

PREA Facility Audit Report: Final

Name of Facility: Marion County Regional Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/31/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Robert B. Latham	Date of Signature: 05/31/ 2023

AUDITOR INFORMATION	
Auditor name:	Latham, Robert
Email:	robertblatham@icloud.com
Start Date of On-Site Audit:	04/04/2023
End Date of On-Site Audit:	04/05/2023

FACILITY INFORMATION	
Facility name:	Marion County Regional Correctional Facility
Facility physical address:	503 South Main Street, Columbia, Mississippi - 39429
Facility mailing address:	po # 528, COLUMBIA, Mississippi - 39429

Primary Contact	
Name:	Captain Chris Cochran
Email Address:	ccochran@mwcf.us
Telephone Number:	6014418615

Warden/Jail Administrator/Sheriff/Director	
Name:	Warden Derek Mingo
Email Address:	majormingo@bellsouth.net
Telephone Number:	601-736-3621

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

Facility Health Service Administrator On-site	
Name:	Laura Stogner
Email Address:	mwnurse@bellsouth.net
Telephone Number:	601-736-3621 ext.207

Facility Characteristics	
Designed facility capacity:	402
Current population of facility:	401
Average daily population for the past 12 months:	400
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:	19-70
Facility security levels/inmate custody levels:	medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	63
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	1
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0

AGENCY INFORMATION

Name of agency:	Marion County Sheriff's Department
Governing authority or parent agency (if applicable):	MDOC
Physical Address:	219 Broad Street, Columbia, Mississippi - 39429
Mailing Address:	PO# 528, Columbia, Mississippi - 39429
Telephone number:	6017363621

Agency Chief Executive Officer Information:

Name:	Warden Derek Mingo
Email Address:	majormingo@bellsouth.net
Telephone Number:	6017363621

Agency-Wide PREA Coordinator Information

Name:	Chris Cochran	Email Address:	ccochran@mwcf.us
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-04-04
2. End date of the onsite portion of the audit:	2023-04-05

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:	<ol style="list-style-type: none">1. Mississippi Coalition Against Sexual Assault (MCASA)2. Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	402
15. Average daily population for the past 12 months:	399
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 type="radio"/> No <input checked="" 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:	356
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	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:	0

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>63</p>
<p>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:</p>	<p>2</p>

<p>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:</p>	<p>0</p>
<p>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:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>19</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" 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 </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Inmates were interviewed from all housing units and isolation.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	1
<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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.

<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>Corroboration strategies included discussions with staff and interviews with inmates.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included discussions with staff and interviews with inmates.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included discussions with staff and interviews with inmates.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included discussions with staff and interviews with inmates.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>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>Corroboration strategies included discussions with staff and interviews with inmates.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included discussions with staff and interviews with inmates.</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>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>Corroboration strategies included discussions with staff and interviews with inmates.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included discussions with staff and interviews with inmates.</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>1</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>Corroboration strategies included discussions with staff and interviews with inmates.</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>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</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 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>If "Other," describe:</p>	<p>Gender, race, ethnicity, and languages spoken were considered.</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>12</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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)

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	2
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

<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>
<p>Was the site review an active, inquiring process that included the following:</p>	
<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>No text provided.</p>
<p>Documentation Sampling</p>	
<p>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>	
<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>

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

No text provided.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	There were no allegations of sexual abuse reported.

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>There were no allegations of sexual harassment reported.</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>No text provided.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

- Yes
- No

Non-certified Support Staff

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

- Yes
- No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

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

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MDOC Policy 03-17: Anti-Harassment 3. MDOC Policy 20-05: Protection from Harm 4. MCRCF Organizational Chart 5. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator (MDOC) 2. PREA Compliance Manager (MCRCF) <p>Site Review Observations: Observations during on-site review of physical plant</p> <p>Findings (By Provision):</p>

115.11 (a)

PAQ: The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract. The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.

MDOC Policy 20-14-01-01 (pages 1-3) It is the policy of the Mississippi Department of Corrections (MDOC) to maintain a safe and secure environment for all offenders/staff members with the objective of maintaining a zero-tolerance for prison rape and other forms of sexual misconduct in MDOC facilities as well as all facilities that contract for the confinement of MDOC offenders. The policy outlines the facility's approach to preventing, detecting, and responding to such conduct. The policy includes definitions of prohibited behaviors regarding sexual misconduct, sexual abuse and sexual harassment and includes sanctions for those found to have participated in prohibited behaviors. The policy addresses prevention of sexual abuse and sexual harassment through the designations of a PREA Coordinator and PREA Compliance Manager, supervision and monitoring, criminal background checks, staff training, inmate education, PREA information and educational materials. The policy addresses detection of sexual abuse and sexual harassment through inmate education, staff training, and intake screening for risk of sexual victimization and abusiveness. The policy addresses responding to sexual abuse and sexual harassment through the various ways of reporting, investigations, disciplinary sanctions for inmates and staff, victim advocacy, access to emergency medical treatment and crisis intervention services, sexual abuse incident reviews, data collection, and data review for corrective action.

115.11 (b)

PAQ: The agency employs or designates an upper-level, agency-wide PREA Coordinator. The PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards at the facility.

MDOC Policy 20-14-01 (page 3) An agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

MDOC employs an upper-level, agency-wide PREA Coordinator. She confirmed she has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in the agency.

115.11 (c)

PAQ: The facility has designated a PREA compliance manager. The PREA compliance

	<p>manager has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. The position of the PREA compliance manager in the agency's organizational structure: Captain</p> <p>MDOC Policy 20-14-01 (page 3) Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.</p> <p>The PREA Compliance Manager stated he has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the agency and facility is fully compliant with this standard requiring a zero-tolerance policy toward sexual abuse and sexual harassment and the designation of a PREA Coordinator. No corrective action is required.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interview:</p> <ol style="list-style-type: none"> 1. Agency Contract Administrator <p>Findings (by provision):</p> <p>115.12 (a) N/A - The agency does not contract with private agencies or other entities for the confinement of its inmates.</p> <p>PAQ: The agency has not entered into or renewed a contract for the confinement of inmates since the last PREA audit.</p> <p>115.12 (b) N/A - The agency does not contract with private agencies or other entities for the confinement of its inmates.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has</p>

	determined the agency is fully compliant with this standard regarding contracting with other entities for the confinement of inmates. No corrective action is required.
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115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Staffing Plan 3. 2021-2023 Staffing Plan Assessments 4. Logs (Unannounced Rounds) 5. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Warden 2. PREA Compliance Manager 3. Intermediate or Higher-Level Facility Staff <p>Site Review Observations:</p> <p>Observations during onsite review of facility</p> <p>Findings (by provision):</p> <p>115.13 (a)</p> <p>PAQ: Since the last PREA audit:</p> <ol style="list-style-type: none"> 1. The average daily number of inmates: 400 2. The average daily number of inmates on which the staffing plan was predicated: 400 <p>MDOC Policy 20-14-01 (page 4) The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:</p> <ol style="list-style-type: none"> 1. Generally accepted detention and correctional practices; 2. Any judicial findings of inadequacy; 3. Any findings of inadequacy from Federal investigative agencies; 4. Any findings of inadequacy from internal or external oversight bodies; 5. All components of the facility’s physical plan; 6. The composition of the inmate population; 7. The number and placement of supervisory staff; 8. Programs occurring on a particular shift;

9. Any applicable State or local laws, regulations, or standards;
10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
11. Any other relevant factors.

The auditor reviewed the facility staffing plan. The staffing plan is fully inclusive of the standard provision requirements.

The Warden and PREA Compliance Manager confirmed the facility regularly develops a staffing plan, maintains adequate staffing levels to protect inmates against sexual abuse, considers video monitoring as part of the plan, and documents the plan. When assessing staffing levels and the need for video monitoring, the staffing plan considers: generally accepted detention and correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated); the composition of the inmate population; the number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors.

115.13 (b)

PAQ: Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan.

MDOC Policy 20-14-01 (page 4) In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.

The Warden confirmed he checks for compliance with the staffing plan by reviewing the plan biannually.

115.13 (c)

PAQ: At least once every year the agency or facility, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to:

1. The staffing plan;
2. Prevailing staffing patterns;
3. The deployment of monitoring technology; or
4. The allocation of agency or facility resources to commit to the staffing plan to ensure compliance with the staffing plan.

MDOC Policy 20-14-01 (page 4) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to:

- (1) The staffing plan established pursuant to paragraph (a) of this section;
- (2) The facility's deployment of video monitoring systems and other monitoring technologies; and
- (3) The resources the facility has available to commit to ensure adherence to the

	<p>staffing plan.</p> <p>The PREA Compliance Manager confirmed he is consulted regarding any assessments of, or adjustments to, the staffing plan. The assessments are documented through the annual PREA staffing plan assessment and monthly assessments.</p> <p>The auditor reviewed the 2021-2023 staffing plan assessments for verification they are inclusive of the standard provision requirements.</p> <p>115.13 (d)</p> <p>PAQ: The facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The facility documents unannounced rounds. The unannounced rounds cover all shifts. The facility prohibits staff from alerting other staff of the conduct of such rounds.</p> <p>MDOC Policy 20-14-01 (page 4) Each agency operating a facility shall implement 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. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit 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.</p> <p>The auditor reviewed documentation showing that unannounced rounds are occurring as required by the standard provision.</p> <p>An interview with the PREA Compliance Manager confirmed he conducts unannounced rounds. They are documented in a log, conducted on all shifts, and he does not announce the rounds are occurring.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding supervision and monitoring. No corrective action is required.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ)

	<p>Site Review Observations: Observations during on-site review of physical plant</p> <p>Findings (By Provision): 115.14 (a) N/A Marion County Regional Correctional Facility does not house youthful inmates.</p> <p>115.14 (b) N/A Marion County Regional Correctional Facility does not house youthful inmates.</p> <p>115.14 (c) N/A Marion County Regional Correctional Facility does not house youthful inmates.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding youthful inmates. No corrective action is required.</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Training Curriculum 3. Training Records 4. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Sample of Staff 2. Random sample of Inmates 3. Transgender or Intersex Inmates <p>Site Review Observations: Observations during onsite review of facility</p> <p>Findings (By Provision): 115.15 (a) PAQ: The facility does not conduct cross-gender strip or cross-gender visual body cavity searches of inmates.</p> <p>In the past 12 months:</p> <ol style="list-style-type: none"> 1. The number of cross-gender strip or cross-gender visual body cavity searches of inmates: 0

2. The number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff: 0

MDOC Policy 20-14-01 (page 5) The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.

PREA Site Review:

Searches are conducted in an area where the inmates are not observed by staff of the opposite gender.

115.15 (b) N/A

Marion County Regional Correctional Facility does not have female inmates.

115.15 (c)

PAQ: Facility policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented.

MDOC Policy 20-14-01 (page 5) The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches.

115.15 (d)

PAQ: The facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit.

MDOC Policy 20-14-01 (page 5) The facility shall implement policies and procedures that enable 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. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.

