PREA Facility Audit Report: Final

Name of Facility: East Mississippi Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: 07/25/2024 **Date Final Report Submitted:** 12/16/2024

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.		
Auditor Full Name as Signed: Debra D. Dawson Date of Signature: 12,		16/2024

AUDITOR INFORMATION		
Auditor name:	Dawson, Debra	
Email:	dddawsonprofessionalaudits@gmail.com	
Start Date of On- Site Audit:	06/11/2024	
End Date of On-Site Audit:	06/13/2024	

FACILITY INFORMATION	
Facility name:	East Mississippi Correctional Facility
Facility physical address:	10641 U.S. 80, Meridian, Mississippi - 39307
Facility mailing address:	

Primary Contact

Name:	James Taylor	
Email Address:	James.Taylor1@mtctrains.com	
Telephone Number:	6014797308	

Warden/Jail Administrator/Sheriff/Director	
Name:	Jennifer Brown
Email Address:	jennifer.brown@mtctrains.com
Telephone Number:	9034040964

Facility PREA Compliance Manager		
Name:	James Taylor	
Email Address:	james.taylor1@mtctrains.com	
Telephone Number:	(601) 485-5255	
Name:	Michele Coffin	
Email Address:	leah.coffin@mtctrains.com	
Telephone Number:	(903) 655-3300	

Facility Health Service Administrator On-site	
Name:	Misty Mayfield
Email Address:	mayfield@vitalcorehs.com
Telephone Number:	6014804817

Facility Characteristics	
Designed facility capacity:	1350
Current population of facility:	1323
Average daily population for the past 12 months:	1288

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Mens/boys
Which population(s) does the facility hold? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	19-80
Facility security levels/inmate custody levels:	Minimum, Medium, High
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	277
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	58
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	27

AGENCY INFORMATION		
Name of agency:	Management & Training Corporation, Inc.	
Governing authority or parent agency (if applicable):		
Physical Address:	500 North Marketplace Drive, Centerville, Utah - 84014	
Mailing Address:		
Telephone number:	8016932600	

Agency Chief Executive Officer Information:				
Nam	e: Scott Marquardt	Scott Marquardt		
Email Addres	s:			
Telephone Numbe	r:			
Agency-Wide PREA Coordinator Information				
Name:	Heather Manuz	Email Address:	heather.manuz@mtctrains.com	
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:

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORM	ATION
GENERAL AUDIT INFORMATION	
On-site Audit Dates	
1. Start date of the onsite portion of the audit:	2024-06-11
2. End date of the onsite portion of the audit:	2024-06-13
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?	YesNo
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	MCASA PREA Advocate Coordinator Ms. Mellion Barton
AUDITED FACILITY INFORMATION	
14. Designated facility capacity:	1350
15. Average daily population for the past 12 months:	1307
16. Number of inmate/resident/detainee housing units:	26
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	Yes No Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit 1310 18. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit: 15 19. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit: 20. Enter the total number of inmates/ 43 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: 21. Enter the total number of inmates/ 12 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: 22. Enter the total number of inmates/ 14 residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit: 23. Enter the total number of inmates/ 0 residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: 24. Enter the total number of inmates/ 28 residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:

25. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0	
26. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	5	
27. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	45	
28. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0	
29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.	
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit		
30. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	277	
31. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	28	

32. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	57
33. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	26
35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	 Age Race Ethnicity (e.g., Hispanic, Non-Hispanic) Length of time in the facility Housing assignment Gender Other None
36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Rosters and observance of inmate population
37. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	

38. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.	
Targeted Inmate/Resident/Detainee Interview	s	
39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	23	
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".		
40. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2	
41. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2	
42. Enter the total number of interviews conducted with inmates/residents/ detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	4	

43. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	2
44. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
44. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	 ■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed.
44. 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).	Review of the roster, observance of inmate population and interviews with staff and the inmate population indicated no inmates identified as Limited English proficiency was housed at the facility.
45. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	5
46. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0

46. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed.
46. 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).	Interviews with staff and inmate population and housing documentation inndicated one inmate previously identiifed as transgender was housed at the facility August 14, 2023 thorugh November 16, 2023. No additional transgenders were identified.
47. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	4
48. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	4
49. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

