for investigations
	<p data-bbox="300 195 738 226"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="300 258 487 289"><b>Auditor Discussion</b></p> <p data-bbox="300 342 1299 394">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="300 405 771 447">MDOC Policy 20-14-01 Prison Rape Elimination Act</p> <p data-bbox="300 468 495 499">WCCF Policy 12.004</p> <p data-bbox="300 510 1055 552">Management and Training Corporation (MTC) Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="300 562 1144 604">MDOC Policy 12.05 Criteria for Corrections Division of Investigation to Conduct Investigations</p> <p data-bbox="300 625 511 657">Corrective Action Plan</p> <p data-bbox="300 667 982 709">Corrective Action Plan Inmate Sexual Assault Advocacy WCCF Form 2022</p> <p data-bbox="300 720 722 762">Plan of Action 115.22 (Corrective Action Plan)</p> <p data-bbox="300 783 479 814">Plan of Action 115</p> <p data-bbox="300 825 625 867">PREA allegation review 115.22 (2)</p> <p data-bbox="300 877 730 919">PREA Memo CID (002) Corrective Action Plan</p> <p data-bbox="300 909 1437 1245">115.22 (a): WCCF conducts sexual abuse allegations and sexual harassment investigations that are not criminal in nature. The Mississippi Department of Corrections Investigative Division (CID) investigate all criminal investigations. Facility staff is required to preserve the crime scene until the investigator arrives to process and collect the evidence. Facility investigators and the CID staff are trained in conducting sexual assault investigations in confined settings/prisons. The CID staff are law enforcement staff. A review of documentation and staff interviews confirmed compliance with this standard. A review of training documents confirmed that all investigators received instruction in conducting sexual assault investigations in confined spaces/prisons. Interviews with staff, as well as an examination of policy/supporting documentation, confirm compliance with this standard. A review of training documents confirmed that all investigators received training in conducting sexual assault investigations in confined spaces/prisons. Interviews with staff as well as an examination of supporting documentation, confirm the facility's compliance with this standard.</p> <p data-bbox="300 1234 1453 1665">115.22 (b): Based on Policies all allegations of sexual abuse or sexual harassment that appear to be criminal be referred for investigation to an agency that has the legal authority to conduct criminal investigations. Based on practice there were five (5) residents claimed to have been sexually assaulted and went out for a SANE The facility investigator completed an administrative investigation. Based on the investigative reports and interviews with one of the offenders, the allegation was criminal in nature and should have been referred to CID for investigations. The facility has forwarded all allegation during the last 12 months and the DOC director is having all investigation reviewed and will determine the investigations that required criminal investigations and will assign an investigator to conduct the investigations. The facility will notify the DOC investigators and the PREA coordinator for MDOC when an offender makes allegation that includes sexual abuse and will request an investigation. Prior to going to SANE evaluation, the CID will advise the facility to secure the areas and offenders and a CID staff will be sent to the facility to conduct gather the evidence and conduct the investigation. IF the CID request the facility to conduct the investigation, the investigation will be sent to the Chief of the CID and the PREA coordinator. A review of the corrective action plan and interview with the MDOC PREA coordinator confirmed the facility has developed a plan for any future allegation that appear to be criminal.</p> <p data-bbox="300 1654 1388 1780">The agency policy regarding the administrative investigation of allegations of sexual abuse or sexual harassment and referrals for criminal investigations is published on the agency website and can be accessed at <a href="http://www.mtctrain.com/PREA">http://www.mtctrain.com/PREA</a>.</p> <p data-bbox="300 1770 1404 1864">115.22 (c): Information published on the MTC website describes the responsibilities of the agency and the investigating agency in the investigation of allegations of sexual abuse and sexual harassment.</p> <p data-bbox="300 1854 1404 1980">Compliance was determined by review of investigations, policy, statement of fact, MTC website. Final compliance was determined by review of the corrective action plans, interviews with the warden and the MTC coordinator and MDOC coordinator.</p>

115.31	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>PREA Basic Training Acknowledgment (Pre-Service &amp; In-Service)</p> <p>Cross Gender Pat Searches &amp; Searches of Transgender &amp; Intersex (Pre-Service &amp; In-Service)</p> <p>Acknowledgment of Receipt of Training &amp; Brochures (Pre-Service &amp; In-Service)</p> <p>Staff training Rosters</p> <p>MTC Policy 901 .02 Staff Training</p> <p>Annual In-Service Training Record</p> <p>115.31 (a): All staff are provided training that includes all areas of PREA training and protocol for sexual abuse prevention, intervention, reporting, and protecting the inmates and preserving the possible crime scene. The facility receives training developed for MTC and includes films, power point presentations, and lectures.</p> <p>Training includes:</p> <ul style="list-style-type: none"> <li>▪ Zero-tolerance policy for sexual abuse and sexual harassment</li> <li>▪ How to fulfill staff responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.</li> <li>▪ Inmates' right to be free from sexual abuse and sexual harassment.</li> <li>▪ Inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.</li> <li>▪ Dynamics of sexual abuse and sexual harassment in confinement.</li> <li>▪ Common reactions of sexual abuse and sexual harassment victims.</li> <li>▪ How to detect and respond to signs of threatened and actual sexual abuse.</li> <li>▪ How to avoid inappropriate relationships with inmates.</li> <li>▪ How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates.</li> <li>▪ How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</li> <li>▪ How to conduct cross gender pat searches:</li> </ul> <p>Newly hired employees receive training relative to PREA standards during their initial training in a classroom setting. The facility conducts training on a quarterly. The training is conducted in classroom and computer-based training.</p> <p>115.31 (b): WCCF Policy 12.004 recognizes that the facility houses male offenders. Policy mandates that the facility will be required to modify training to meet needs of a different population. Staff assigned to specialized Post such as transportation officers, supervisors, and investigators receive additional training.</p> <p>115.31 (c): According to the computer data base for training, all staff have received training in the last 12 months. Staff interviewed indicated they had received additional refresher training during the last six months. At WCCF staff received annual in-service training. According to the PAQ there all staff that received initial or annual training in the last 12 months. Between trainings, the facility shifts briefings and staff meetings, and employees receive emails regarding PREA updates and information. Third Party Reporting Posters are displayed in various locations throughout the facility.</p> <p>115.31 (d): Upon completion of PREA pre-service and annual in-service training, staff sign a an ADOC Acknowledgement of Receipt of Training and Brochures Sexual Assault Prevention form and a Preservice Training Record and an In-service Training Record form acknowledging receipt and understanding of all training received, including PREA. They also sign a</p>

PREA Basic Acknowledgment Training form upon completion of general PREA training and a Cross Gender Pat Searches & Searches of Transgender and Intersex acknowledgment form. Documentation of annual PREA training for employees is maintained recorded on individual training records maintained by the Training Coordinator.

A review of the training curriculum, training sign-in sheets and other related documentation, as well as staff interviews, confirmed staff are required to acknowledge, in writing, not only that they received PREA training, but that they understood it. A review of documentation and staff interviews confirmed that the facility is compliant with this standard. The auditor reviewed 20 staff training records including the facility administrator, PCM, shift supervisor, investigator, medical and random staff.