Staff interviews confirmed staff of the opposite gender announce their presence when entering a housing unit that houses inmates of the opposite gender. Interviews also confirmed inmates are able to dress, shower and perform bodily functions without being viewed by staff of the opposite gender. Interviews with inmates corroborated that staff announce their presence when entering a housing unit that houses inmates of the opposite gender. All inmates stated they are never fully naked in full view of staff of the opposite gender.

PREA Site Review:

Inmates are able to shower and change clothing behind the privacy of an opaque half door. Inmate toilets are behind a block partition. These auditor observed these areas

are not seen by cameras or mirror placement. The auditor observed female staff verbally announcing prior to entering a housing unit. Lastly, the auditor observed signs at the entrance to each housing unit reminding staff to make the announcements.

115.15 (e)

PAQ: The facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmates for the sole purpose of determining the inmate's genital status. No such searches occurred in the past 12 months.

MDOC Policy 20-14-01 (pages 5-6) The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

Interviews with staff confirmed they are aware of the policy prohibiting them from searching or physically examining a transgender or intersex inmate for the purpose of determining the inmate's genital status. No inmates identified as transgender or intersex.

115.15 (f)

The percent of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs: 100%

MDOC Policy 20-14-01 (page 5) The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Staff interviewed confirmed they have received training on how to conduct cross-gender pat down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

The auditor reviewed the training curriculum and 2020-2022 staff training records to verify the training has been completed.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding limits to cross-gender viewing and searches. No corrective action is required.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Documents:

1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003
2. Translator Services Contract
4. PREA Posters and Pamphlets (English and Spanish)
5. MCRCF Pre-Audit Questionnaire (PAQ)

Interviews:

1. Agency Head Designee (Warden)
2. Random Sample of Staff
3. Inmates (with disabilities or who are limited English proficient)

Site Review Observations:

Observations during onsite review of facility

Findings (By Provision):

115.16 (a)

PAQ: The agency has established procedures to provide disabled inmates 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.

MDOC Policy 20-14-01 (page 6) The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall 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, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

MCRCF is not designated to house inmates with disabilities. Inmates with disabilities would be placed at a different facility. Additionally, the Warden confirmed the facility does not house inmates with disabilities. No inmates with disabilities were identified during the onsite phase of the audit.

115.16 (b)

PAQ: The agency has established procedures to provide inmates with limited English

proficiency 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.

MDOC Policy 20-14-01 (paged 6-7) The agency shall 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, including. steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

MCRCF has a contract for Spanish interpreting services. Educational information is provided in English and Spanish.

PREA Site Review: The auditor observed posted PREA information in Spanish in the housing units and intake/reception area.

115.16 (c)

PAQ: Agency policy prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants 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 § 115.364, or the investigation of the inmate's allegations. The agency or facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.

In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.364, or the investigation of the inmate's allegations: 0

MDOC Policy 20-14-01 (page 7) The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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.

Staff interviews confirmed the agency would use a Spanish speaking staff member or a language service for interpretation. No staff interviewed had any knowledge of inmate interpreters, inmate readers, or any other types of inmate assistants being used in relation to allegations of sexual abuse or sexual harassment.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmates with disabilities and inmates who are limited English proficient. No corrective action is required.

115.17	Hiring and promotion decisions
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <p data-bbox="256 344 1267 412">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="256 427 448 461">Documents:</p> <ol data-bbox="256 472 1134 584" style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Criminal Record Background Checks 3. MCRCF Pre-Audit Questionnaire (PAQ) <p data-bbox="256 622 759 656">Documents (Corrective Action):</p> <ol data-bbox="256 667 1437 869" style="list-style-type: none"> 1. Five Year Criminal Record Background Checks (May 23, 2023) 2. Criminal Record Background Checks (May 23, 2023) 3. Annual PREA Disclosure Form (May 19, 2023) 4. Employee Application updated with 3 Questions about Previous Misconduct (May 19, 2023) <p data-bbox="256 907 440 940">Interviews:</p> <ol data-bbox="256 952 1414 985" style="list-style-type: none"> 1. Administrative (Human Resources) Staff Designee (PREA Compliance Manager) <p data-bbox="256 1023 639 1057">Findings (By Provision):</p> <p data-bbox="256 1068 424 1102">115.17 (a)</p> <p data-bbox="256 1113 1469 1225">PAQ: Agency policy prohibits hiring or promoting anyone who may have contact with inmates, and prohibits enlisting the services of any contractor who may have contact with inmates, who:</p> <ol data-bbox="256 1236 1461 1516" style="list-style-type: none"> 1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); 2. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or 3. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. <p data-bbox="256 1554 1414 1666">MDOC Policy 20-14-01 (page 7) The agency shall not hire or promote anyone who may have contact with inmates, or retain the services of any contractor who may have contact with inmates, who -</p> <ol data-bbox="256 1677 1461 1957" style="list-style-type: none"> 1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; or 2. Has been convicted of, or civilly or administratively adjudicated for, engaging or attempting to engage in sexual activity in the community facilitated by force, threats of force, or coercion, or if the victim did not consent or was unable to consent. 3. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. <p data-bbox="256 1995 1342 2074">The PREA Compliance Manager confirmed the facility asks all applicants and employees about previous misconduct in written applications for hiring and</p>

promotions and in written self-evaluations conducted as part of reviews for current employees.

Through corrective action, the employee application was updated to include the 3 questions regarding past conduct (May 19, 2023).

115.17 (b)

PAQ: Agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

MDOC Policy 20-14-01 (page 7) The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

The PREA Compliance Manager confirmed the department considers prior incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with the inmates.

115.17 (c)

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

During the past 12 months:

The number of persons hired who may have contact with inmates who have had criminal background record checks: 16

MDOC Policy 20-14-01 (pages 7-8) Before hiring new employees who may have contact with inmates, the agency shall:

- (1) Perform a criminal background records check; and
- (2) 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.

The PREA Compliance Manager confirmed the agency performs criminal background record checks and considers pertinent civil or administrative adjudications for all newly hired employees who may have contact with the inmates and all employees, who may have contact with inmates who are being considered for promotions.

The auditor reviewed records of background checks of personnel hired in the past 12 months for verification they are conducted in compliance with the standard provision.

115.17 (d)

PAQ: Agency policy requires that a criminal background records check be completed before enlisting the services of any contractor who may have contact with inmates.

During the past 12 months:

1. The number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates: 0

2. The percent of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates: N/A

MDOC Policy 20-14-01 (page 8) The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.

The PREA Compliance Manager confirmed the department performs criminal background record checks and considers pertinent civil or administrative adjudications for all contractors who may have contact with the inmates and all contractors, who may have contact with inmates who are being considered for promotions.

The facility currently does not employ contractors who might have contact with inmates.

115.17 (e)

PAQ: Agency policy requires that either criminal background records checks be conducted at least every five years of current employees and contractors who may have contact with inmates or that a system is in place for otherwise capturing such information for current employees.

MDOC Policy 20-14-01 (page 8) The agency shall 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.

The PREA Compliance Manager confirmed the agency requires that criminal background records checks be conducted at least every five years of current employees and contractors who may have contact with inmates.

The auditor reviewed records of criminal background records checks of 16 personnel for verification they are conducted in compliance with the standard provision. Through corrective action, many of the background checks were completed May 16, 2023.

115.17 (f)

MDOC Policy 20-14-01 (page 8) The agency shall 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 and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

	<p>Through corrective action, the employee application was updated to include the 3 questions regarding past conduct (May 19, 2023). Additionally, the agency developed the Annual PREA Disclosure Form to be used for evaluations conducted as part of reviews of current employees (May 19, 2023).</p> <p>115.17 (g) PAQ: Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.</p> <p>MDOC Policy 20-14-01 (page 8) Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.</p> <p>115.17 (h) MDOC Policy 20-14-01 (page 8) Unless prohibited by law, the agency shall 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.</p> <p>The PREA Compliance Manager confirmed when a former employee applies for work at another institution, upon request from that institution, facility provides information on substantiated allegations of sexual abuse or sexual harassment involving the former employee.</p> <p>Conclusion and Corrective Action: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding hiring and promotion decisions. Corrective action is complete.</p> <p>115.17 (a and f)</p> <ul style="list-style-type: none"> • The application was updated to include the 3 questions about previous misconduct (May 19, 2023). • The agency developed the Annual PREA Disclosure Form to be used for evaluations conducted as part of reviews of current employees (May 19, 2023).
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Facility Schematics 3. Description of Video Monitoring Updates 4. MCRCF Pre-Audit Questionnaire (PAQ)

	<p>Interviews:</p> <p>1. Warden</p> <p>Site Review Observations:</p> <p>Observations during on-site review of physical plant</p> <p>Findings (By Provision):</p> <p>115.18 (a)</p> <p>PAQ: The agency or facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since the last PREA audit.</p> <p>The Warden confirmed the facility has not experienced substantial expansions or modifications since the last PREA audit.</p> <p>115.18 (b)</p> <p>PAQ: The agency or facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.</p> <p>The Warden confirmed when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse. He stated the facility reviews instances of all security risks, including sexual abuse, periodically during monthly upper staff and PREA meetings.</p> <p>The PREA Compliance Manager stated the updates included replacing cameras.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the auditor has determined the agency and facility is fully compliant with this standard regarding upgrades to facilities and technologies. No corrective action is required.</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MOU: Mississippi Coalition Against Sexual Assault (MCASA) 3. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Compliance Manager 2. Random Sample of Staff

3. SAFEs/SANEs

4. Inmates who Reported a Sexual Abuse - none identified

Findings (By Provision):

115.21 (a)

PAQ: The facility is responsible for conducting administrative or criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).

MDOC Policy 20-14-01 (page 9) To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

Staff interviews confirmed they are knowledgeable of the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. They were also knowledgeable that facility investigators are responsible for investigating allegations of sexual abuse.

115.21 (b)

PAQ: The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

MDOC Policy 20-14-01 (page 9) The protocol shall be developmentally appropriate for youth where applicable, and as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Justice's Office on Violence Against Women publication, "A National Protocol 15 for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

115.21 (c)

PAQ: The facility offers all inmates who experience sexual abuse access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.

In the past 12 months:

1. The number of forensic medical exams conducted: 0
2. The number of exams performed by SANEs/SAFEs: 0
3. The number of exams performed by a qualified medical practitioner: 0

MDOC Policy 20-14-01 (page 9) The agency shall 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. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be

made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs. Forensic medical examinations are conducted through MDOC.

115.21 (d)

PAQ: The facility makes a victim advocate from a rape crisis center available to the victim, in person or by other means. These efforts are documented. If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member.

MDOC Policy 20-14-01 (page 9) The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency shall make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member.

Victim advocates are available from the Mississippi Coalition Against Sexual Assault. The auditor reviewed an MOU with MCASA for services.

The auditor contacted PREA Advocate Coordinator with MCASA and determined the organization would provide victim advocacy services to victims of sexual abuse. Services would be provided at no cost to the victim.

The PREA Compliance Manager also confirmed victim advocates are available from MCASA.