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49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed.	
49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Interviews with staff and inmates and review of investigative cases files indicated no inmates were placed in segregation based soley on their risk of sexual victimization or having alleged to have suffered sexual abuse.	
50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.	
Staff, Volunteer, and Contractor Interviews		
Random Staff Interviews		
Random Staff Interviews		
Random Staff Interviews 51. Enter the total number of RANDOM STAFF who were interviewed:	25	
51. Enter the total number of RANDOM	 Length of tenure in the facility ■ Shift assignment ■ Work assignment ■ Rank (or equivalent) ■ Other (e.g., gender, race, ethnicity, languages spoken) ■ None 	

54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.	
Specialized Staff, Volunteers, and Contractor	Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.		
55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	18	
56. Were you able to interview the Agency Head?	YesNo	
57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	● Yes ○ No	
58. Were you able to interview the PREA Coordinator?	YesNo	
59. Were you able to interview the PREA Compliance Manager?	 Yes No NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) 	

60. Select which SPECIALIZED STAFF Agency contract administrator roles were interviewed as part of this audit from the list below: (select all that Intermediate or higher-level facility staff apply) 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 nonsecurity staff Intake staff

	Other
61. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	YesNo
61. Enter the total number of VOLUNTEERS who were interviewed:	1
61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	■ Education/programming ■ Medical/dental ■ Mental health/counseling ■ Religious ■ Other
62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	
62. Enter the total number of CONTRACTORS who were interviewed:	3
62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	Security/detention Education/programming Medical/dental Food service Maintenance/construction Other
63. Provide any additional comments regarding selecting or interviewing specialized staff.	Mental health

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.

Audit Reporting Information.		
64. Did you have access to all areas of the facility?	Yes	
	No	
Was the site review an active, inquiring proce	ess that included the following:	
65. Observations of all facility practices in accordance with the site review	Yes	
component of the audit instrument (e.g., signage, supervision practices, crossgender viewing and searches)?	No	
66. Tests of all critical functions in the facility in accordance with the site	● Yes	
review component of the audit instrument (e.g., risk screening process,	○ No	
access to outside emotional support services, interpretation services)?		
67. Informal conversations with inmates/ residents/detainees during the site	Yes	
review (encouraged, not required)?	No	
68. Informal conversations with staff during the site review (encouraged, not	Yes	
required)?	No	

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

Documentation Sampling

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

70. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	YesNo
71. 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.

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate- on- inmate sexual abuse	63	0	54	1
Staff- on- inmate sexual abuse	6	4	2	4
Total	69	4	56	4

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on- inmate sexual harassment	20	0	20	0
Staff-on- inmate sexual harassment	0	0	0	0
Total	20	0	20	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on- inmate sexual abuse	9	1	0	0	0
Staff-on- inmate sexual abuse	0	4	0	0	0
Total	9	5	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	9	32	20	2
Staff-on-inmate sexual abuse	0	2	0	4
Total	9	34	20	6

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 detained sexual harassment investigation files, as applicable to the facility type being audited.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	16	4	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	16	4	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

29

79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	No NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation	files
80. Enter the total number of INMATE- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	24
81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	YesNoNA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	Yes No NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation fil	es
83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	4
84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	YesNoNA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	YesNoNA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Select	ed for Review
86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	5
87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	YesNoNA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investig	ation files
88. Enter the total number of INMATE- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	5
89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	Yes No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files			
91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0		
92. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	Yes No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)		
93. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	 Yes No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) 		
94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	There were zero staff on inmate sexual harrassment allegations reported. There were zero inmate on inmate sexual harassment allegations identified as criminal.		
SUPPORT STAFF INFORMATION			
DOJ-certified PREA Auditors Support S	taff		
95. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	Yes No		

Non-certified Support Staff		
96. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	YesNo	
96. Enter the TOTAL NUMBER OF NON- CERTIFIED SUPPORT who provided assistance at any point during this audit:	1	
AUDITING ARRANGEMENTS AND COMPENSATION		
97. Who paid you to conduct this audit?	 The audited facility or its parent agency My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) A third-party auditing entity (e.g., accreditation body, consulting firm) Other 	
Identify the name of the third-party auditing entity	Diversified Correctional Service LLC	

Standards

Auditor Overall Determination Definitions

- Exceeds Standard (Substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard (requires corrective actions)

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review):
	East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
	2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
	3. Mississippi Department of Corrections SOP # 20-14-01, Prison Rape Elimination Act of 2003
	4. East Mississippi Correctional Facility Ensuring SAFE Prisons #12.004
	5. Confirmation MTC PREA Coordinator Assignment
	6. MTC Organizational Chart
	7. Interviews:

- a. MTC PREA Coordinator
- b. EMCF PREA Compliance Manager

115.11 (a) (b) (c) MDOC SOP #20-14-01, MTC #903E.02, and EMCF #12.004, governs the mandate of the agency's zero-tolerance toward all forms of sexual abuse and sexual harassment.