<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Volunteer Training</p> <p>Documentation of Volunteer Training</p> <p>Contractor Training Curriculum</p> <p>Acknowledgment of Receipt of Training and Brochures</p> <p>MTC Policy 901 .02 Staff Training</p> <p>115.32 (a): MTC Policy 901 .02 Staff Training mandates 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. The facility trained 20 contractors during the last 12 months. There were 5 volunteers trained in the last 12 months.</p> <p>115.32 (b)(c): All contractors receive the same PREA training as employees prior to assignment and sign a PREA Basic Acknowledgement Form and an Acknowledgement of Receipt of Training and Brochures Sexual Assault Prevention form.</p> <p>The volunteer training curriculum was provided for review. The training included 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. Volunteers receive this training annually and sign a Documentation of Volunteer Training Form. Volunteer training is maintained in the volunteer files, while contractor documentation of training is maintained by the training coordinator.</p> <p>Compliance with this standard was determined through review of procedure, WCCF PREA lesson plan, contractor and volunteer information, signed PREA acknowledgements and interviews</p>

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC SOP 20-14-01</p> <p>WCCF Policy 12.004</p> <p>Offender Handbook</p> <p>Receipt of training for new arrivals</p> <p>Receipt of training for transfers</p> <p>Offender PREA Brochure</p> <p>Facility PREA Postings</p> <p>Offender Receipt of PREA Brochure</p> <p>Offender Receipt of PREA Comprehensive Education</p> <p>Offender Orientation PowerPoint</p> <p>20 offender files reviewed</p> <p>115.33 (a): WCCF Policy 12.004 mandates all offenders receive information at time of intake and if transferred from another facility about the zero-tolerance policy and how to report incidents of sexual abuse or sexual harassment, their rights to be free from retaliation for reporting such incidents and are informed of the agency/facility policies and procedures for responding to such incidents. In interview with intake staff, on the day of arrival, offenders receive an Offender Handbook, and a Sexual Assault Prevention and Reporting Offender/Student Information Brochure and sign a Receipt for Offender Handbook. This was observed by the audit during the intake of an offender. Also, during the intake offenders were watching a PREA video that included the same information.</p> <p>115.33 (b): Offenders receive comprehensive PREA education as part of the orientation process usually on the day of their arrival, however by policy at a minimum within the first seven days of arrival to the facility. Offenders in Prison Rape Elimination Act (PREA) Offender Education Program acknowledgement form acknowledging receipt of PREA education. The curriculum provided to offenders was provided for review.</p> <p>115.33 (c): The intake staff and PREA compliance manager stated that all offenders have received the training usually within 2 hours of arriving. According to the PAQ 727 offenders received the information at intake and 727 received the comprehensive PREA training.</p> <p>115.33 (d): All PREA education provided to inmates is in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled or have limited reading skills. The Offender Handbook, the PREA brochure and all verbal information given is provided in both English and Spanish. A contract for ESL detainees to provide translation of any other languages. The facility has a TTY for deaf or hard of hearing inmates.</p> <p>115.33 (e): The facility maintains documentation of offenders' participation in PREA education. In review of 20 random offender files, were complete with proper documentation of receipt of written PREA education material.</p> <p>115.33 (f): Throughout the facility were posters including Sexual Assault Prevention and Reporting Posters; MTC Zero Tolerance Posters, End the Silence Posters. and Victim Advocacy Services. These posters were informative and included telephone numbers and addresses. Also Notice of Audit was posted throughout the facility. .</p> <p>Based on review of the training curriculum, interviews with residents and staff it was determined that the facility meet the standards for training offenders.</p>

115.34	<b>Specialized training: Investigations</b>
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>WCCF Policy 12.004</p> <p>Investigative Training Curriculum</p> <p>Specialized Training Certificates</p> <p>Training Rosters</p> <p>Statement of Fact</p> <p>115.34 (a): MTC Policy 903E.02 Ensuring Safe Prisons mandates that in addition to the general training provided to all employees pursuant to §115.31, the agency ensure that, to the extent the agency itself conducts or assist in conducting investigation they will have been trained to conduct sexual abuse investigation in a correction setting.</p> <p>115.34 (b): The facility Investigators have completed investigating sexual abuse in a confinement setting and additional online training on investigating sexual abuse. Training includes Investigating Sexual Abuse through MTC training staff. The training curriculum was reviewed and included interviewing sexual abuse victims, proper use of the 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.</p> <p>115.34 (d): The facility has two trained investigators. The agency maintains documentation that investigators have received specialized training on conducting sexual abuse investigations in confinement settings. Upon completion of the training, investigators receive a certificate of completion. In review of investigators' training files, investigators have completed this specialized training, as well as general training provided to all employees and documentation is maintained by the facility. In interview of the facility investigators, they confirmed receiving specialized training and general PREA education provided to all employees and were able to confirm the topics included in the specialized training they received. At WCCF OIG conducts all investigations. However, they rely on the facility to conduct administrative investigation regarding determining whether staff actions or failures to act contributed to the abuse.</p> <p>Compliance was determined by review of the training curriculum, investigator training records, investigators certificate of completion, investigative reports, and interviews with PREA Coordinator, Agency Head, investigators, and facility administrator.</p>

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Vital Core Training Curriculum</p> <p>Certificates of Completion of PREA Specialized Training</p> <p>Signed PREA training acknowledgements\</p> <p>PREA Training Certification</p> <p>Mandatory Pre-Service PREA Questions- Nurse</p> <p>Acknowledgment of Receipt of Training &amp; Brochures- Nurse</p> <p>SOF</p> <p>115.35 (a): The medical staff at WCCF received the generalized training and specialized training through Vital Core the contracting medical and mental health provider at the institution. The training curriculum includes how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, how and to whom to report allegations or suspicions of sexual abuse and sexual harassment as well of many other medical and mental health topics such as clinical interventions, and local policies.</p> <p>115.35 (b): The medical and mental health staff do not conduct forensic examinations.</p> <p>115.35 (c): Staff received a certification on completion for specialized training. They sign an acknowledge to training for the generalized PREA training. Both documents were provided in the pre audit documentation and verified through interviews with contracting nurse.</p> <p>115.35 (d): All medical staff assigned to the facility attend the same training as required mandated for employees by §115.31. They sign and acknowledge statement that they received this training. In addition to this training the staff that are assigned to the facility through a contractor received specialized training.</p> <p>Compliance was determined by review of the training curriculums, copy of certificates and acknowledgement statement and interviews with the nurse and mental health staff.</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Screening Instrument</p> <p>Offender Files Reviews</p> <p>Risk Screening Instrument to Keep Offenders Safe</p> <p>Completed SRI Questionnaire</p> <p>115.41 (a): The policies indicate all inmates shall be assessed at intake and upon transfer for their risk of being sexually abused by another individual or being sexually abusive towards another individual housed at the facility. This screening takes place within 72 hours of arrival at the facility utilizing an objective screening instrument. The facility conducts initial and reassessments utilizing the Sexual Risk Indicators (SRI) which is an objective and standardized screening instrument by a trained Classification staff member. On information provided on the PAQ, in the past 12 months, 727 inmates that entered the facility were assessed for their risk of victimization or abusiveness upon arrival. Random sampling of inmate files and inmate interviews confirm inmates were typically screened within 24 hours of arrival.</p> <p>115.41 (b): Intake screening takes place within 24 hours of offenders' arrival to the facility. The process that is utilized includes part of the initial intake. Once the offender is searched, they receive PREA pamphlets and handbook. During that time the case manager or staff assigned to conduct the screening review the offenders file and meets with the offenders. During this meeting staff introduce PREA to the offender and explains the purpose of the screening with the residents. The offender is then asked to sign to acknowledge they have received the screening. If the offender has past history of victimization or predator behavior the screening staff completes a referral that is sent to the medical staff to refer to the mental health staff to set up an interview with the offender. Medical and mental health staff are available during the screening process conducting a medical review and suicide screening. All screenings are referral to mental health staff for follow up if the inmate claims history of sexual victimization, history of predator sexual actions or if inmate self admits to being transgender</p> <p>115.41 (c): The Risk Screening Instrument (RSI) is an objective and standardized screening instrument that is conducted by a trained Classification staff member.</p> <p>115.41 (d)(e): The screening includes the screener's thorough review of any available records available to assist with determining the detainee's risk assessment. The Intake Sexual Violence Assessment Tool was reviewed.</p> <p>It contains:</p> <ul style="list-style-type: none"> <li>• Whether the inmate has a mental, physical, or developmental disability?</li> <li>• The age of the inmate?</li> <li>• The physical build of the inmate?</li> <li>• Whether the inmate has previously been incarcerated?</li> <li>• Whether the inmates' criminal history is exclusively nonviolent?</li> <li>• Whether the inmate has prior convictions for sex offenses against an adult or child?</li> <li>• Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming?</li> <li>• Whether the inmate has previously experienced sexual victimization?</li> <li>• The inmate's own perception of vulnerability?</li> <li>• Perpetrators of sexual abuse during incarceration?</li> <li>• Prior conviction of violent offenses?</li> <li>• History of Assaultive Conduct in DOC in the past 5 years?</li> </ul>



- Whether the inmate is detained solely for civil immigration purposes

115.41 (f): Within a set time period, not to exceed 30 days of offenders' arrival to the facility, offenders are reassessed by their assigned Case Manager for their risk for victimization and abusiveness using the Follow-up, Annual & Reassessment Sexual Violence Assessment Tool.