115.21 (e)

PAQ: If requested by the victim, a victim advocate, or qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.

MDOC Policy 20-14-01 (page 10) As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

The auditor contacted PREA Advocate Coordinator with MCASA and determined the center would provide victim advocacy services to victims of sexual abuse to include accompanying and supporting the victim through the forensic medical examination process and investigatory interviews and providing emotional support, crisis intervention, information, and referrals.

The PREA Compliance Manager confirmed if requested by the victim, a victim advocate, or qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic

	<p>medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. He confirmed the facility has an MOU with MCASA for qualified victim advocates.</p> <p>115.21 (f) PAQ: If the agency is not responsible for administrative or criminal investigating allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.321 (a) through (e) of the standards.</p> <p>MDOC Policy 20-14-01 (page 10) To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding evidence protocol and forensic medical examinations. No corrective action is required.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interview:</p> <ol style="list-style-type: none"> 1. Agency Head or Designee 2. Investigative Staff <p>Findings (By Provision):</p> <p>115.22 (a) PAQ: The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <p>In the past 12 months:</p> <ol style="list-style-type: none"> 1. The number of allegations of sexual abuse and sexual harassment that were received: 0 2. The number of allegations resulting in an administrative investigation: N/A 3. The number of allegations referred for criminal investigation: N/A

	<p>MDOC Policy 20-14-01 (page 11) The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <p>The PREA Compliance Manager confirmed the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment.</p> <p>There were no investigative reports for allegations of sexual abuse or sexual harassment.</p> <p>115.22 (b)</p> <p>The agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. Agency policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is not published on the agency website or made publicly available via other means. The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation.</p> <p>MDOC Policy 20-14-01 (page 11) The agency shall have in place a policy 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. The agency shall publish such policy on its website or, if it does not have one, make the policy available through other means. The agency shall document all such referrals.</p> <p>The facility investigator confirmed agency policy requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior.</p> <p>Marion County Regional Correctional Facility does not have a website. The PREA Compliance Manager stated the policy would be available upon request.</p> <p>115.22 (c) N/A</p> <p>Marion County Regional Correctional Facility is responsible for conducting criminal investigations.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the auditor has determined the facility is not fully compliant with this standard regarding policies to ensure referrals of allegations for investigations. No corrective action is required.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Documents:

1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003
2. PREA Employee Training Curriculum
3. Staff Training Records
4. MCRCF Pre-Audit Questionnaire (PAQ)

Interviews:

1. Random Sample of Staff

Findings (By Provision):

115.31 (a)

PAQ: The agency trains all employees who may have contact with inmates on the ten required topics.

MDOC Policy 20-14-01 (page 12) The agency shall train all employees who may have contact with inmates on:

1. Its zero-tolerance policy for sexual abuse, sexual harassment and retaliation;
2. How to fulfill their responsibilities regarding prevention, detection, reporting, and response to sexual abuse and sexual harassment;
3. Inmates' right to be free from sexual abuse and sexual harassment;
4. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
5. The dynamics of sexual abuse and sexual harassment in confinement;
6. The common reactions of sexual abuse and sexual harassment victims;
7. How to detect and respond to signs of threatened and actual sexual abuse;
8. How to avoid inappropriate relationships with inmates;
9. How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates;
10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The auditor reviewed staff training records and the PREA training curricula. The staff interviewed reported receiving the training topics annually. The auditor confirmed this by reviewing the 2020-2022 training records.

115.31 (b)

PAQ: Training is tailored to the unique needs and attributes and gender of the inmates at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training.

MDOC Policy 20-14-01 (page 12) Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.

	<p>Staff are trained to work with inmates of both genders.</p> <p>115.31 (c) PAQ: Between trainings the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with inmates receive refresher training on PREA requirements: Annually</p> <p>MDOC Policy 20-14-01 (page 12) All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall 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. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.</p> <p>The auditor reviewed the training curricula and staff training logs for 2020-2022.</p> <p>115.31 (d) PAQ: The agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification.</p> <p>MDOC Policy 20-14-01 (page 12) The agency shall document, through employee signature or electronic verification that employees understand the training they have received.</p> <p>The auditor reviewed the training curricula and staff training logs for 2020-2022. Staff sign that they have received training.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding employee training. No corrective action is required.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Volunteer Guide to MDOC 3. Volunteer Applications

4. Volunteer Acknowledgements of PREA
5. MCRCF Pre-Audit Questionnaire (PAQ)

Interviews:

Volunteers who have Contact with Inmates

Findings (By Provision):

115.32 (a)

PAQ: All volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

The number of volunteers and contractors, who have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response: 2; There are 2 volunteers and no contractors.

MDOC Policy 20-14-01 (page 13) The agency shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

The auditor reviewed the training curriculum and found it to be inclusive of the training requirements.

Two volunteers interviewed confirmed they have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

115.32 (b)

PAQ: 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, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

MDOC Policy 20-14-01 (page 13) 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, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

115.32 (c)

PAQ: The agency maintains documentation confirming that volunteers and contractors understand the training they have received.

MDOC Policy 20-14-01 (page 13) The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.

	<p>The auditor reviewed training documents for volunteers, demonstrating that they sign that they understand the training they have received.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding volunteer and contractor training. No corrective action is required.</p>
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Translator Services Contract 4. PREA Posters and Pamphlets (English and Spanish) 5. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Intake Staff 2. Random Sample of Inmates <p>Site Review Observations: Observations during on-site review of physical plant</p> <p>Findings (By Provision): 115.33 (a) PAQ: Inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment.</p> <p>Of inmates admitted during the past 12 months: The number who were given this information at intake: 334 The percent who were given this information at intake: 100%</p> <p>MDOC Policy 20-14-01 (page 13) During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.</p> <p>The auditor reviewed the PREA brochure. The Case Manager demonstrated the intake process. She stated that inmates sign an agreement to document receiving PREA educational materials. The auditor observed signed agreements for inmates interviewed and additional examples.</p>

115.33 (b)

PAQ: Of inmates admitted during the past 12 months whose length of stay in the facility was for 30 days or more:

1. The number who received such education within 30 days of intake: 467
2. The percent who received such education within 30 days of intake: 100%

MDOC Policy 20-14-01 (page 13) Within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

Inmates interviewed confirmed they were told about their right not to be sexually abused and sexually harassed, how to report sexual abuse or sexual harassment, and their right not to be punished for reporting sexual abuse or sexual harassment. They stated they received PREA education within a month.

The auditor reviewed the PREA brochure to ensure that relevant information is covered.

115.33 (c)

PAQ: All inmates were educated within 30 days of intake.

MDOC Policy 20-14-01 (page 13) Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall 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.

The Case Manager stated she ensures inmates are educated on the agency's zero-tolerance policy on sexual abuse and sexual harassment through the inmates signing the Inmate PREA agreement form.

The auditor reviewed forty-seven signed agreements. The forms indicate the information was received at intake.

115.33 (d)

PAQ: Inmate PREA education is available in accessible formats for all inmates including those who are: Limited English proficient, well as to inmates who have limited reading skills.

Inmate PREA education is NOT available in accessible formats for all inmates including those who are: visually impaired, deaf, or otherwise disabled. The facility would not have disabled inmates.

MDOC Policy 20-14-01 (page 13) The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.

	<p>The facility clarified they would not have inmates with disabilities. Inmates with disabilities would be housed at a facility equipped to meet their needs.</p> <p>115.33 (e) PAQ: The agency maintains documentation of inmates participation in PREA education sessions.</p> <p>MDOC Policy 20-14-01 (page 13) The agency shall maintain documentation of inmate participation in these education sessions.</p> <p>The auditor reviewed the PREA agreements.</p> <p>115.33 (f) PAQ: The agency ensures that key information about the agency’s PREA policies is continuously and readily available or visible through posters, inmates handbooks, or other written formats.</p> <p>MDOC Policy 20-14-01 (page 14) In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.</p> <p>The auditor reviewed the PREA brochures and posters. The posters were updated through corrective action.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmates education. No corrective action is required.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Training Records 3. Certificates: PREA Investigator Training for Allegations of Inmate Sexual Abuse 4. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interview:</p> <ol style="list-style-type: none"> 1. Investigative Staff <p>Findings (By Provision): 115.34 (a)</p>

PAQ: Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.

MDOC Policy 20-14-01 (page 14) In addition to the general training provided to all employees pursuant to §115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such. investigations in confinement settings.

An interview with Investigative Staff confirmed he received training specific to conducting sexual abuse and sexual harassment investigations in confinement settings. He stated he received the training required by §115.31 and completed PREA Investigator Training for Allegations of Inmate Sexual Abuse presented by the Legal and Liability Risk Management Institute, April 12, 2023.

The auditor reviewed the training documents and certificate to verify compliance with the training requirements.

115.34 (b)

Specialized training includes techniques for interviewing juvenile sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

MDOC Policy 20-14-01 (page 14) Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

The investigative staff confirmed he received training specific to conducting sexual abuse and sexual harassment investigations in confinement settings. He stated he received the training required by §115.31 and completed PREA Investigator Training for Allegations of Inmate Sexual Abuse presented by the Legal and Liability Risk Management Institute, April 12, 2023.

The auditor reviewed the training documents and certificate to verify compliance with the training requirements.

115.34 (c)

PAQ: The agency maintains documentation showing that investigators have completed the required training. The number of investigators currently employed who have completed the required training: 2

MDOC Policy 20-14-01 (page 14) The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

The auditor reviewed the training documents and certificates to verify compliance with the training requirements.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has

	determined the facility is fully compliant with this standard regarding specialized training for investigations. No corrective action is required.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Training Curriculum 3. Training Records 4. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Medical Staff and Mental Health Staff <p>Findings (By Provision):</p> <p>115.35 (a)</p> <p>PAQ: The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities.</p> <ol style="list-style-type: none"> 1. The number of all medical and mental health care practitioners who work regularly at this facility who received the training: 3 2. The percent of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy: 100% <p>MDOC Policy 20-14-01 (page 15) The agency shall ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in:</p> <ol style="list-style-type: none"> (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. <p>An interview with medical staff confirmed they have received the specialized training topics regarding sexual abuse and sexual harassment.</p> <p>The auditor reviewed documentation of the annual training required by §115.31 and specialized training topics to verify compliance with the training requirements.</p> <p>115.35 (b)</p> <p>PAQ: The jail does not employ medical staff that conduct forensic exams. Forensic</p>

	<p>medical examinations are performed offsite.</p> <p>MDOC Policy 20-14-01 (page 15) If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.</p> <p>An interview with medical staff confirmed forensic medical examinations are not conducted at the facility. Forensic examinations would be conducted at Marion General Hospital.</p> <p>115.35 (c) PAQ: The agency maintains documentation showing that medical and mental health practitioners have completed the required training.</p> <p>MDOC Policy 20-14-01 (page 15) The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.</p> <p>The auditor reviewed documentation of the annual training required by §115.31 and specialized training topics to verify compliance with the training requirements.</p> <p>115.35 (d) Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.331 or for contractors and volunteers under § 115.332, depending upon the practitioner’s status at the agency.</p> <p>MDOC Policy 20-14-01 (page 15) Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency.</p> <p>The auditor reviewed documentation of the annual training required by §115.31 and specialized training topics to verify compliance with the training requirements.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding specialized training for medical and mental health care. No corrective action is required.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination: Documents:</p>

1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003
2. MCRCF Pre-Audit Questionnaire (PAQ)

Documents (Corrective Action):

1. PREA Assessment Screening - 4/12/2023
2. Reassessments - 5/10/2023

Interviews:

1. Staff Responsible for Risk Screening
2. Random Sample of Inmates

Site Review Observations:

Observations during on-site review of physical plant

Findings (By Provision):

115.41 (a)

PAQ: The agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates.