MTC #903E.02 policy outlines procedures and expectations related to MTC's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. This policy is developed in compliance with the Prison Rape Elimination Act (PREA) standards for adult prisons and jails. The MTC policy notes a commitment to the following: (1) MTC will aggressively respond to, investigate, and support the prosecution of incidents of sexual violence in all MTC operated prisons, through internal administrative disciplinary processes and external partnerships with law enforcement and county prosecutors. (2) Sexual contact between staff and offenders, volunteers, and offenders or contract personnel and offenders, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions. (3) Through continual education of staff, offenders, volunteers, vendors, and contractors, MTC increases awareness of safe reporting mechanisms and available services to victims, thereby creating institutional cultures that discourage sexual violence. (4) Through improvements to institution architecture, where feasible, MTC identifies, separates where appropriate and carefully monitors both sexually abusive perpetrators and vulnerable offenders. (5) MTC will establish data collection systems to accurately track sexual violence, facilitate, identification of the core causal factors, and annually incorporate 'lessons learned' into improved operations, employee training, offender orientation and services toward a sustainable zero-tolerance standard. (7) MTC protects the confidentiality of the victim and provides all services necessary for recovery.

MDOC SOP#20-14-01 states an agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, responding to such conduct. 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 inmates while outlining 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, intake screening for risk of sexual victimization, sanctions for those found to have participated in prohibited behaviors, PREA educational training for staff, and inmate population, reporting and responding methods of reported sexual abuse and sexual harassment allegations, investigative procedures of reporting allegations, disciplinary sanction for staff and inmates, access to emergency medical treatment and crisis intervention services, victim advocacy services, sexual abuse incident reviews, data collection, and data review for corrective action.

EMCF #12.004 also provides uniform guidelines and procedures to reduce the risk of prison sexual violence and the facility commitment to a zero -tolerance standard for sexual violence. The policy was developed in compliance with the PREA ACT 2003 that notes the facility will aggressively respond to, investigate, and support the prosecution of incidents of sexual violence through internal administrative disciplinary processes and external partnerships with law enforcement and county prosecutors. The facility's policy includes the following: definitions within the PREA standards; procedural guidelines of for offender orientation/education; staff orientation /training; operational issues; offender duty to report; staff duty to report; offender interviews; supervisor's duties upon notification of a sexual assault; medical/mental health/ chaplains and treatment services; screening, identifications, monitoring and counseling of offender with histories of sexual victimization or sexually aggressive behavior; mental health responsibilities; shift commander immediate completion of an incident report; circumstances for cases turned over to local law enforcement agencies; staff responsibilities; MTC procedures for investigations of attempted or completed recent prison sexual violence; procedures and investigations for attempted or completed prison sexual violence that is not recent; administrative and criminal sanctions/offender; investigations of staff; investigative report; facilities data collection and monitoring; documenting incidents of sexual violence, MTC corporate office functions, corporate data collection and compilation.

In accordance with MTC #903E.02, MTC will designate an upper-level PREA Coordinator for the company who has sufficient time and authority to develop, implement and oversee MTC's efforts to comply with PREA standard in all facilities. An interview with the MTC PREA Coordinator confirmed MTC operates 27 facilities and a PREA Compliance Manager is assigned at each. She and an Assistance PREA Coordinator work together and have been able to manage the workload and flow of the demands of the position. Interaction with the facility's PREA Compliance Managers is completed through email, telephonically, video conference, webinars, and in-person audits. She indicated the following actions are taken upon identifying an issue with complying with a PREA standard: Identification and corrective action internal and external audits, peer reviews; Collaboration - virtual and in-person forums for sharing of best practice through webinars, video training, email, conferences; Consideration of resources, approval processes via customer agency, facility owner, etc.; Clarification - interpretive guidance, PREA Resource Center, remedy period; Implementation - policy and procedure, physical plant and technical systems, staffing, and training.

Pursuant to MDOC SOP #20-14-01, Where an agency operates more than one 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.