115.41 (g): An offender's risk level will also be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information. Annually during annual classification review assessments, offenders are reassessed for risk of victimization or abusiveness using the Annual & Reassessment Sexual Violence Assessment Tool. Transgender detainees are reassessed a minimum of every six months.

115.41 (h): Policy mandates that offenders are not be disciplined for refusing to answer any questions or for not disclosing complete information. Interviews with screening staff confirmed they would not discipline or coerce an offender to answer Screening questions.

115.41 (i): WCCF implemented appropriate controls on dissemination of responses to questions asked related to sexual victimization or abusiveness in order to ensure sensitive information is not exploited by employees or other individuals. Sensitive information is limited to need-to-know employees only for the purpose of treatment, programming, housing and security and management decisions.

All detainees are screened when the transfer into the facility including detainees that leave the facility for court appearance or other administrative transfer from the facility.

Compliance was determined by interview with Case Managers and the PREA Compliance Manager and in review of random offender records the screening process is in place. In interview with offenders, they confirmed they were screened upon arrival to the facility and remembered being asked PREA questions again by their Case Manager or the PREA compliance manager.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard:
	MDOC Policy 20-14-01 Prison Rape Elimination Act
	Risk Screening Instrument
	At Risk Log
	Transgender preference log
	<p>115.42 (a): Procedures state screening information shall be used to determine housing, bed, work, education, and programming assignments within the Facility in order to keep potential victims away from potential abusers. The computerized management system will initiate a code for identified predator, potential predator, high aggression risk, moderate aggression risk, identified prey, potential prey, high victimization risk, moderate victimization risk. All bed assignments made at BRCRF are processed through the CDC (Classification Data Center) that is part of the IBAS system. It utilizes all inmate data from the SRI and will not allow the double bunked cell assignment of: a victim and abuser, inmates with significant age differences and inmates with size differences. Should someone try and move an inmate when these differences are noted, the computer will not allow the cell change.</p>
	<p>115.42 (b): Individualized determinations are made about how to ensure the safety of each offender. Offenders who score at risk of victimization or abusiveness are referred for further evaluation with the Mental Health provider. Offenders have an option of refusing these services.</p>
	<p>115.42 (c): Policy and practice mandates that making housing and programming assignments for transgender or intersex offenders, the facility will consider on a case-by-case basis whether the placement would present management or security problems. Offenders who self-disclose being gay, bisexual, transgender or intersex are tracked on at risk log that is maintained by the PREA Compliance Manager</p>
	<p>115.42 (d) – (f) A transgender or intersex offender's housing and program assignments will be reassessed every six months to review any threats to safety experienced by the offender. Transgender and intersex offenders' placement and programming are reviewed as needed, but at least every six months. A transgender or intersex offenders' own views of their safety is taken into consideration. When the TCC meets with transgender or intersex offenders meet with the TCC they are given an opportunity to express their views.</p>
	<p>Transgender and intersex offenders are offered the opportunity to shower separately from other offenders as indicated in their Statement of Search/Shower/Pronoun Preference Form .</p>
	<p>WCCF does not place lesbian, gay, bisexual, transgender or intersex offenders in dedicated units or wings solely based on such identification. In interview with the one offender who self-disclosed being gay, he did not feel he was housed any differently because of his sexual orientation.</p>
	<p>Detainees that claim prior victimization or prior sexual predator behavior. Each was referred to the mental health staff.</p>
	<p>During the onsite audit 5 gay detainees, and 4 detainees that claim victimization were interviewed. All detainees interviewed indicated on the first day of arrival they were seen by Mental Health or PREA compliance manager. At the time of the audit the facility did not house transgender or intersex detainees</p>
	<p>Compliance was determined by review of policy, forms, the at-risk log, and interviews with the PREA coordinator, PREA compliance manager, agency head, and facility administrator.</p>

<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC Policy 20-14-01 Prison Rape Elimination Act</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>WCCF Policy 12.004</p> <p>Statement of Fact</p> <p>PAQ</p> <p>115.43 (a): The facility does not place offenders at high risk for victimization in involuntary segregated housing unless an assessment of all available alternatives have been made and a determination has been made that there is no available alternative. Based on the PAQ and Statement of Fact, not detainee has been housed in segregation due to detainee being at high risk of being sexually victimized.</p> <p>115.43 (b): Offenders placed in segregated housing for this purpose have access to programs, privileges, education and work opportunities to the extent possible. The facility will document and justify any restrictions imposed.</p> <p>115.43 (c): The facility will assign such offenders to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, not to exceed a period of 30 days.</p> <p>115.43 (d): If involuntary segregated housing assignment is made, the facility will document the basis for the facility's concern for the offender's safety and the reason no alternate means of separation can be arranged.</p> <p>115.43 (e): In cases where involuntary segregated housing is used for longer than the initial 30 days, the facility will review the status every 30 days to determine if ongoing involuntary housing is needed.</p> <p>According to information provided on the Pre-Audit Questionnaire and in interview with the Facility Administrator and security staff who supervise offenders in RHU, in the past 12 months there has not been a time that an offender found at high risk of victimization or an offender who alleged sexual abuse was placed in involuntary segregated housing.</p> <p>Compliance with this standard was determined through review of procedures, observation during tour and interviews.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

MDOC Policy 20-14-01 Prison Rape Elimination Act

MTC Policy 903E.02 Ensuring Safe Prisons

WCCF Policy 12.004

Offender Handbook

PREA Brochure English/Spanish

PREA Posters

PREA Reporting Hotline report

MTC Memo To Staff

Documentation of Verbal Reports.

115.51 (a): FDC policy mandate that facilities provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, provides multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents. Policies also mandate that a private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials and that the private entity or office allow the inmate to remain anonymous upon request. Offenders are informed in the Offender Handbook and on poster located throughout the facility and by almost all inmate telephones.

The handbook and PREA Posters specifically provide the following ways for offender to report:

Report to any staff

Write Directly to PREA Compliance Manager

File a grievance

Call MDOC speed dial 1 the \*9999#

CALL MTC \*66#

Victim Advocate Information call 1-601-359-5600

Third Party (friends/family)

Offender interviewed new of the multiple way to report. Most stated they would tell a staff member the trusted.

The auditor called the speed dial numbers several times during the tour. Each telephone call was completed in a timely manner and appropriate staff answered the calls and were ready to take the report. The Victim Advocate phone was answered by the PREA coordinator for MCASA.

115.51 (b): The facility also provides multiple external ways for offenders to report allegations to a public or private agency that is not part of MTC. Offenders are informed on posted information they can dial TIPS or Investigators.

115.51 (c): Staff interviewed were aware of the requirement to accept reports made verbally, anonymously and from third parties. All staff interviewed indicated they would document verbal reports immediately and notify the shift supervisor by phone or in person.

115.51 (d): Staff have access to private reporting by calling the MTC Coordinator. Employee Handbook informs employees of their responsibility of reporting sexual abuse and sexual harassment and their reporting options. Staff carry with them a Sexual Abuse First Responder Card, which has the employee hotline number and the website address for anonymous reporting. Staff interviewed knew how to privately report sexual abuse and sexual harassment of offenders.

Compliance was determined by testing the telephone system, reviewing policies and procedure, posters, and the resident handbook. Compliance was also determined by interviews with residents, staff, shift supervisors, PCM, and facility administrator.