MDOC Policy 20-14-01 (page 15) All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.

Through corrective action, the Staff Responsible for Risk Screening (PREA Compliance Manager) confirmed he screens inmates upon admission to the facility or transfer from another facility for risk of sexual abuse victimization or sexual abusiveness toward other inmates.

The facility did not previously fully complete a risk screen. Through corrective action, screening for risk of sexual abuse victimization or sexual abusiveness toward other inmates was implemented and 7 examples of completed risk screens were provided to the auditor for review (April 12, 2023).

115.41 (b)

PAQ: The policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake.

In the past 12 months:

1. The number of inmates entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: 0
2. The percent of inmates entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: 0%

MDOC Policy 20-14-01 (page 15) Intake screening shall ordinarily take place within 72 hours of arrival at the facility.

The facility did not previously fully complete a risk screen. Through corrective action, screening for risk of sexual abuse victimization or sexual abusiveness toward other inmates was implemented and 7 examples of completed risk screens were provided to the auditor for review (April 12, 2023). All 7 risk screens were completed on the first day of admission, during intake.

PREA Site Review: Risk screens were not fully implemented during the onsite phase of the audit.

115.41 (c)

PAQ: Risk assessment is conducted using an objective screening instrument.

MDOC Policy 20-14-01 (page 15) Such assessments shall be conducted using an objective screening instrument.

The auditor observed the objective screening instrument and examples demonstrating the screening instrument has been implemented. The screening instrument indicates risk level for victimization.

115.41 (d)

MDOC Policy 20-14-01 (pages 15-16) The intake screening shall 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;
2. The age of the inmate;
3. The physical build of the inmate;
4. Whether the inmate has previously been incarcerated;
5. Whether the inmate's criminal history is exclusively nonviolent;
6. Whether the inmate has prior convictions for sex offenses against an adult or child;
7. Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
8. Whether the inmate has previously experienced sexual victimization;
9. The inmate's perception of his or her own vulnerability to sexual abuse or sexual harassment; and
10. Whether the inmate is detained solely for civil immigration purposes.

The auditor reviewed the newly implemented inmate risk screen and found it to be inclusive of the required information. Additionally, the PREA Compliance Manager confirmed the initial risk screening considers all aspects required by the standard.

115.341 (e)

MDOC Policy 20-14-01 (page 16) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

The auditor observed the newly implemented risk screening instrument considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates

for risk of being sexually abusive. Additionally, the PREA Compliance Manager confirmed the initial risk screening considers all aspects required by the standard provision.

115.41 (f)

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

In the past 12 months:

1. The number of inmates entering the facility (either through intake or transfer) who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake: 0
2. The percent of inmates entering the facility (either through intake or transfer) who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake: 0%

MDOC Policy 20-14-01 (page 16) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

The facility did not previously reassess an inmate's risk of victimization or abusiveness 30 days after the inmate's arrival at the facility. Through corrective action, reassessments were implemented, and 7 examples were provided to the auditor for review (May 10, 2023).

115.41 (g)

MDOC Policy 20-14-01 (page 16) An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

The interview with the Staff Responsible for Risk Screening confirmed reassessment shall occur when warranted, due to referral, request, incident of sexual abuse, or receipt of additional information that may impact the inmate's risk of victimization or abusiveness.

115.41 (h)

PAQ: The policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to questions regarding:

- Whether or not the inmate has a mental, physical, or developmental disability;
- Whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming;
- Whether or not the inmate has previously experienced sexual victimization; and
- The inmate's own perception of vulnerability.

	<p>MDOC Policy 20-14-01 (page 16) Inmates may not be 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.</p> <p>The interview with the Staff Responsible for Risk Screening confirmed inmates may refuse to answer without repercussion.</p> <p>115.41 (i) MDOC Policy 20-14-01 (page 16) The agency shall implement 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.</p> <p>The PREA Compliance Manager confirmed the agency has outlined who can have access to an inmates' risk assessment within the facility, to protect sensitive information from exploitation. He stated medical, the PREA Compliance Manager, and PREA investigators have access.</p> <p>Conclusion and Corrective Action: Based upon the review and analysis of the available evidence, the auditor has determined the facility fully meets this standard regarding screening for risk of victimization and abusiveness. Corrective action is complete.</p> <p>115.15 (a)-(i) The facility fully implemented risk assessments (4/12/2023) and reassessments (5/10/2023).</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Documents (Corrective Action):</p> <ol style="list-style-type: none"> 1. PREA Assessment Screening - 4/12/2023 <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Compliance Manager 2. Staff Responsible for Risk Screening 3. Transgendered/Intersex/Gay/Lesbian/Bisexual Inmates <p>Site Review Observations:</p>

Observations during on-site review of physical plant

Findings (By Provision):

115.42 (a)

PAQ: The agency/facility uses information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

MDOC Policy 20-14-01 (page 17) The agency shall use information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

Through corrective action, the Staff Responsible for Risk Screening (PREA Compliance Manager) confirmed the facility uses information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

The facility did not previously fully complete a risk screen. Through corrective action, screening for risk of sexual abuse victimization or sexual abusiveness toward other inmates was implemented and 7 examples of completed risk screens were provided to the auditor for review (April 12, 2023). The newly implemented risk screen considers risk-based housing decisions and eligibility for work and programming assignments.

115.42 (b)

PAQ: The agency/facility makes individualized determinations about how to ensure the safety of each inmate.

MDOC Policy 20-14-01 (page 17) The agency shall make individualized determinations about how to ensure the safety of each inmate.

The PREA Compliance Manager stated risk screening provides information to be used to make individualized determinations to ensure inmate safety. After conformation of victimization the resident will be assigned a bed either under camera surveillance or near a window for officer surveillance and will not be housed with known aggressors or high-risk residents.

115.42 (c)

PAQ: The agency or facility makes housing and program assignments for transgender or intersex inmates in the facility on a case-by-case basis.

MDOC Policy 20-14-01 (page 17) In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

The PREA Compliance Manager confirmed housing and programming assignments for transgender or intersex inmates are made on a case-by-case basis whether a placement would ensure the inmates' health and safety, and whether the placement would present management or security problems.

No inmates identified as transgender or intersex during the onsite phase of the audit.

115.42 (d)

PAQ: Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

MDOC Policy 20-14-01 (page 17) Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

The PREA Compliance Manager confirmed placement and programming assignments are reassessed at least twice each year to review any threats to safety experienced by the inmate.

115.342 (e)

PAQ: A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

MDOC Policy 20-14-01 (page 17) A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

The PREA Compliance Manager confirmed transgender or intersex inmates' views of their safety are given serious consideration in placement and programming assignments.

115.42 (f)

MDOC Policy 20-14-01 (page 17) Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

The PREA Compliance Manager stated transgender and intersex inmates are given the opportunity to shower separately from other inmates.

No inmates identified as transgender or intersex during the onsite phase of the audit.

PREA Site Review: The auditor observed all inmates shower individually behind the privacy of a shower curtain. Other opportunities to shower separately would be made available upon request.

115.42 (g)

MDOC Policy 20-14-01 (page 17) The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

	<p>The PREA Compliance Manager confirmed the facility does not have a special housing unit for lesbian, gay, bisexual, transgender, or intersex inmates.</p> <p>No inmates identified as gay, bisexual, transgender, or intersex during the onsite phase of the audit.</p> <p>Conclusion and Corrective Action: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding use of screening information. Corrective action is complete.</p> <p>115.42 (a) The newly implemented risk screen considers risk-based housing decisions and eligibility for work and programming assignments (April 12, 2023).</p>
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115.43	Protective Custody
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Warden 2. Staff Responsible for Risk Screening 3. Staff who Supervise Inmates in Segregated Housing 4. Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) - none <p>Site Review Observations: Observations during on-site review of physical plant</p> <p>Findings (By Provision):</p> <p>115.43 (a) PAQ: The agency has a policy prohibiting the placement of 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.</p> <p>The number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0</p>

MDOC Policy 20-14-01 (page 18) Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.

The Warden confirmed agency policy prohibit placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are no available alternative means of separation from potential abusers.

115.43 (b)

MDOC Policy 20-14-01 (page 18) Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:

- (1) The opportunities that have been limited;
- (2) The duration of the limitation; and
- (3) The reasons for such limitations.

No inmates were in segregated housing (for risk of sexual victimization/who allege to have suffered sexual abuse) during the onsite phase of the audit.

115.43 (c)

PAQ: In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: 0

MDOC Policy 20-14-01 (page 18) The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

The Warden confirmed inmates at high risk for sexual victimization or who have alleged sexual abuse are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged.

Staff Who Supervise Inmates In Segregated Housing confirmed inmates are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged.

No inmates were in segregated housing (for risk of sexual victimization/who allege to have suffered sexual abuse) during the onsite phase of the audit.

115.43 (d)

PAQ: From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case

	<p>files that include BOTH:</p> <ol style="list-style-type: none"> 1. A statement of the basis for facility's concern for the inmate's safety; and 2. The reason or reasons why alternative means of separation could not be arranged: <p>N/A</p> <p>MDOC Policy 20-14-01 (page 18) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document:</p> <ol style="list-style-type: none"> (1) The basis for the facility's concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged. <p>115.43 (e)</p> <p>MDOC Policy 20-14-01 (page 18) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.</p> <p>Staff Who Supervise Inmates In Segregated Housing confirmed once an inmate is assigned to involuntary segregated housing, the facility reviews the inmate's circumstances every 30 days to determine if continued placement in involuntary segregated housing is needed. He elaborated that the facility has not had any involuntary segregated housing.</p> <p>No inmates were in segregated housing (for risk of sexual victimization/who allege to have suffered sexual abuse) during the onsite phase of the audit.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding protective custody. No corrective action is required.</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. PREA Posters and Pamphlets (English and Spanish) 3. MCRCF Pre-Audit Questionnaire (PAQ) <p>Documents (Corrective Action):</p> <ol style="list-style-type: none"> 1. Updated Poster (English and Spanish) - May 17, 2023 <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator

2. Random Sample of Staff
3. Random Sample of Inmates
4. Inmates who Reported a Sexual Abuse (none)

Site Review Observations:

Observations during on-site review of physical plant

Findings (By Provision):

115.51 (a)

PAQ: The agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about:

1. Sexual abuse or sexual harassment;
2. Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment;
3. Staff neglect or violation of responsibilities that may have contributed to such incidents.