MTC #903E02, includes the agency's requirement to designate a PREA Compliance Manager who has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. An MTC organizational chart identified the position of the Compliance Manager reports directly to the MTC Warden. An interview with

EMCF PREA Compliance Manager indicated he recently assumed duties as the EMCF PREA Compliance Manager in February 2024. He indicated during the pre-audit process; he identified non-compliance with various PREA standards that was shared with the Warden, Deputy Wardens, applicable departmental supervisory staff and line staff. He provided technical training both verbally and in written format through the creation of procedure manuals issued to departmental supervisors and line staff, detailing the intent of the standards. He continues to monitor the identified areas to ensure staff comprehensive of the training while applying their knowledge to achieve compliance.

Based on the review of MDOC and MTC policies, review of the MTC organizational chart, EMCF organizational chart and interviews with the EMCF PREA Compliance Manager and MTC PREA Coordinator, it is determined EMCF does meet all provisions of the standard.

115.12 Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) Agency Webisite
- 3. Mississippi Department of Corrections # 20-14-01, Prison Rape Elimination Act of 2003
- 4. Interviews:
- a. EMCF Warden
- b. MTC PREA Coordinator
- c. EMCF PREA Compliance Manager

Pursuant to MDOC 20-14-01, A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include an any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards. Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. Only in emergency circumstances in which all reasonable attempts to find a private agency or other entity in compliance with the PREA standards have failed, may the agency enter into a contract with an entity that fails to comply with these standards. In such a case, the public agency shall document its

unsuccessful attempts to find an entity in compliance with the standards.

The EMCF is contracted by the Management and Training Cooperation (MTC). MTC is a private contracting organization that has the delegated authority of direct responsibility for the operation of the facility based on an established contract with the Mississippi Department of Corrections. Therefore, MTC does not enter into additional contracts with other agencies for the confinement of inmates. A review of the MTC agency's website confirmed a PREA audit was completed for each of the previous audit cycles while successfully achieving compliance of all standards.

Per interviews with the EMCF PREA Compliance Manager, MTC PREA Coordinator, and EMCF Warden, MTC is responsible for the care, custody and control of the inmate population based on a contract with the Mississippi Department of Corrections. EMCF and MTC meet all provisions of this standard.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. EMCF Staffing Plan
- 5. EMCF Annual Staffing Plan Review
- EMCF Master Security Rosters
- 7. Camera Placement
- 8. Observation During Site Visit
- 9. Security Daily Rosters
- 10. Documentation of Unannounced Rounds
- 11. Interviews:
- a. EMCF Warden
- b. EMCF PREA Compliance Manager

- c. MTC PREA Coordinator
- d. Intermediate and Higher-Level Supervisors

115.13 (a) (b) (c (d) In accordance with MTC 903E.02, and MDOC 20-14-01, the agencies shall ensure each facility will 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 abuse. MDOC 20-14-01 outlines the mandate of the required components of standard 115.13 (a).

The facility presented a staffing plan that confirms its operation to 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 video monitoring, to protect inmates against abuse. The staffing plan was developed for a daily inmate population of 1350, which is the maximum capacity for EMCF. The average daily inmate population count since the last PREA audit was identified in PAQ as 1288, but later identified as 1313 by the EMCF PREA Compliance Manager. All elements within the standard were included in the review of the Staffing Plan.

Per the EMCF Warden and EMCF PREA Compliance Manager, no additional cameras have been installed since the last PREA audit dated June 14, 2021. However additional mirrors have been installed to increase staff observation and increase security measures through the elimination of blind spots. The facility has a total of 190 cameras, while 160 are installed within the facility in all housing units, visitation area, medical, education, hallways, administration area, food service, intake area, laundry, barber shop, recreation area and fences.

The Auditor's observation of the assignment of security staff and non-security staff who have contact with the inmate population confirmed sufficient staff coverage were present on various post assignments. The Auditor also noted staff's ability for visual observation of areas to include within housing, work assignments and program areas through open areas, windows, mirrors and camera placement that eliminated blind spots. Interviews with staff and the inmate population did not reveal any concerns with having sufficient staff coverage during any shifts and/or during the inmate's presence within allowed areas to include recreation, housing, programs, and/or work assignments.

Pursuant with MTC 903E.02, and MDOC SOP #20-14-01, in circumstances where the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. Per interviews with the security staff supervisor, and EMCF Warden, the facility does not deviate from the established facility staffing plan. Deviation from the staffing plan is prevented through continuous roster management, an increase in the hiring of security staff and authorization of overtime compensation as needed.