115.52	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC Policy 20-14-01 Prison Rape Elimination Act</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>MTC Policy 903E.03 Offender Grievance Procedure</p> <p>Email Reference Grievances</p> <p>WCCF Policy 12.004</p> <p>Offender Handbook</p> <p>PREA Posters</p> <p>115.52 (a) MDOC Policy 20-14-01 Prison Rape Elimination Act and MTC Policy 903E.03 Offender Grievance Procedure provides a procedure in place for offenders to submit grievances regarding sexual abuse and the agency has procedures for dealing with these grievances. Poster located throughout the facility advise resident that they may file a grievance. The resident handbook explains the process for filing a grievance. Any grievance that alleges sexual abuse, sexual harassment, retaliation for reporting an allegation or for cooperating in an investigation will be immediately forwarded to the facility investigators and warden.</p> <p>115.52 (b): There is no time limit when an offender can submit a grievance regarding sexual abuse. MTC does not impose a time limit to any portion of a grievance that does not allege an incident of sexual abuse. Offenders are not required to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse. Agency policy does not restrict MTC's ability to defend against a lawsuit filed by an inmate on the ground that the applicable statute of limitations has expired. The PREA Compliance Manager receives all copies of grievances related to sexual abuse or sexual harassment for monitoring purposes. In interview with the PREA Compliance Manager and information provided on the Pre-Audit Questionnaire, in the past 12 months there were no PREA related grievances filed.</p> <p>115.52 (c): Policy provides that offenders have a right to submit grievances alleging sexual abuse to someone other than the staff member who is the subject of the complaint and the grievance will not be referred to the subject of the complaint. If a third-party files a grievance on an inmate's behalf, the alleged victim must agree to have the grievance filed on his behalf.</p> <p>115.52 (d): A final decision shall be issued on the merits of any portion of the grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by individuals in the facility in preparing any administrative appeal.</p> <p>115.52 (e): Third parties such as fellow offenders, family members, attorneys or outside advocates may assist offenders in filing requests for administrative remedies relating to allegations of sexual abuse and may file on behalf of offenders. The alleged victim must agree to have the request filed on his or her behalf; however, he/she is not required to personally pursue any subsequent steps in the administrative remedy process. If the offender declines to have the request processed on his or her behalf, the agency shall document the offender's decision. In interview with the PREA Compliance Manager and on information provided in the Pre-Audit Questionnaire, in the past 12 months, there were no grievances filed by a third party.</p> <p>115.52 (f): Policy provides offenders may file an emergency grievance if he/she is subject to substantial risk of imminent sexual abuse. After receiving an emergency grievance of this nature, the facility administrator or designee will ensure that immediate corrective action is taken to protect the alleged victim. An initial response to the emergency grievance to the individual is required within 48 hours and a final decision will be provided within five calendar days. In interview with the PREA Compliance Manager and on information provided on the Pre-Audit Questionnaire, in the past 12 months, there were no emergency grievances alleging sexual abuse filed.</p> <p>115.52 (g): An offender can be disciplined for filing a grievance related to alleged sexual abuse if it is determined that the inmate filed the grievance in bad faith. There were no detainees disciplined for filing a grievance in bad faith.</p> <p>Compliance was determined by review of the policies, grievance, and by interviews with MTC PREA coordinator, PREA compliance managers, and facility administrator.</p>

115.53	Inmate access to outside confidential support services
	<p data-bbox="302 184 740 218"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="302 247 488 275"><b>Auditor Discussion</b></p> <p data-bbox="302 281 1300 331">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="302 352 691 380">Acknowledgement of Receipt of Orientation</p> <p data-bbox="302 407 553 434">Residents PREA Handbook</p> <p data-bbox="302 457 691 485">Acknowledgement of Receipt of Handbook</p> <p data-bbox="302 506 773 539">MDOC Policy 20-14-01 Prison Rape Elimination Act</p> <p data-bbox="302 560 699 590">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="302 617 496 644">WCCF Policy 12.004</p> <p data-bbox="302 667 488 695">Offender Handbook</p> <p data-bbox="302 716 805 743">MOU with Mississippi coalitions against sexual assaults</p> <p data-bbox="302 770 626 798">Interviews with MCASA coordinator</p> <p data-bbox="302 819 797 854">Victim Advocacy PREA posters (English and Spanish)</p> <p data-bbox="302 854 1414 1058">115.53 (a): MDOC Policy 20-14-01 Prison Rape Elimination Act addresses the agency/facility's policies on providing offenders with access to outside victim advocates for emotional support services related to sexual abuse. The facility enables reasonable communication between the offenders and these agencies in a confidential manner. The offenders are informed by the facility and according to interviews with the emotional support staff of the extent to which communications will be monitored. According to the PREA compliance manager the facility would monitor only to the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.</p> <p data-bbox="302 1058 1430 1169">115.53 (b): Residents PREA Handbook provides a phone number and address of the speed dial number and address of the Lakeview Center in the detainee handbook and poster located throughout the facility. The auditor called the speed dial number and spoke with a counselor with the Lakeview Center.</p> <p data-bbox="302 1169 1422 1289">115.253 (c): The facility has a MOU with MCASA to provide emotional support. The center indicated that offenders that call or write their office are provided with emotional support during the call and the center would work with the facility to set up a time for a victim emotional support staff member to visit with the offender or talked to the offender in a private office.</p> <p data-bbox="302 1289 1414 1373">Compliance was determined by review of handbook, poster located throughout the center and interviews with the MCASA coordinator</p>

115.54	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Management and Training Corporation Policy 903E.02 Ensuring Safe Prisons</p> <p>MTC PREA Website</p> <p>MDOC website</p> <p>Poster – Information on the PREA compliance manager and warden.</p> <p>Third Party reporting posters</p> <p>115.54 (a): Reporting Posters are visible in the visitation room, lobby and is found in the inmate handbook. MTC provides Reporting system on MTC Website <a href="http://www.MTCgroup.com/PREA">http://www.MTCgroup.com/PREA</a> (Social Responsibility-PREA Certification Section) provides. Posters on display at the facility provide the visitors, staff and inmates with third party reporting options. Inmates can accomplish third-party reporting by having a friend or family member call the PREA hotline, notify the PCM or Warden, or notify MDOC PREA Coordinator (MDOC Hotline) Interviews with inmates demonstrated they knew how third-party reporting could be accomplished.</p> <p>Family and friends can contact the facility administrator or PREA compliance managers or file a grievance on behalf of the offenders. This information is posted in areas visible to staff and visitor Poster include anyone needed to report abuse/ sexual harassment or to report an allegation of Sexual Abuse/ Sexual Harassment on behalf of an individual who is or was housed in any MTC facility or program, may contact the Facility Administrator's Office in the facility where the alleged incident occurred or where the individual is housed.</p> <p>Compliance was determined by review of the postings, reviewing the websites and interviews with PREA coordinator, PREA compliance manager of facility administrator.</p>



115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Management and Training Corporation (MTC) Policy 903E.02 Ensuring Safe Prisons</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01 Prison Rape Elimination Act</p> <p>Staff training</p> <p>Specialized medical training.</p> <p>Mandatory reporting Survey of Vulnerable Persons</p> <p>PREA Lesson Plan</p> <p>Statement of Fact</p> <p>Staff Report</p> <p>Updated facility will report allegations of sexual abuse to MDOC CID and PREA coordinator</p> <p>115.61 (a): MDOC Policy 20-14-01 and GEO Policy 903 E.02 mandates staff, volunteers and contractors must take all allegations of sexual abuse and sexual harassment seriously and are required to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment and any retaliation against offenders or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This information is to be reported the Shift Supervisor, the PREA Compliance Manager, or facility executive staff. In interview with random staff, volunteer, and contractors, they knew their reporting duties. Staff receive training on reporting. MTC and MDOC have implemented a specialized training program for medical and mental health professionals that includes duties to report, State's vulnerable persons reporting duties and confidential reporting duties. The facility provided a statement of fact that there have been no allegations by vulnerable persons in the last 12 months.</p> <p>115.61 (b): Policy and training mandates that apart from reporting to designated supervisors, staff are not to reveal any information related to a sexual abuse report to anyone. Staff, volunteers and contractors interviewed knew this information is to be kept confidential and knew whom to report allegations.</p> <p>115.61 (c)(d): Medical specialized medical training includes medical staff are required to report sexual abuse and to inform offenders of their duty to report and the limitations of confidentiality at the initiation of services. The training also provides reporting of a vulnerable adult under a State or local vulnerable persons statute, under applicable mandatory reporting laws. The facility does not house offenders under the age of 18. Medical and mental health staff interviewed confirmed this practice. The Nurse indicated that the offenders sign a statement that includes her limitation of confidentiality.</p> <p>115.61 (e): In interview with the facility administrator and his executive team, the WCCF reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports to the facility investigators, MTC PREA coordinator or regional supervisor. Following a corrective plan the facility will now also notify the DOC CID and MDOC PREA coordinator. There are staff reporting posters located facility. Staff carry a PREA card with this information for easy reference in making reports.</p> <p>According to statement of fact there have been no reports from third parties, contractors or volunteers in the last 12 months. Compliance was determined by review of the policies, training curriculum and interviews with random staff, medical staff, and facility administrator. Interviews with the Agency PREA coordinator and agency head confirmed that MTC mandates staff, volunteers, and contracts report all sections of this standard.</p>