MDOC Policy 20-14-01 (page 18) The agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Staff interviews confirmed inmates can privately report sexual abuse or sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment by calling the hotline number or contacting the PREA investigator. Inmates stated they would report sexual abuse or sexual harassment that happened to them or someone else by telling staff, calling the hotline, or writing a grievance.

PREA Site Review: The auditor reviewed the telephone system and other reporting methods. Internally, the inmates can file a grievance with the kiosk and report to staff. The auditor successfully tested internal reporting by filing a grievance with the assistance of an inmate. The PREA investigator responded to the grievance the same day. Additionally, the facility provided an example of a grievance being submitted through the kiosk. Kiosks are centrally located next to the entrance of each housing unit and inmates also have access to tablets as needed.

The updated poster informs inmates of the following internal ways to report (May 17, 2023):

- Report to any staff, volunteer, contractor, or medical or mental health staff.
- Submit a grievance or sick call slip.
- Report to the PREA Coordinator or PREA Compliance Manager.

115.51 (b)

PAQ: The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. The agency has a policy requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the

Department of Homeland Security.

MDOC Policy 20-14-01 (page 18) The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and

sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

MCRCF does not detain persons solely for civil immigration purposes.

PREA Site Review: The auditor was unsuccessful in calling the external numbers provided on the posters and kiosk. The #6500 number was not in working order and the other number provided was the main MDOC number, 601-359-5600.

Through corrective action, the facility updated the posters (May 18, 2023). The updated posters inform inmates the Mississippi Coalition Against Sexual Assault (MCASA) is an external reporting number, at 888-987-9011. Additionally, the facility has provided verbal confirmation that the #6500 number is now in working order.

115.51 (c)

PAQ: The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff are required to document verbal reports. The time frame that staff are required to document verbal reports: 24 hours

MDOC Policy 20-14-01 (page 18) Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

Staff interviewed confirmed verbal reports would be documented.

Inmates interviewed confirmed they can make reports of sexual abuse or sexual harassment either in person or in writing and someone else (for example, a friend or relative) can make the report for them so that they do not have to be named.

115.51 (d)

PAQ: The agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates. Staff are informed of these procedures in the following ways: posters

Staff may contact MDOC or MCASA.

MDOC Policy 20-14-01 (page 18) The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.

Staff interviews revealed they would privately report sexual abuse and sexual harassment of inmates by calling the hotline.

	<p>Conclusion and Corrective Action: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmate reporting. Corrective action is complete.</p> <p>115.51 (b) The MDOC PREA hotline number was not in working order during the onsite phase of the audit. The phones have been repaired and the number is in working order (May 17, 2023).</p> <p>Posters were updated to indicate MCASA is an external entity for reporting sexual abuse and sexual harassment (May 17, 2023).</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews: Inmates who Reported a Sexual Abuse - none</p> <p>Site Review Observations: Observations during on-site review of physical plant</p> <p>Findings (By Provision):</p> <p>115.52 (a) PAQ: The agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse.</p> <p>The auditor observed the PREA posters inform inmates they can report sexual abuse or sexual harassment by submitting a grievance. Signage is readable and accessible, consistent, placed in each housing unit, and through corrective action, is accurate. The auditor successfully tested internal reporting by filing a grievance with the assistance of an inmate. The PREA investigator responded to the grievance the same day. Additionally, the facility provided an example of a grievance being submitted through the kiosk. Kiosks are centrally located next to the entrance of each housing unit and inmates also have access to tablets as needed.</p> <p>115.52 (b) PAQ: Agency policy or procedure allows an inmate to submit a grievance regarding an</p>

allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred. Agency policy does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.

MDOC Policy 20-14-01 (page 19) The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.

115.52 (c)

PAQ: The agency's policy and procedure allow an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.

MDOC Policy 20-14-01 (page 19) The agency shall ensure that -

(1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff

member who is the subject of the complaint, and

(2) Such grievance is not referred to a staff member who is the subject of the complaint.

115.52 (d)

PAQ: The agency has policy and procedures that require that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.

In the past 12 months:

1. The number of grievances that were filed that alleged sexual abuse: 0

2. The number of grievances alleging sexual abuse that reached final decision within 90 days after being filed: 0

3. The number of grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days: 0

MDOC Policy 20-14-01 (page 19) The agency shall 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 shall not include time consumed by inmates in preparing any administrative appeal. The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. 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, the inmate may consider the absence of a response to be a denial at that level.

115.52 (e)

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

The number of the grievances alleging sexual abuse filed by inmates in the past 12 months in which the resident declined third-party assistance, containing documentation of the inmates' decision to decline: 0

MDOC Policy 20-14-01 (page 19) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. 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. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.

115.52 (f)

PAQ: The agency has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. Agency policy and procedures for emergency grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours.

The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months: 0

Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within five days.

The number of the grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within five days: 0

MDOC Policy 20-14-01 (page 20) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

	<p>115.52 (g) PAQ: The agency has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith.</p> <p>In the past 12 months, the number of resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith: 0</p> <p>MDOC Policy 20-14-01 (page 20) The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding exhaustion of administrative remedies. No corrective action is required.</p>
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MOU: Mississippi Coalition Against Sexual assault (MCASA) 3. PREA Poster (outside victim advocates for emotional support services) 4. MCRFC Pre-Audit Questionnaire (PAQ) <p>Documents (Corrective Action):</p> <ol style="list-style-type: none"> 1. Updated PREA Poster – May 18, 2023 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Warden 2. PREA Compliance Manager 3. Random Sample of Inmates 4. Inmates who Reported a Sexual Abuse – none present <p>Findings (By Provision):</p> <p>115.53 (a) PAQ: The facility provides inmates access to outside victim advocates for emotional support services related to sexual abuse by:</p> <ol style="list-style-type: none"> 1. Giving inmates (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where

available) of local, State, or national victim advocacy or rape crisis organizations.
2. Enabling reasonable communication between inmates and these organizations, in as confidential a manner as possible.

MDOC Policy 20-14-01 (page 21) The facility shall 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, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

MCRCF does not detain persons solely for civil immigration purposes.

Contact information for outside victim advocate services for emotional support related to sexual abuse is included in the PREA poster.

Mississippi Coalition Against Sexual assault (MCASA):

- Phone: 888-987-9011
- Mailing Address: P.O. Box 4172, Jackson, MS 39296

PREA Site Review: The auditor tested the telephone system and confirmed calls can be made to MCASA.

Inmates interviewed were mostly unaware of services available outside of this facility for dealing with sexual abuse. Through corrective action, posters were updated to improve awareness, May 18, 2023.

115.53 (b)

PAQ: The facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law.

MDOC Policy 20-14-01 (page 21) The facility shall 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.

PREA Site Review: The auditor observed the posters did not inform inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored and associated mandatory reporting laws. Through corrective action, the posters were updated to be fully inclusive of the standard provision requirements, May 18, 2023.

115.53 (c)

PAQ: The agency or facility maintains memoranda of understanding (MOUs) or other

	<p>agreements with community service providers that are able to provide inmates with emotional support services related to sexual abuse. The agency or facility maintains copies of those agreements.</p> <p>MDOC Policy 20-14-01 (page 21) The agency shall 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. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.</p> <p>The facility has an MOU with the Mississippi Coalition Against Sexual assault (MCASA) to provide inmates with emotional support services related to sexual abuse.</p> <p>Conclusion and Corrective Action: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmates access to outside confidential support services and legal representation. Corrective action is complete.</p> <p>115.53 (b) The posters were updated to indicate the extent to which communications with outside support services will be monitored and mandatory reporting laws, May 18, 2023.</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Website: Prison Rape Elimination Act (PREA) Mississippi Department of Corrections (ms.gov) 3. PREA Poster 4. MCRFC Pre-Audit Questionnaire (PAQ) <p>§115.54 PAQ: The agency or facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment.</p> <p>MDOC Policy 20-14-01 (page 22) The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.</p>

	<p>The MDOC website states sexual abuse can be reported to the Mississippi Coalition Against Sexual Assault by writing, P.O. Box 4172, Jackson, MS 39296 or calling 888-987-9011.</p> <p>The facility PREA posters additionally state reports can be made directly to MDOC, at 601-359-5600.</p> <p>The auditor successfully tested third-party reporting by calling the MCASA hotline. The auditor was unsuccessful in tested third-party reporting by calling the MDOC number provided.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding third-party reporting. No corrective action is required.</p>
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Warden 2. PREA Coordinator 3. Random Sample of Staff 4. Medical Staff <p>Findings (By Provision): 115.61 (a) PAQ: The agency requires all staff to report immediately and according to agency policy:</p> <ol style="list-style-type: none"> 1. Any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. 2. Any retaliation against inmates or staff who reported such an incident. 3. Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. <p>MDOC Policy 20-14-01 (page 22) The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information</p>

regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Interviews with staff confirmed the requirement to report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

115.61 (b)

PAQ: Apart from reporting to designated supervisors or officials and designated State or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

MDOC Policy 20-14-01 (page 22) Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.

Staff interviewed were knowledgeable that policy prohibits them from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

115.61 (c)

MDOC Policy 20-14-01 (page 22) Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

An interview with the RN confirmed she discloses the limitations of confidentiality and her duty to report, at the initiation of services to an inmate. She confirmed she is required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment. She stated she has never become aware of such incidents.

115.61 (d)

MDOC Policy 20-14-01 (page 22) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

The Warden and PREA Coordinator confirmed the facility does not accept persons under the age of 18.

	<p>115.61 (e) MDOC Policy 20-14-01 (page 22) The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.</p> <p>The Warden confirmed allegations of sexual abuse and sexual harassment, including third-party and anonymous reports are reported to designated facility investigators.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding staff and agency reporting duties. No corrective action is required.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Agency Head or Designee 2. Warden 3. Random Sample of Staff <p>Findings:</p> <p>PAQ: When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmates (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).</p> <p>In the past 12 months: The number of times the agency or facility determined that an inmate was subject to substantial risk of imminent sexual abuse: 0</p> <p>MDOC Policy 20-14-01 (page 23) When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</p> <p>The Warden confirmed immediate actions will be taken to protect an inmate who is subject to a substantial risk of imminent sexual abuse. Protective measures would include moving a resident and reassignment to a new area to keep them safe under surveillance.</p>

	<p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding agency protection duties. No corrective action is required.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Agency Head Designee 2. Warden <p>Findings (By Provision):</p> <p>115.63 (a) PAQ: The agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.</p> <p>In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility: 0</p> <p>MDOC Policy 20-14-01 (page 24) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.</p> <p>115.63 (b) PAQ: Agency policy requires that the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>MDOC Policy 20-14-01 (page 24) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>115.63 (c) PAQ: The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.</p> <p>MDOC Policy 20-14-01 (page 24) The agency shall document that it has provided such</p>

	<p>notification.</p> <p>115.63 (d) PAQ: Agency/facility policy requires that allegations received from other facilities/ agencies are investigated in accordance with the PREA standards.</p> <p>In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities: 0</p> <p>MDOC Policy 20-14-01 (page 24) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.</p> <p>The Warden confirmed when the facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred in the facility, the agency shall open an investigation and assist the other agency with any findings. There are no examples of another facility or agency reporting such allegations.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding reporting to other confinement facilities. No corrective action is required.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Staff Straining Records 3. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Staff First Responders 2. Random Sample of Staff 3. Inmates who Reported a Sexual Abuse - none present <p>Findings (By Provision):</p> <p>115.64 (a) PAQ: The agency has a first responder policy for allegations of sexual abuse.</p> <ol style="list-style-type: none"> 1. The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report separate the alleged victim and abuser.

2. The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
3. The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.
4. The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.

In the past 12 months, the number of allegations that a inmates was sexually abused:
0

Of these allegations:

1. The number of times the first security staff member to respond to the report separated the alleged victim and abuser: 0
2. The number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence: 0
3. The number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence: 0
4. The number of times the first security staff member to respond to the report requested 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: 0
5. The number of times the first security staff member to respond to the report ensured 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: 0

MDOC Policy 20-14-01 (page 24) Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to:

- (1) Separate the alleged victim and abuser;
- (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
- (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
- (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

	<p>Staff were knowledgeable of their first responder duties if they are the first person to be alerted that an inmate has allegedly been the victim of sexual abuse.</p> <p>115.64 (b) PAQ: The agencies policy requires that if the first staff responder is not a security staff member, that responder shall be required to:</p> <ol style="list-style-type: none"> 1. Request that the alleged victim not take any actions that could destroy physical evidence. 2. Notify security staff. <p>Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: 0</p> <p>MDOC Policy 20-14-01 (page 24) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.</p> <p>The staff interviewed were knowledgeable of their first responder duties. Interviews revealed staff would not share sensitive information with other staff and inmates.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding staff first responder duties. No corrective action is required.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Sexual Assault Response and Containment Checklist 3. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interview:</p> <ol style="list-style-type: none"> 1. Warden <p>Findings: PAQ: The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>MDOC Policy 20-14-01 (page 25) The facility shall develop a written institutional plan to coordinate actions 1185 taken in response to an incident of sexual abuse, among</p>

	<p>staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>The auditor reviewed the Sexual Assault Response and Containment Checklist and found it to be inclusive of the actions that would be taken if there were to be an incident of sexual abuse. The plan clearly defines the roles and responsibilities of each person involved and the procedures to be followed in detail. Roles addressed include the first responder, shift supervisor, medical staff, and investigator.</p> <p>The Warden confirmed the facility has a coordinated response plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, and facility leadership. He stated the Sexual Assault Response Team would be called into effect. The SART team consist of facility medical responding officers, PREA Compliance Manager, PREA investigators, and upper management staff.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding a coordinated response to an incident of sexual abuse. No corrective action is required.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interview:</p> <ol style="list-style-type: none"> 1. Agency Head or Designee <p>Findings (By Provision):</p> <p>115.66 (a)</p> <p>PAQ: The agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since the last PREA audit.</p> <p>MDOC Policy 20-14-01 (page 25) Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates</p>

	<p>pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>115.66 (b) MDOC Policy 20-14-01 (page 25) Nothing in this standard shall restrict the entering into or renewal of agreements that govern:</p> <p>(1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115. 72 and 115. 76; or</p> <p>(2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding the preservation of ability to protect inmates from contact with abusers. No corrective action is required.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. PREA Retaliation, Prevention and Monitoring Form 3. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Agency Head Designee (Warden) 2. Designated Staff Member Charged with Monitoring Retaliation (PREA Compliance Manager) 3. Inmates who Reported a Sexual Abuse - none present <p>Findings (By Provision):</p> <p>115.67 (a) PAQ: The agency has 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.</p> <p>The Agency has designated a staff member with monitoring for possible retaliation. The name of the staff member: Chris Cochran The title of the staff member: Captain (PREA Compliance Manager)</p>

MDOC Policy 20-14-01 (page 26) The agency shall establish 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 and shall designate which staff members or departments are charged with monitoring retaliation.

115.67 (b)

The agency shall 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.

MDOC Policy 20-14-01 (page 26) The agency shall 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.

The interview with the Warden confirmed the agency protects inmates and staff from retaliation for sexual abuse or sexual harassment allegations through housing changes and transfers, removal of alleged abusers, and emotional support services.

The Designated Staff Member Charged with Monitoring Retaliation (PREA Compliance Manager) stated the role he plays in preventing retaliation against inmates and staff who report sexual abuse or sexual harassment, or against those who cooperate with sexual abuse or sexual harassment investigations includes making requests for transfers, advise housing assignments, and offering offender contact with MCASA for emotional support services. The different measures he takes to protect those inmates and staff from retaliation includes removal of abuser to administrative segregation pending investigation. The victim would be moved to another housing assignment, placed near window, or under camera for observation. He would offer contact information to MCASA. He confirmed he initiates contact with inmates who have reported sexual abuse for 90 days or longer if needed.

115.67 (c)

PAQ: The agency and/or facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff.

The length of time that the agency and/or facility monitors the conduct or treatment: 90 days

The agency/facility acts promptly to remedy any such retaliation. The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

The number of times an incident of retaliation occurred in the past 12 months: 0

MDOC Policy 20-14-01 (page 26) For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and 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 and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

The Warden stated measures he would take when he suspects retaliation would be to investigate, change housing if substantiated, and place residents under video and officer monitoring.

The PREA Compliance Manager stated things he looks for to detect possible retaliation includes monitoring all offenders and officers involved and reports from both officers and offenders. He stated he would monitor the conduct and treatment of inmates and staff who report the sexual abuse of inmates or were reported to have suffered sexual abuse for 90 days, but longer if necessary.

The auditor reviewed the PREA Retaliation, Prevention and Monitoring Form. The form would be used for documenting monitoring of inmates.

115.67 (d)

MDOC Policy 20-14-01 (page 26) In the case of inmates, such monitoring shall also include periodic status checks.

The PREA Compliance Manager stated monitoring would include status checks for 90 days.

115.67 (e)

MDOC Policy 20-14-01 (page 26) If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

The Warden confirmed the agency protects an individual who cooperates with an investigation if they express a fear of retaliation. The agency shall take appropriate measures such as removing abusers from the facility and employment termination if necessary.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding agency protection against retaliation. No corrective action is required.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Documents:

1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003
2. MCRCF Pre-Audit Questionnaire (PAQ)

Interviews:

1. Warden
2. Staff who Supervise Inmates in Segregated Housing

Findings:

PAQ: The agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse 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.

The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0

In the past 12 months, the number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: 0

From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH:

- A statement of the basis for facility's concern for the inmate's safety; and
 - The reason or reasons why alternative means of separation could not be arranged:
- N/A

If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.

MDOC Policy 20-14-01 (page 25) Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of §115.43.

The Warden confirmed agency policy prohibits placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are no available alternative means of separation from potential abusers. Inmates at high risk for sexual victimization or who have alleged sexual abuse not placed in involuntary segregated housing. There have been no circumstances in which segregated housing was used to protect an inmate who was alleged to have suffered sexual abuse within the past 12 months.

	<p>The PREA Compliance Manager confirmed when inmates are placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, they still have access to programs, privileges, education, and work opportunities (to the extent possible). If the facility restricts access to programs, privileges, education, or work opportunities, the facility documents and opportunities that have been limited, the duration of the limitations, and the reasons for such limitations. Inmates are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. Once an inmate is assigned to involuntary segregated housing, the facility reviews the inmate's circumstances every 30 days to determine if continued placement in involuntary segregated housing is needed. He stated there has not been any involuntary segregated housing within the past 12 months.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding post-allegation protective custody. No corrective action is required.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. Training Records 3. Certificate: PREA Investigator Training for Allegations of Inmate Sexual Abuse 4. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Warden 2. PREA Coordinator 3. PEA Compliance Manager 4. Investigative Staff 5. Inmates who Reported a Sexual Abuse - none <p>Findings (by provision):</p> <p>115.71 (a)</p> <p>PAQ: The agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>MDOC Policy 20-14-01 (page 27) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous</p>

reports.

The investigative staff stated he immediately initiates an investigation following an allegation of sexual abuse or sexual harassment. Anonymous or third-party reports of sexual abuse or sexual harassment are investigated in the same manner.

There are no investigative reports for allegations of sexual abuse or sexual harassment.

115.71 (b)

MDOC Policy 20-14-01 (page 27) Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34.

The investigative staff confirmed he received training specific to conducting sexual abuse and sexual harassment investigations in confinement settings. He stated he received the training required by §115.31 and completed PREA Investigator Training for Allegations of Inmate Sexual Abuse presented by the Legal and Liability Risk Management Institute, April 12, 2023.

The auditor reviewed the training documents and certificate to verify compliance with the training requirements.

115.71 (c)

MDOC Policy 20-14-01 (page 27) Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

The investigative staff stated the first step in initiating an investigation is conducting interviews.

115.71 (d)

MDOC Policy 20-14-01 (page 27) When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

The investigative staff confirmed when he discovers evidence that a prosecutable crime may have taken place, he consults with prosecutors before conducting compelled interviews.

115.71 (e)

MDOC Policy 20-14-01 (page 27) The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of such an allegation.

The investigative staff confirmed the basis the credibility of an alleged victim, suspect, or witness on an individual basis and not based on the person's status as inmate or staff. Historical information and factual evidence is taken into consideration. He stated under no circumstances would he require an inmate who alleges sexual abuse to submit to a polygraph examination or truth-telling device as a condition for proceeding with an investigation.

115.71 (f)

MDOC Policy 20-14-01 (page 27) Administrative investigations:

(1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and

(2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

The investigative staff stated actions taken in an administrative investigation to determine whether staff actions or failures to act contributed to the sexual abuse. He would keep detailed reports and share this information with higher commands in order to determine if disciplinary actions are in order and share information with training staff. He confirmed he documents administrative investigations in written reports. The reports include investigative findings, persons involved, location, times, and dates.

115.71 (g)

MDOC Policy 20-14-01 (page 27) Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

The investigative staff stated criminal investigations are documented. The reports contain descriptions of physical, testimonial, and documentary evidence, as well as attached copies of documentary evidence.

115.71 (h)

PAQ: Substantiated allegations of conduct that appear to be criminal are referred for prosecution. The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA: 0

MDOC Policy 20-14-01 (page 27) Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

The investigative staff stated he refers cases for prosecution when the quality of evidence appears to support criminal prosecution.