115.62	<b>Agency protection duties</b>
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p>
	MDOC Policy 20-14-01 Prison Rape Elimination Act
	MTC Policy 903E.02 Ensuring Safe Prisons
	MDOC PREA lesson plan
	Statement of Fact
	<p>115.62 (a): WCCF Policy 12.004 mandates when the facility learns that an offender is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the alleged victim. All allegations of sexual abuse are to be handled in a confidential manner and conversations with the victim sensitive, supportive, and nonjudgmental.</p>
	<p>The PAQ indicated in the past 12 months there were no times it was necessary for the facility to take immediate action regarding an offender being in substantial risk of sexual abuse. The facility administrator stated that if it was suspected an offender was at substantial risk of sexual abuse, he would immediately move the offender and investigate. Staff interviewed was aware of their responsibilities if they felt an offender was at risk for sexual abuse. Random staff and shift supervisor indicated the offender that was in imminent danger would be separated from the accuser and would be moved to the observation room in medical and placed on one on one status until it could be investigated and determine if the offender can be placed in another dormitory, if the staff needed to be placed on administrative leave, if the predator needed to be moved off the campus or if the victim needed to be moved pending the investigation. The facility administrator indicted this decision would be made in concert with DOC. There has been no incident when an offender was r moved to another facility.</p>
	<p>Compliance was determined by review of policy and interviews with the MTC agency head, PREA coordinator, facility administrator, random staff, and RHU Lt.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01 Prison Rape Elimination Act</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Statement of Fact</p> <p>PAQ</p> <p>115.63 (a)-(c): MDOC Policy 20-14-01 mandates on receiving an allegation that an offender was sexually abused while confined at another facility, the incident will be reported to the PREA Compliance Manager. The Facility administrator will notify the agency or facility head where the abuse is alleged to have occurred. but no later than 72 hours of receiving the allegation. The PREA Compliance Manager will maintain documentation that notification was made and include all actions taken regarding the incident. Copies of this documentation will be forwarded to the MDOC CID and PREA offices and MTC PREA Coordinator.</p> <p>115.63 (d): Interview with the facility administrator and PREA compliance manager they indicated along with notification to the sending facility director the facility administrator will MDOC investigative division and will document notification of an allegation of sexual abuse or sexual harassment and offer to provide whatever services needed by the facility investigator during the investigative process.</p> <p>According to the PAQ and statement of fact there have been no allegations of offender being sexually abused while confined at another facility and no allegations that a offender was sexually abused at WFFC.</p> <p>Compliance was determined by review of the policy and interviews with intake staff, PREA compliance manager, agency head, PREA coordinator and facility administrator.</p>

115.64	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC Policy 20-14-01</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>WCCF Policy 12.004</p> <p>PREA First Responder Card</p> <p>Staff Training</p> <p>Volunteer Training</p> <p>Contractor Training</p> <p>PAQ</p> <p>Statement of Fact</p> <p>WCCF Policy 12.004 Procedure 602.053 and staff training requires that correction staff that are the first responders of a sexual assault shall:</p> <ul style="list-style-type: none"> <li>· Separate the alleged victim and abuser,</li> <li>· Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence,</li> <li>· 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.</li> <li>· Notify the shift supervisor by telephone or in person and tell only those staff need to know in assisting you in carrying out these responsibilities.</li> <li>· Staff are issued a card that includes steps to take as first responders. All random staff were able to articulate their responsibilities and have received training on preserving and protecting the crime scene.</li> </ul> <p>115.64 (b): Staff training requires that non correctional staff that are first responders are required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.</p> <p>All non-contact staff interviewed that were interviewed knew their duties and reported they received the training during yearly in service and on reminder training that is sent out by the PREA compliance managers from time to time.</p> <p>During the last 12 months there were 18 allegations of sexual abuse or sexual harassment at the facility. One was reported to the medical director. In interviews with her, she was able to articulate all actions that was taken as a non-correctional staff first responder.</p> <p>Compliance was determined by review of the policies and training and by interviewing non-contact staff during the onsite audit. As an auditor I randomly tour the administrative, classification area and educational areas and ask staff if I could ask them a question. After reminding them that they don't have the answer the questions I ask them, "what would you do if an offender came to you and said it was sexual assaulted". All staff were able to articulate they would follow the above requirements.</p>

115.65	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WFFC PREA Coordinated Response Plan</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01</p> <p>PREA Coordinated Response Plan Checklist</p> <p>Medical and Mental Health Screening</p> <p>115.65 (a): MDOC Procedure 602.053 mandates that facilities have a coordinated response plan. ATEF Coordinated Response Plan provides written guidance to staff and administration regarding actions to take and notifications to be made. A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are carried out and proper notifications are made. The Coordinated Response Plan includes action required after report of sexual abuse:</p> <p>Initial response</p> <p>Shift supervisors Responsibility</p> <p>Facility Crime Scene</p> <p>Notification required when a sexual abuse is alleged</p> <p>Evidence Protocol</p> <p>Medical Response</p> <p>Mental Health Response</p> <p>Investigative Responsibilities</p> <p>Responsibilities when sexual harassment is alleged</p> <p>Responsibilities when sexual activity is alleged</p> <p>Each of the above responses includes but not limited to staff, contractors, victim advocates, OIG, and MTC PREA coordinator</p> <p>A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are carried out and proper notifications are made. The Chief of Security, Lieutenants, the PREA Compliance Manager, the Lead Investigator, and members of the administrative staff are responsible to ensure compliance to the plan. Staff interviewed confirmed that they are knowledgeable of the plan and the necessary actions to be taken in response to an allegation of sexual abuse.</p>

115.66	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>MTC Policy 203.1 Rules of Conduct</p> <p>Statement of Fact</p> <p>MTC and or the facility did not enter into a collective bargaining agreement or other agreements that would limit the agency's ability to remove an alleged staff sexual abuser from contact with any offender pending the outcome of an investigation. Per the statement of fact, BRCRF does not participate in collective bargaining agreements.</p>

115.67	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Documentation of Monitoring</p> <p>Protection from Retaliation Logs</p> <p>Statement of Fact</p> <p>115.67 (a): MDOC has as policy to protect offenders who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other offenders or staff. The policy provides procedures to protect individual in MDOC facilities. WFFC designated the PCM/Assistant Warden and Classification Supervisor as responsible for monitoring retaliation (PCM monitors staff, Classification staff monitors inmates). as the person responsible for monitoring retaliation.</p> <p>115.67 (b): The procedure states the agency has multiple protection measures, such as housing changes or transfers for offenders, victims or abusers, removal of alleged staff or offender abusers from contact with victims and emotional support services for offenders or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures to protect that individual against retaliation are put in place.</p> <p>115.67 (c): Offenders who allege sexual abuse will be monitored by the PREA Compliance Manager who will meet weekly with the alleged victim beginning the week following the incident and continue monitoring for at least 90 days or longer if there is a continuing need. The Human Resource Manager and Warden will monitor conduct and treatment of employees who reported staff misconduct or employee witness who cooperate with these investigations every 30 days for 90 days. Retaliation monitoring of offenders is documented with the investigative files. A resident that made an allegation indicated he was told they would monitor him, and he met with his Mental Health staff member for several times and asked how he was doing and so forth. He said his allegation was determined unfounded, but his mental health and the PCM asked me on several occasions if I was being treated OK.</p> <p>115.67 (d): Procedure also requires Monitoring of offenders includes periodic status checks. The PREA compliance manager was interview and indicted she would review the monitoring logs on the data base on an ongoing basis and randomly will see the offender during tour to check on his/her status.</p> <p>115.67 (e): Retaliation monitoring may be terminated if it is determined that the allegation was unfounded. The Retaliation monitor indicated while the official monitoring will end, the facility would continue to check on the offender for retaliation for making a report.</p> <p>In interview with Retaliation Monitor, the PREA Compliance Manager and the Human Resource Manager and information provided on the Pre-Audit Questionnaire, in the past 12 months there were no incidents of retaliation that occurred.</p> <p>Compliance was determined by review of the monitoring logs, agency policy and procedures, investigative files and interviews with the retaliation monitor, offender that made an allegation, agency head, and facility administrator.</p>