115.71 (i)

PAQ: The agency retains all written reports pertaining to the administrative or

	<p>criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.</p> <p>MDOC Policy 20-14-01 (page 27) The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.</p> <p>115.71 (j) MDOC Policy 20-14-01 (page 27) The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.</p> <p>The investigative staff stated when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation into his/her conduct the investigation would continue until it is completed.</p> <p>115.71 (l) MDOC Policy 20-14-01 (page 27) When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.</p> <p>The PREA Coordinator stated the agency has internal investigators. The Warden and PREA Compliance Manager confirmed when outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators. The PREA Compliance Manager stated outside agencies will communicate with the PREA investigator of progress in the case and the findings. Typically, this is done via email or the State inmate tracking system Offendertrak.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding criminal and administrative agency investigations. No corrective action is required.</p>
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115.72	<p>Evidentiary standard for administrative investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interview:</p> <ol style="list-style-type: none"> 1. Investigative Staff
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	<p>Findings:</p> <p>PAQ: The agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>MDOC Policy 20-14-01 (page 28) The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>The investigative staff confirmed this policy.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding evidentiary standard for administrative investigations. No corrective action is required.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. PREA Incident Briefing (notification of outcome of an investigation) 3. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Warden 2. Investigative Staff 3. Inmates who Reported a Sexual Abuse - none <p>Findings (by provision):</p> <p>115.73 (a)</p> <p>PAQ: The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.</p> <p>In the past 12 months:</p> <ol style="list-style-type: none"> 1. The number of criminal and/or administrative investigations of alleged inmates sexual abuse that were completed by the agency/facility: 0 2. Of the investigations that were completed of alleged sexual abuse, the number of inmates who were notified, verbally or in writing, of the results of the investigation: N/A

MDOC Policy 20-14-01 (page 28) Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

The Warden and Investigator confirmed that when an inmate makes an allegation of sexual abuse, the inmate must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation.

115.73 (b)

PAQ: If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the inmate of the outcome of the investigation.

In the past 12 months:

1. The number of investigations of alleged inmates sexual abuse in the facility that were completed by an outside agency: 0
2. Of the outside agency investigations of alleged sexual abuse that were completed, the number of inmates alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation: N/A

MDOC Policy 20-14-01 (page 29) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.

115.73 (c)

PAQ: Following an inmate's allegation that a staff member has committed sexual abuse against the inmates, the agency/facility subsequently informs the inmate (unless the agency/facility has determined that the allegation is unfounded) whenever:

1. The staff member is no longer posted within the inmate's unit;
2. The staff member is no longer employed at the facility;
3. The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
4. The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

There has not been a substantiated or unsubstantiated complaint (i.e., not unfounded) of sexual abuse committed by a staff member against an inmate in the past 12 months.

MDOC Policy 20-14-01 (page 29) Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:

- (1) The staff member is no longer posted within the inmate's unit;
- (2) The staff member is no longer employed at the facility;
- (3) The agency learns that the staff member has been indicted on a charge related to

sexual abuse within the facility; or

(4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

The auditor reviewed PREA Incident Briefing form is inclusive of the standard provision requirements.

115.73 (d)

PAQ: Following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever:

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

MDOC Policy 20-14-01 (page 29) Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever:

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

The auditor reviewed PREA Incident Briefing form is inclusive of the standard provision requirements.

115.73 (e)

PAQ: The agency has a policy that all notifications to inmates described under this standard are documented.

In the past 12 months:

1. The number of notifications to inmates that were made pursuant to this standard: 0
2. The number of those notifications that were documented: N/A

MDOC Policy 20-14-01 (page 29) All such notifications or attempted notifications shall be documented.

The auditor reviewed PREA Incident Briefing form would be signed by a victim and would document notifications.

115.73 (f)

MDOC Policy 20-14-01 (page 29) An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding reporting to inmates. No corrective action is required.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Findings (by provision):</p> <p>115.76 (a) PAQ: Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>MDOC Policy 20-14-01 (page 29) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>115.76 (b) In the past 12 months:</p> <ol style="list-style-type: none"> 1. The number of staff from the facility that have violated agency sexual abuse or sexual harassment policies: 0 2. The number of those staff from the facility that have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: N/A <p>MDOC Policy 20-14-01 (page 29) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>115.76 (c) PAQ: Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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.</p> <p>In the past 12 months, the number of staff from the facility that have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies: 0</p> <p>MDOC Policy 20-14-01 (page 30) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>115.76 (d)</p>

	<p>PAQ: All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 0</p> <p>MDOC Policy 20-14-01 (page 30) All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding disciplinary sanctions for staff. No corrective action is required.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interview:</p> <ol style="list-style-type: none"> 1. Warden <p>Findings (by provision): 115.77 (a)</p> <p>PAQ: Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates.</p> <p>In the past 12 months, no contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.</p> <p>MDOC Policy 20-14-01 (page 30) Any contractor or volunteer who engages in sexual</p>

	<p>abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>115.77 (b) PAQ: The facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>MDOC Policy 20-14-01 (page 30) The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>The Warden stated actions the facility would take in the case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer would include contacting the employer for a replacement or terminating the contract if necessary.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding corrective action for contractors and volunteers. No corrective action is required.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Warden <p>Findings (by provision):</p> <p>115.78 (a) PAQ: Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the inmates engaged in inmates-on-inmates sexual abuse. Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmates-on-inmates sexual abuse.</p>

In the past 12 months:

1. The number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility: 0
2. The number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility: 0

MDOC Policy 20-14-01 (page 30) Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

115.78 (b)

MDOC Policy 20-14-01 (page 31) Sanctions shall be 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.

The Warden stated disciplinary sanctions inmates are subject to following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse would include Rule Violation Reports for inappropriate sexual behavior with another person, fiscal action against another person where no fiscal injury has occurred, or assaultive action against any person resulting in serious injury. Sanctions are proportionate to the nature and circumstances of the abuses committed, the inmates' disciplinary histories, and the sanctions imposed for similar offenses by other inmates with similar histories.

115.78 (c)

MDOC Policy 20-14-01 (page 31) The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

The Warden stated mental disability or mental illness is considered when determining sanctions.

115.78 (d)

PAQ: The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. If the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to any rewards-based behavior management system or other behavior based incentives. Access to general programming or education is not conditional on participation in such interventions.

MDOC Policy 20-14-01 (page 31) If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

	<p>115.78 (e) PAQ: The agency disciplines inmates for sexual contact with staff only upon finding that the staff member did not consent to such contact.</p> <p>MDOC Policy 20-14-01 (page 31) The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.</p> <p>115.78 (f) PAQ: The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>MDOC Policy 20-14-01 (page 31) For the purpose of disciplinary action, 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>115.78 (g) PAQ: The agency prohibits all sexual activity between inmates. The agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.</p> <p>MDOC Policy 20-14-01 (page 31) An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding interventions and disciplinary sanctions for inmates. No corrective action is required.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Documents (Corrective Action):</p> <ol style="list-style-type: none"> 1. Follow-up meetings (March 17, 2023)

Interviews:

1. Staff Responsible for Risk Screening
2. Medical and Mental Health Staff
3. Inmates who Disclose Sexual Victimization at Risk Screening

Findings (by provision):

115.81 (a) and (c)

PAQ: All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.341 have been offered a follow-up meeting with a medical or mental health practitioner. The follow-up meetings were offered within 14 days of the intake screening. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

In the past 12 months, the number of inmates who disclosed prior victimization during screening who were offered a follow up meeting with a medical or mental health practitioner: 0%

MDOC Policy 20-14-01 (page 32) If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

During the onsite phase of the audit, one inmate was identified as reporting prior sexual victimization during risk screening. He stated he was not offered a follow-up meeting. Through corrective action, the inmate was offered a follow-up meeting with MCASA (March 17, 2023).

115.81 (b)

PAQ: All inmates at this facility who have previously perpetrated sexual abuse, as indicated during the screening pursuant to §115.41 have been offered a follow-up meeting with a medical or mental health. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

In the past 12 months, the number of inmates who have previously perpetrated sexual abuse, as indicated during the screening who were offered a follow up meeting with a medical or mental health practitioner: 0%

MDOC Policy 20-14-01 (page 32) If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

115.81 (d)

PAQ: Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners.

	<p>MDOC Policy 20-14-01 (page 32) Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, State, or local law.</p> <p>The auditor observed that medical information is securely retained.</p> <p>115.81 (e) PAQ: 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 inmates is under the age of 18.</p> <p>MDOC Policy 20-14-01 (page 32) Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.</p> <p>An interview with the RN confirmed informed consent be obtained from inmates before reporting about prior sexual victimization that did not occur in an institutional setting. She confirmed informed consent from inmates is required for inmates 18 and older. The facility doesn't house minors.</p> <p>Conclusion and Corrective Action: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding medical and mental health screenings; history of sexual abuse. Corrective action is complete.</p> <p>115.81 (a) The facility must provide follow-up meetings in compliance with the standard provision requirements. The follow-up meeting was offered with MCASA (March 17, 2023).</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p>

1. Medical and Mental Health Practitioners
2. Inmates who Reported a Sexual Abuse
3. Security Staff and Non-Security Staff First Responders

Site Review Observations:

Observations during on-site review of physical plant

Findings (by provision):

115.82 (a)

PAQ: Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health practitioners maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.

MDOC Policy 20-14-01 (page 33) Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

The RN stated inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of these services is determined according to her professional judgment, as well as policy. She stated victims of sexual abuse will be sent to an appropriate facility that is specialized in sexual abuse.

115.82 (b)

MDOC Policy 20-14-01 (page 33) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

Staff were knowledgeable of their first responder duties if they are the first person to be alerted that an inmate has allegedly been the victim of sexual abuse.

115.82 (c)

PAQ: Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Medical and mental health practitioners maintain secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis,

	<p>in accordance with professionally accepted standards of care, where medically appropriate.</p> <p>MDOC Policy 20-14-01 (page 33) Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p> <p>The RN confirmed victims of sexual abuse are offered timely information about and timely access to sexually transmitted infection prophylaxis.</p> <p>115.82 (d) PAQ: Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>MDOC Policy 20-14-01 (page 33) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the agency and facility is fully compliant with this standard regarding access to emergency medical and mental health services. No corrective action is required.</p>
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<p>115.83</p>	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p>
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Medical and Mental Health Staff 2. Inmates who Reported a Sexual Abuse - none <p>Site Review Observations: Observations during on-site review of physical plant</p> <p>Findings (by provision): 115.83 (a)</p>

PAQ: The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

MDOC Policy 20-14-01 (page 33) The facility shall 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.

The auditor observed medical facilities during the site review.

115.83 (b)

MDOC Policy 20-14-01 (page 33) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

The RN interviewed stated evaluation and treatment of inmates who have been victimized would include medical treatment and transfer to hospital as needed.

115.83 (c)

MDOC Policy 20-14-01 (page 33) The facility shall provide such victims with medical and mental health services consistent with the community level of care.

The RN interviewed stated the medical and mental health services offered consistent with community level of care.

115.83 (d) N/A

Marion County Regional Correctional Facility is an all-male facility.

115.83 (e) N/A

Marion County Regional Correctional Facility is an all-male facility.

115.83 (f)

PAQ: Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

MDOC Policy 20-14-01 (page 33) Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

The RN confirmed victims of sexual abuse shall be offered tests for sexually transmitted infections as medically appropriate.