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>WCCF Policy 12.004</p> <p>Statement of Fact</p> <p>PAQ</p> <p>115.68 (a): WCCF Policy 12.004 requires involuntary segregated housing may be used only after an assessment of available housing alternatives has shown there is no other means of protecting the offender. 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. The facility has not utilized volunteer or involuntary restrictive housing for a PREA related incident or for protection of offenders for sexual abuse in the last 12 months. This was verified by statement of fact, PAQ, and Restrictive Housing Unit LT. A review of the logs for residents in the Restrictive Housing Unit did not reveal any PREA related segregation.</p> <p>Compliance was determined by review of the PAQ and interviews with Segregation supervisor and facility administrator.</p>



115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>MDOC Policy 20-14-01</p> <p>PREA Allegation Tracking log</p> <p>Administrative Investigative Reports</p> <p>PAQ</p> <p>115.71 (a): MDOC Policy 20-14-01 and WCCF Policy 12.004 requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment at the BRCRF, promptly, thoroughly, and objectively, including third party and anonymous reports. WCCF is responsible for conducting administrative sexual abuse investigations and the Department of Corrections; Corrections Investigative Division has the responsibility to conduct criminal investigations at WCCF and in all of the MDOC.</p> <p>115.71 (b): The facility has four (4) trained investigators and facility investigators have completed specialized training in the investigation of sexual abuse allegations. The facility provided documentation of completion of specialized investigative training completed by facility investigators. The investigators were interviewed and were extremely knowledgeable regarding conduct investigations in a confinement setting.</p> <p>115.71 (c): It is the responsibility of Investigators or DOC CID, with the assistance of the facility investigators to gather and preserve circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Investigator will interview alleged victims, suspected perpetrators and witnesses and review prior reports of sexual abuse involving the suspected perpetrator.</p> <p>115.71 (d): When the quality of evidence supports criminal prosecution, CID may conduct compelled interviews only after consulting with prosecutors.</p> <p>115.71 (e): The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as an offender or staff. An offender who alleges sexual abuse is not required to submit to a polygraph examination.</p> <p>115.71 (f): In interviews with the investigators, they indicated that investigator review an effort to determine whether staff actions or failures to act contributed to the abuse. The administrative investigation shall be documented in a written report and include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.</p> <p>115.71 (g): A criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial and documentary evidence. The facility shall request a copy of completed investigative reports from CID. Allegations will be tracked on the PREA Tracking Log.</p> <p>115.71 (h): Substantiated allegations of conduct that appears to be criminal shall be referred for criminal prosecution. On information reported on the Pre-Audit Questionnaire and in interview with facility investigators, since the last PREA audit there no allegations of sexual abuse referred for prosecution. Criminal investigations are conducted by the CID Investigator. There was no case that has been referred for investigation since in the last twelve months. Based on a corrective action plan, the Chief of investigations is reviewing all sexual abuse reports where offenders went for SANE evaluation or made allegations that by standards would be considered a criminal action.</p> <p>115.71 (i): The agency will retain all written reports as long as the alleged abuser is incarcerated or employed by the agency, plus five years.</p> <p>115.71 (j): The departure of an alleged abuser or victim from employment or control of the facility or agency, shall not provide a basis for terminating an investigation</p> <p>115.71 (l): When outside agencies investigate sexual abuse allegations, the facility will cooperate with investigators and will try to remain informed about the progress of the investigation. In interview with the PREA Coordinator, she reported that</p>

facilities are required to check in with outside investigators at a minimum of every 30 days and document that contact was made to ensure that requirements such as retaliation monitoring and notices of outcome of investigations are completed as required.

In interview with facility investigators, they were knowledgeable of their responsibilities of conducting administrative investigations of all allegations received and knew when to refer allegations that appear to be criminal for criminal investigation. The facility utilizes facility investigators and DOC investigative division to conduct investigations.

Compliance was determined by review of the agency policy and procedures, training curriculum, PAQ, investigative reports and interviews with facility investigator and agency head designee, PREA coordinator and facility administrator. Additionally, compliance was determined by a plan of action for DOC to review sexual abuse investigations that would be considered criminal if determined substantiated.

<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC Policy 20-14-01</p> <p>WCCF Policy 12.004</p> <p>Administrative report of investigation</p> <p>Investigator training curriculum</p> <p>115.72 (a): Based on MDOC Policy 20-14-01 and Investigator training the facility shall impose no standard higher than the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. In interview with facility investigators, they confirmed this practice.</p> <p>Compliance was determined by review of policy, training curriculum, and interview with trained investigators.</p>

115.73	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01</p> <p>MTC Policy 903E.02</p> <p>Administrative Investigative files</p> <p>PAQ</p> <p>Notice of Outcome of Investigations</p> <p>115.73 (a): MDOC Policy 20-14-01 and WCCF Policy 12.004 indicate that following an investigation of sexual abuse of an offender, the offender shall be informed in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The OIG or facility investigator is responsible for preparing the Notification of Outcome of Allegation form and presenting it to the alleged victim for his signature. The offender receives a copy of the form, and a copy is forwarded to the PREA Coordinator office.</p> <p>115.73 (b): According to policy and PREA compliance manager if the facility did not conduct the investigation, the facility shall request the relevant information from the investigative agency in order to inform the offender. In interview with OIG, she indicated that OIG completes a notice of outcome of the investigations and forwards to the facility to provide detainee.</p> <p>115.73 (c): Per the procedures, every allegation is investigated, and every investigated allegation outcome was reported to the inmate with a finding as to whether it was substantiated, unsubstantiated or unfounded. If the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at the facility, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the inmate allegation is against an inmate, the facility shall inform the inmate whenever the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or has been convicted on a charge related to sexual abuse within the facility.</p> <p>115.73 (d): Policy and procedure requires following an offender's allegation that he has been sexually abused by another offender, the agency will inform the alleged victim if the alleged abuser has been indicted on a charge related to sexual abuse within the facility or if the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p>115.73 (e): All Notification of Outcome of Allegation or attempted notifications are documented and filed in the corresponding investigative file. There were 18 notifications during the last 12 months.</p> <p>Compliance was determined by review of the agency and facility policy and interviews with PREA compliance managers, investigators, and facility administrator and review of investigative files and notice of outcome memos.</p>

115.76	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>MTC Policy 203 .1 Rules of Conduct</p> <p>115.76 (a): MTC Policy 203 .1 Rules of Conduct establishes the standard that employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policy.</p> <p>115.76 (b): Based on policy termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>115.76 (c): Based on policy and facility administrator and human resources staff disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the act committed, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>115.76 (d): All terminations for violations of the agency's policies on sexual abuse and sexual harassment, or resignations, shall be reported to law enforcement and licensing agencies unless the activity was clearly not criminal.</p> <p>In interview with the facility administrator and in information provided on the Pre-Audit Questionnaire, in the past 12 months, no staff member was terminated or received any adverse action due regarding a PREA violation. There were no substantiated cases of staff-on-inmate sexual abuse. Staff training includes personnel policies involving violation of PREA standards or having any sexual activity with offenders.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC Policy 20-14-01</p> <p>WCCF Policy 12.004</p> <p>Contractor PREA training curriculum</p> <p>PAQ</p> <p>Statement of Fact</p> <p>115.77 (a): Any contractor or volunteer who engages in sexual abuse/sexual harassment would be prohibited from contact with inmates and would be reported to the appropriate investigator and law enforcement or relevant professional licensing/certifying bodies unless the activity was clearly not criminal in nature.</p> <p>Any contractor or volunteer who engages in sexual abuse even though it was not criminal will be reported to professional licensing/certifying bodies.</p> <p>115.77 (b): In cases that were not criminal in nature, the facility would take appropriate remedial measures and consider whether to prohibit further contact with inmates.</p> <p>During the previous year, there no incident where a contractor or volunteer was accused of, suspected, or found guilty of sexual abuse or sexual harassment at WCCF. Compliance was determined by review of the volunteer and contractor training and statement acknowledging violation of PREA standards. Also interviews with contractors and one volunteer, PREA compliance manger and facility administrator confirm compliance with this standard.</p>