115.83 (g)

PAQ: Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

MDOC Policy 20-14-01 (page 34) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

	<p>115.83 (h)</p> <p>PAQ: If the facility attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.</p> <p>MDOC Policy 20-14-01 (page 34) All prisons shall attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding ongoing medical and mental health care for sexual abuse victims and abusers. No corrective action is required.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Interviews:</p> <ol style="list-style-type: none"> 1. Warden 2. PREA Compliance Manager 3. Incident Review Team <p>Findings (by provision):</p> <p>115.86 (a)</p> <p>PAQ: The facility conducts a sexual abuse incident review at the conclusion of every sexual abuse criminal or administrative investigation unless the allegation has been determined to be unfounded.</p> <p>In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents: 0</p> <p>MDOC Policy 20-14-01 (page 34) The facility shall 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.</p>

115.86 (b)

PAQ: The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.

In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents: 0

MDOC Policy 20-14-01 (page 34) Such review shall ordinarily occur within 30 days of the conclusion of the investigation.

115.86 (c)

PAQ: The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

MDOC Policy 20-14-01 (page 34) The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

The Warden confirmed the facility has a sexual abuse incident review team; the team includes upper-level management officials and allows for input from line supervisors, investigators, and medical staff. Reviews occur during upper staff and PREA meetings.

115.86 (d)

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

MDOC Policy 20-14-01 (pages 34-35) The review team shall:

- (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
- (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- (4) Assess the adequacy of staffing levels in that area during different shifts;
- (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

The Warden and PREA Compliance Manager were interviewed as members of the

	<p>sexual abuse incident review team. They confirmed the team considers whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility. The area in the facility where the incident allegedly occurred is examined to assess whether physical barriers in the area may enable abuse. Adequacy of staffing levels in the area is assessed for different shifts. They confirmed the team assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff.</p> <p>115.86 (e) PAQ: The facility implements the recommendations for improvement or documents its reasons for not doing so.</p> <p>MDOC Policy 20-14-01 (page 35) The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding sexual abuse incident reviews. No corrective action is required.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination: Documents:</p> <ol style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p>Findings (by provision): 115.87 (a) PAQ: The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice.</p> <p>MDOC Policy 20-14-01 (page 35) The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p>The auditor reviewed the Survey of Sexual Victimization Substantiated Incident Form</p>

(Adult) for verification the facility would collect accurate, uniform data for every allegation of sexual abuse.

115.87 (b)

PAQ: The agency aggregates the incident-based sexual abuse data at least annually. MDOC Policy 20-14-01 (page 35) The agency shall aggregate the incident-based sexual abuse data at least annually.

The facility reports no allegations or incidents of sexual abuse or sexual harassment in the past three years.

115.87 (c)

PAQ: The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization (SSV) conducted by the Department of Justice.

MDOC Policy 20-14-01 (page 35) The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

The auditor reviewed the Critical Incident Report Form and Survey of Sexual Victimization Substantiated Incident Form (Adult) for verification.

115.87 (d)

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

MDOC Policy 20-14-01 (page 35) 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.

115.87 (e) N/A

Marion County regional Correctional Facility does not contract for the confinement of its residents.

MDOC Policy 20-14-01 (page 35) The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

115.87 (f) N/A

The Department of Justice has not requested agency data.

MDOC Policy 20-14-01 (page 35) Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding data collection. No corrective action is required.

115.88	Data review for corrective action
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <hr/> <p data-bbox="256 344 1267 412">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="256 427 448 461">Documents:</p> <ol data-bbox="256 468 1131 539" style="list-style-type: none"> <li data-bbox="256 468 1131 501">1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 <li data-bbox="256 508 823 539">2. MCRCF Pre-Audit Questionnaire (PAQ) <p data-bbox="256 580 743 613">Document (Corrective Action):</p> <ol data-bbox="256 620 799 654" style="list-style-type: none"> <li data-bbox="256 620 799 654">1. 2022 Annual Report (May 19, 2023) <p data-bbox="256 694 437 728">Interviews:</p> <ol data-bbox="256 734 762 853" style="list-style-type: none"> <li data-bbox="256 734 762 768">1. Agency Head Designee (Warden) <li data-bbox="256 775 544 808">2. PREA Coordinator <li data-bbox="256 815 676 853">3. PREA Compliance Manager <p data-bbox="256 893 639 927">Findings (by provision):</p> <p data-bbox="256 934 424 967">115.88 (a)</p> <p data-bbox="256 974 1474 1093">PAQ: The agency reviews 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, and training, including:</p> <ul data-bbox="256 1099 1430 1261" style="list-style-type: none"> <li data-bbox="256 1099 655 1133">• Identifying problem areas; <li data-bbox="256 1140 983 1173">• Taking corrective action on an ongoing basis; and <li data-bbox="256 1180 1430 1261">• Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. <p data-bbox="256 1301 1474 1462">MDOC Policy 20-14-01 (page 36) The agency shall 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:</p> <ol data-bbox="256 1469 1445 1630" style="list-style-type: none"> <li data-bbox="256 1469 679 1503">(1) Identifying problem areas; <li data-bbox="256 1509 1007 1543">(2) Taking corrective action on an ongoing basis; and <li data-bbox="256 1550 1445 1630">(3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. <p data-bbox="256 1671 1445 1738">The PREA Coordinator confirmed the agency reviews data collected and aggregated and takes corrective action on an ongoing basis.</p> <p data-bbox="256 1778 1474 1939">The PREA Compliance Manager stated the data is reviewed during bi-annual PREA meetings to ensure that nothing needs to be added or changed. If the facility finds discrepancies in a review or data then corrective action is implemented, and a review is conducted to ensure the corrective action was completed and compliant.</p> <p data-bbox="256 1980 1461 2047">Through corrective action, the agency developed an annual report for 2022 (May 19, 2023).</p>

115.88 (b)

PAQ: The annual report includes a comparison of the current year's data and corrective actions with those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.

MDOC Policy 20-14-01 (page 36) Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.

Through corrective action, the agency developed an annual report for 2022 (May 19, 2023). The auditor observed that the annual report includes a comparison of the current year's data and corrective actions with those from prior years. Additionally, the annual report provides an assessment of the agency's progress in addressing sexual abuse.

115.88 (c)

PAQ: The agency makes its annual report readily available to the public at least annually. The reports are available upon request. The annual reports are approved by the agency head.

MDOC Policy 20-14-01 (page 36) The agency's report shall be approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means.

Through corrective action, the agency developed an annual report for 2022 (May 19, 2023). The annual report is approved by the agency head and is available to the public upon request. The agency does not have a website.

115.88 (d)

PAQ: When the agency redacts material from an annual report for publication the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. The agency indicates the nature of material redacted.

MDOC Policy 20-14-01 (page 36) The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

Through corrective action, the agency developed an annual report for 2022 (May 19, 2023). The auditor observed the annual report does not include personal identifying information.

Conclusion and Corrective Action:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding data review for corrective action. Corrective action is complete.

115.88 (a) - 115.88 (d)

The agency developed an annual report for 2022 (May 19, 2023). The annual report is fully inclusive of the standard provision requirements.

115.89	Data storage, publication, and destruction
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <p data-bbox="256 344 1267 412">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="256 427 448 461">Documents:</p> <ol data-bbox="256 468 1134 539" style="list-style-type: none"> 1. MDOC Policy 20-14-01: Prison Rape Elimination Act of 2003 2. MCRCF Pre-Audit Questionnaire (PAQ) <p data-bbox="256 580 743 613">Document (Corrective Action):</p> <ol data-bbox="256 620 799 654" style="list-style-type: none"> 1. 2022 Annual Report (May 19, 2023) <p data-bbox="256 694 639 728">Findings (by provision):</p> <p data-bbox="256 734 424 768">115.89 (a)</p> <p data-bbox="256 775 1370 848">PAQ: The agency ensures that incident-based and aggregate data are securely retained.</p> <p data-bbox="256 889 1461 1090">MDOC Policy 20-14-01 (page 37) Written policy, procedure, and practice provide that all case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained in accordance with an established schedule [4-4281-8].</p> <p data-bbox="256 1131 1222 1164">The PREA Coordinator stated data is security retained by the MDOC.</p> <p data-bbox="256 1205 424 1238">115.89 (b)</p> <p data-bbox="256 1245 1453 1402">PAQ: Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public, at least annually. Reports are available upon request. The agency does not have a website.</p> <p data-bbox="256 1442 1461 1599">MDOC Policy 20-14-01 (page 37) The agency shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means.</p> <p data-bbox="256 1639 1477 1756">Through corrective action, the agency developed an annual report for 2022 (May 19, 2023). The report includes aggregated sexual abuse data for 2020-2022. The report is available to the public upon request.</p> <p data-bbox="256 1796 424 1830">115.89 (c)</p> <p data-bbox="256 1836 1406 1910">PAQ: Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.</p> <p data-bbox="256 1951 1374 2024">MDOC Policy 20-14-01 (page 37) Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.</p>

	<p>Through corrective action, the agency developed an annual report for 2022 (May 19, 2023). The auditor observed the aggregated sexual abuse data does not include personal identifiers.</p> <p>115.89 (d) PAQ: The agency maintains sexual abuse data sexual abuse data collected pursuant to §115.387 for at least 10 years after the date of initial collection, unless Federal, State, or local law requires otherwise.</p> <p>MDOC Policy 20-14-01 (page 37) The agency shall maintain sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</p> <p>Conclusion and Corrective Action: Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding data storage, publication, and destruction. Corrective action is complete.</p> <p>115.89 (b) The agency developed an annual report for 2022 (May 19, 2023). The report includes aggregated sexual abuse data for 2020-2022. The report is available to the public upon request.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. MCRCF Pre-Audit Questionnaire (PAQ) 2. Interviews 3. Research 4. Policy Review 5. Document Review 6. Observations during onsite review of facility <p>Findings: During the three-year period starting on August 20, 2013, and the current audit cycle, Marion County Regional Correctional Facility ensured that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once. Also, one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited.</p> <p>The auditor was given access to, and the ability to observe, all areas of the Marion County Regional Correctional Facility. The auditor was permitted to conduct private</p>

	<p>interviews with inmates at the facility. The auditor sent an audit notice to the facility more than six weeks prior to the on-site audit. The facility confirmed the audit notice was posted by emailing pictures of the posted audit notices. The audit notice contained contact information for the auditor. The inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. No confidential information or correspondence was received.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the agency and facility is fully compliant with this standard regarding frequency and scope of audits. No corrective action is required.</p>
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115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. MCRCF Pre-Audit Questionnaire (PAQ) 2. Policy Review 3. Documentation Review 4. Interviews 5. Observations during onsite review of facility <p>All Marion County Regional Correctional Facility audit reports are available upon request. The facility does not have a website.</p> <p>Conclusion: Based upon the review and analysis of the available evidence, the auditor has determined the agency and facility is fully compliant with this standard regarding audit contents and findings. No corrective action is required.</p>

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

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

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

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

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

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

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

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

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

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

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

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

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

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

(f)		
	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