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC Rules and Sanctions</p> <p>WCCF Policy 12.004</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Statement of Fact</p> <p>Inmate Handbook</p> <p>Posters located throughout the facility</p> <p>115.278 (a): According to MDOC rules and sanctions, if a resident is found guilty of engaging in sexual abuse involving another resident, either through administrative or criminal investigations, the resident will be subject to formal disciplinary sanctions. The Inmate Program Handbook outlines violations a resident will be disciplined for and the sanctions to be imposed.</p> <p>115.278 (b): Sanctions will be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history and the sanctions imposed for comparable offenses by other residents with similar histories.</p> <p>115.278 (c): Based on WCCF Policy 12.004 - Inmate Discipline the disciplinary process may consider whether an individual's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.</p> <p>115.278 (d): If the facility offers counseling or other interventions designed to address the reasons or motivations for the abuse, the facility shall consider requiring the offending individual to participate. The Mississippi Department of Corrections will determine if the resident will be required to participate in counseling or other interventions designed to address the reasons or motivations for the abuse.</p> <p>115.278 (e): Disciplining a resident for sexual contact with an employee is prohibited unless it is found that the employee did not consent to the contact.</p> <p>115.278 (f): A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>115.278 (g): The agency prohibits all sexual activity between residents. Facilities may not deem that sexual activity between offenders is sexual abuse unless it is determined that the activity was coerced. In information provided on the Pre-Audit Questionnaire and in interview with the Facility Director, in the past 12 months there were no disciplinary sanctions imposed for residents violating the sexual abuse policies.</p> <p>Compliance was determined by review of the policy, review of an incident report and interviews with the investigator, PREA compliance manager and facility administrator.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	<p data-bbox="300 199 738 231"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="300 258 487 289"><b>Auditor Discussion</b></p> <p data-bbox="300 294 1299 346">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="300 352 998 394">Vital Pro Health Services Policy P-B-04.00 Federal Sexual Abuse Regulations</p> <p data-bbox="300 415 690 447">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="300 468 495 499">WCCF Policy 12.004</p> <p data-bbox="300 520 511 552">MDOC Policy 20-14-01</p> <p data-bbox="300 573 803 604">Email from Intake staff notifying a Mental Health referral</p> <p data-bbox="300 625 584 657">Mental Health evaluation notes</p> <p data-bbox="300 661 1421 892">115.82 (a): If during initial PREA screening, the offender reports prior sexual victimization, whether in an institutional setting or in the community, staff will ensure the offender will be referred to mental health for further evaluation within 14 days. In review of the 30-day follow-up assessments the offender discloses prior victimization not reported during initial screening, the PREA Compliance Manager will refer the offender to mental health for further evaluation. Medical and the Mental Health Provider, according to their professional judgement, determine the nature and scope of these services. In information reported on the Pre-Audit Questionnaire, 100% of the offenders assigned to the facility in the past 12 months who disclosed prior victimization were offered a follow-up meeting with the Mental Health Provider.</p> <p data-bbox="300 892 1421 997">115.81 (b): Any offender who reports during initial PREA screening or in follow-up screenings he has previously perpetrated sexual abuse in an institutional setting or in the community will offered a follow meeting with medical or mental health within 14 days of the screening. There were no offender that claims he perpetrated a sexual abuse.</p> <p data-bbox="300 997 1421 1113">115.81 (d): Information related to sexual victimization or abusiveness in an institutional setting is limited only to medical and mental health practitioners and other employees as necessary to inform treatment plans, security and management decisions or otherwise federal, state or local law.</p> <p data-bbox="300 1113 1421 1197">115.81 (e): Medical and mental health providers obtain consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting. Offenders have a right to refuse these services.</p> <p data-bbox="300 1197 1421 1438">Based on interview with medical provider that coordinates for mental health services offenders who report prior sexual victimization and those who disclose previously perpetrating sexual abuse are being referred for evaluation and consent forms or refusals are being obtained. The mental health staff are available during the intake process and conduct suicide screening and interviews with transgender detainees. In interview with the mental health provider, typically the mental health staff will interview detainees with history of victimization during their intake process. However, the facility is required to forward a referral in order to comply with the Offender data base. The chief WCCF classification issued an email requiring that her office be notified when a referral is sent to Mental Health for her records and follow up.</p> <p data-bbox="300 1438 1421 1522">Compliance with this standard was based on policies, mental health referrals, interview with the medical administrator, intake staff and PREA compliance manager.</p>



115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Vital Pro Health Services Policy P-B-04.00 Federal Sexual Abuse Regulations</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01</p> <p>Statement of Fact</p> <p>115.82 (a): WCCF Policy 12.004, MDOC Policy 20-14-01 and the coordinated response plan provide a procedure for Victims of sexual abuse to receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Medical and mental health providers, according to their professional judgement, determine the nature and scope of these services.</p> <p>115.282 (b): All staff first responders are trained to take preliminary steps to protect the victim. Security staff first responders are to take preliminary steps to protect the victim and notify facility medical and mental health staff immediately. The Mental Health Provider would present a Consent to Evaluate: Sexual Abuse Allegation form to the alleged victim prior seeking their consent to conduct a mental health evaluation of an alleged victim of sexual abuse.</p> <p>115.82 (c): Offender victims are offered prophylactics for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate. Medical staff indicated that is part of the SANE process and she would follow up when the offender returns to the facility.</p> <p>115.82 (d): Based on review of policy and in interviews with PREA compliance manager all services are provided without financial cost to the victim, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Compliance was determined by review of the coordinated response plan, MOU with Panhandle SANE Services and Lakeview Center. Compliance was also determined by interviews with nurse, first responders, random staff, PREA compliance manager and facility administrator. The facility provide a statement of fact that there are medical staff on duty 24 hours a day.</p>

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01</p> <p>Vital Pro Health Services Policy P-B-04.00 Federal Sexual Abuse Regulations</p> <p>Inmate Handbook</p> <p>115.283 (a): The facility offers ongoing medical and mental health care to all residents who have been victimized by sexual abuse.</p> <p>115.283 (b): According Vital Pro Health Services Policy P-B-04.00 Federal Sexual Abuse Regulations treatment services would include the evaluation and treatment would include follow-up services, treatment plans and referrals for continued care upon transfer or release. According to the mental health and medical administrator medical and mental health care provided is consistent with the community level of care.</p> <p>115.283 (d): The facility does not house females at this time. Per interview with the medical staff If a transgender male were to be assigned to the facility, the facility would provide the appropriate pregnancy services as required by the standard.</p> <p>115.283 (e): The facility does not house females at this time. Per interview with the medical staff If a transgender male were to be assigned to the facility, if pregnancy results from vaginal penetration, will receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.</p> <p>115.283 (f): Resident victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate.</p> <p>115.283 (g): All services will be provided without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>115.283 (h): The facility attempts to conduct a mental health evaluation of all known abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate.</p> <p>Based on information provided by the PREA Compliance Manager, in the past 12 months, there were no residents who required ongoing medical or mental health treatment due to being victimized by sexual abuse.</p> <p>Compliance was determined by review of the MDOC and Vital Pro policies, interviews with medical and mental health staff.</p>

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>WCCF Policy 12.004</p> <p>MDOC Policy 20-14-01</p> <p>Administrative Investigative Report</p> <p>Report of Investigation</p> <p>After Action Review (Incident Team Meeting)</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>115.86 (a-b): MDOC Policy 20-14-01 requires facility to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation in which the allegation has been determined to be substantiated or unsubstantiated within 30 days of the conclusion of the investigation. At the time of the PAQ there were 10 allegations of sexual abuse in the last twelve month that required an incident review team meeting at the time of the audit. An incident team meeting was completed on all substantiated and unsubstantiated investigations unless the investigation had not been completed in time for a team meeting.</p> <p>115.86 (c): The Incident Review Committee consists of the facility administrator, Chief of Security, PREA Compliance Manager, Lead Investigator, Unit Manager, Classification Supervisor and the nurse, and the PREA Coordinator may attend via telephone or in person.</p> <p>115.86 (d): The team considers whether the incident was motivated by race, ethnicity, gender identity, perceived status or gang affiliation. The team examines the area where the incident was alleged to have occurred and assesses whether physical barriers in the area may have contributed to the abuse, whether monitoring technology should be deployed or augmented and whether the staffing levels at the time of the incident were adequate.</p> <p>115.86 (e): The facility will implement the recommendations for improvement or documents the reasons for not doing so. When interviewed, the members of the incident review team knew their responsibilities as they relate to the review of sexual abuse incidents.</p> <p>Compliance was determined by agency and facility policies, MTC investigative data base which mandates after action reports on all allegations of sexual abuse or sexual harassment except when they are unfounded.</p>

<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC Policy 20-14-01</p> <p>MTC Corporate Annual Report</p> <p>PREA Tracking Log</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>115.87 (a): MTC Policy 903E.02 mandates that all facilities under the MTC umbrella collect uniform data for every allegation of sexual abuse at all facilities under their control. MTC requires facilities to utilize a standardized instrument that includes clearly defined definitions. The incident-based data collected shall include, at 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. MDOC Policy 20-14-01 requires that all private facilities contracted for housing offenders comply with PREA standards and provide information that is required for DOJ survey monthly.</p> <p>115.87 (b): The PREA Compliance Manager ensures that the data is compiled and forwarded to the PREA Coordinator monthly on the Monthly PREA Incident Tracking Log. In addition to submitting the Monthly PREA Incident Tracking Log, the PREA Compliance Manager ensures that a PREA Survey is created, updated, and submitted for review and approval in the PREA Portal for every allegation of sexual abuse, sexual harassment and sexual activity. At least annually, the PREA Coordinator aggregates this data.</p> <p>115.287 (c): The data collected, will be at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS).</p> <p>115.287 (d): The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p>115.287 (e): This provision of this standard is not applicable to this facility. The agency does not contract for the confinement of offenders.</p> <p>115.287 (f): Upon request, MTC shall provide such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p>The facility provided a copy of the annual log for review. The log contained all elements required by policy. The review of the log and interview with PREA compliance manager and PREA coordinator confirmed compliance with this standard.</p>

115.88	Data review for corrective action
	<p data-bbox="297 195 737 226"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="297 258 483 279"><b>Auditor Discussion</b></p> <p data-bbox="297 289 1300 342">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="297 363 688 394">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="297 415 591 447">MTC Annual PREA Data Report</p> <p data-bbox="297 468 607 499">MDOC Annual PREA Data Report</p> <p data-bbox="297 520 505 552">Corrective Action Plan</p> <p data-bbox="297 552 1393 699">115.288 (a): MTC reviews all of the data collected from all of its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training by identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings. This information is provided in the annual report.</p> <p data-bbox="297 699 1398 804">115.288 (b): The PREA Coordinator reviews the data collected and the annual report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.</p> <p data-bbox="297 804 1403 888">115.288 (c): The PREA Coordinator forwards the annual report to the Senior Vice President of MTC Care and to President for approval. The report is made public on the MTC website at <a href="https://www.mtctrain.com/prea">https://www.mtctrain.com/prea</a>.</p> <p data-bbox="297 888 1406 972">115.288 (d): Before making aggregated sexual abuse data public, all personal identifiers are redacted as stated on the last page of MTC's annual report.</p> <p data-bbox="297 972 1430 1056">Mississippi Department of Corrections annual report was also reviewed. The annual reported no substantiated allegations of sexual violence at WCCF during the 2020 reporting period.</p> <p data-bbox="297 1056 1425 1199">Compliance of this standards was determined by reviewing annual reports for MDOC and MTC, review the facility policy and interviews with the PREA coordinator and PREA compliance manager. The MTC annual report provides more information than is required and at the same time provides the person reviewing the report a detailed look at PREA in action in MTC facilities.</p>

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MDOC Policy 20-14-01</p> <p>MTC Policy 903E.02</p> <p>MTC Annual PREA Data Report</p> <p>MDOC Annual PREA Data Report</p> <p>115.289 (a): MTC Policy 903E.02 Ensuring Safe Prisons ensures that data collected are securely retained for at least 10 years according to MTC policy.</p> <p>115.289 (b): MTC makes all aggregated sexual abuse data from all its facilities made public annually on their website at <a href="https://www.mtctrain.com/prea">https://www.mtctrain.com/prea</a>. A review of the website confirmed that the agency has PREA reports from 2017 until 2021 uploaded in the above website.</p> <p>115.289 (c): Before making aggregated sexual abuse data public, MTC removes all personal identifiers.</p> <p>115.289 (d): MTC Policy 903E.02 Ensuring Safe Prisons Sexually ensures that data collected are securely retained for at least 10 years.</p> <p>Compliance was determined by review of three (3) annual report, corporate policy and interview with the Agency PREA Coordinator.</p>

115.401	Frequency and scope of audits
	<p data-bbox="302 195 737 222"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="302 254 483 281"><b>Auditor Discussion</b></p> <p data-bbox="302 296 1300 333">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="302 359 688 386">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="302 411 492 438">PREA Audit Postings</p> <p data-bbox="302 449 1406 674">115.401 (a): MTC Policy 903E.02 require during the three-year period starting on August 20, 2013, and each three-year period thereafter, MTC's Contract Compliance Department ensures that a PREA auditor who has been certified through the Department of Justice audits each facility at least once. The initial PREA audit of Wilkinson County Correctional Facility was conducted May 2016 by a DOJ certified PREA auditor when the facility was operated by MTC. The second audit was conducted in June 2019 by a DOJ Certified auditor. This is the third audit of this facility and is being conducted by a certified PREA auditor. This auditor's recertification was effective January 1, 2022. This is the third certification or recertification of this auditor.</p> <p data-bbox="302 684 1406 848">115.401 (b): According to MTC's PREA Coordinator and the annual PREA report, during the three-year period beginning on August 20, 2013, MTC ensured that each of its facilities were audited at least once and continues to ensure that its facilities are audited every three years. During the last cycle many audits were scheduled, rescheduled, and postponed due to the pandemic. However, each facility was audited during the last 3 year cycle. This is the third year of this cycle. According to MTC coordinator all facilities are scheduled to be audited during this cycle.</p> <p data-bbox="302 858 1414 932">115.401 (h): During the audit, I was allowed access to all areas of Facility. I was allowed to visit areas throughout the facility during the official tour and additional visits to different areas of the facility while interviewing and observing camera locations.</p> <p data-bbox="302 942 1370 1016">115.401 (i): I requested personnel files, resident files, training records, investigation files, logbooks, and pertinent forms utilized to carry out the requirement of the audit process. Each document was provided in a timely basis.</p> <p data-bbox="302 1026 1422 1131">115.401 (m): I interviewed random staff on duty for the for the first 24 hours of the audit and random sample of offender during the onsite audit. No offender declined to be interviewed and the facility did not prohibit me from interviewing offenders selected for interview. Interviews were conducted in a private area of the facility.</p> <p data-bbox="302 1142 1414 1209">115.401 (n): Posting were displayed throughout the facility with the name and address of the PREA auditor. The auditor did not receive any correspondences from residents. The information was posted on April 19, 2022.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.403 (f): Per agency policy and standard requirements, MTC ensures me that this final report will be published on their website and be available to the public. The reports from May 2016 and June 2019 audits were located on the MTC website and reviewed by the auditor.



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

<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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

<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes

<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	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

<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	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
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	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.)	no
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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



<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	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
<b>115.31 (b)</b>	<b>Employee training</b>	
	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

<b>115.31 (c)</b>	<b>Employee training</b>	
	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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	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
<b>115.33 (b)</b>	<b>Inmate education</b>	
	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
<b>115.33 (c)</b>	<b>Inmate education</b>	
	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

<b>115.33 (d)</b>	<b>Inmate education</b>	
	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
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	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
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	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

<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

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

<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	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

<b>115.43 (b)</b>	<b>Protective Custody</b>	
	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.)	na
	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.)	na
	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.)	na
<b>115.43 (c)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	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
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	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



<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	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
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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

<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	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
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	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

<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	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

<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	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

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

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes



<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	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

<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	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
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	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
<b>115.87 (d)</b>	<b>Data collection</b>	
	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
<b>115.87 (e)</b>	<b>Data collection</b>	
	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
<b>115.87 (f)</b>	<b>Data collection</b>	
	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

<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	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

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	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