The Auditor randomly selected a variety of security shift rosters from various days and shifts to include weekdays and weekends throughout the 12-month review period for compliance with the facility's Staffing Plan. No discrepancies were noted in the

assignment of security posts identified as mandatory. Adjustment in roster assignments were made that included roster adjustments from non-mandatory post to mandatory and overtime compensation as needed that ensured required coverage.

MTC 903E.02, and MDOC #20-14-01, outlines the requirements of the standard provision. MTC #903E.02, notes At least once every year the facility, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed in (a) the staffing plan; (b) the deployment of monitoring technology; (c) the allocation of agency/facility resources to commit to the staffing plan to ensure compliance. The facility will document the review on the Annual Staffing Plan Review Certification and submit it to the MTC PREA Coordinator and Regional Vice President.

Per MDOC #20-14-01, Whenever necessary, but no less frequently than once each year, of reach facility the agency operates, in consultation with the PREA Coordinator required by standard 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to provision (a); (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 staffing plan.

The most recent facility's Annual Staffing Plan Review was documented as reviewed by the EMCF PREA Compliance Manager, EMCF Warden and the MTC PREA Coordinator on November 7, 2023. An interview with the MTC PREA Coordinator indicated at least once per year, and more often as needed, she is consulted regarding any assessment of, or adjustments to, the staffing plan for the facility.

In accordance with MTC 903E.02, and MDOC #20-14-01, Intermediate-level and high -level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such practice shall be implemented and documented for night shifts as well as day shifts, Staff shall not alert other staff of the conduct of such rounds. The Auditor conducted reviews of all housing units logs during the site visit in addition to requests of random selected unit log entries for each of the 12-month review period for confirmation of intermediate-level and high-level staff unannounced rounds. The review confirmed security supervisory staff to include sergeants, Lieutenants and Captains conduct unscheduled rounds at various times during each of the two shifts and not within a pattern. Additionally, documentation of Duty Warden rounds was presented that supports higher-level management staff also conduct unscheduled irregular rounds. Interviews with supervisory staff indicated unannounced rounds are not conducted in pattern, and the time varies throughout the shift daily. The variation of completed unannounced rounds prevents staff awareness of their arrival. Staff are prohibited from notifying others of their arrival and or performance of conducting rounds.

Based on the review of the EMCF Staffing Plan that identified all elements within the standard, selected security roster assignments with no instances of non-compliance with the staffing plan, review of unannounced supervisory rounds, and interviews with EMCF Warden, EMCF Compliance Manager, MTC PREA Coordinator and EMCF supervisory staff, EMCF does meet all provisions of the standard.

115.14 Youthful inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1. East Mississippi Correctional Facility (EMCF) Completed PREA-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. EMCF Inmate Roster
- 4. Observation During Site Visit
- 4. Interview:
- a. EMCF PREA Compliance Manager

115.14 (a) (b) (c) In accordance with MTC #903E.02, Youthful inmate means any person under the age of 18 who is under adult court supervision and incarcerated or detained in prison or jail. Youthful detainees mean any person under the age of 18 who is under adult court supervision and detained in a locked-up prison.

EMCF is an adult male prison and does not house juvenile offenders. Per the PAQ, and interview with the EMCF PREA Compliance Manager, offenders designated at the facility are between the ages of 19 – 80 years old. The review of the inmate population roster identified the youngest inmate housed at the facility as 20 years old. However, the MTC and MDOC does have policy in place for holding juveniles.

Based on the review of MTC policy, EMCF PAQ, inmate roster, observation during the site-visit, and interview with the EMCF PREA Compliance Manager, it is determined EMCF meets all provisions of the standard.

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed PREA-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. MTC Mississippi Correction Lesson Plan "Advanced Control of Contraband"

- 5. Staff Training Records
- 6. Interviews:
- a. Random Staff
- b. Random and Targeted Group Inmates
- 115.15(a) In accordance with MTC # 903E.02 and MDOC #20.14.01, The facility will not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. Per the PAQ and interview with the EMCF Compliance Manager, zero cross-gender strip or cross-gender visual body cavity searches of inmates were conducted during the 12-month review period.
- 115.15 (b) EMCF is a designated as an adult male facility only and does not house female offenders/inmates. Therefore, provision (b) is not applicable.
- 115.15 (c) Pursuant to MTC # 903E.02, the facility will not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. EMCF #20.14.01, The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches and shall document all cross-gender pat-down searches of female inmates. EMCF is designated as an adult male facility only and does not house female offenders/inmates. Therefore, provision 115.15 (C-2) is not applicable.
- 115.15 (d) In accordance with MDOC #20.14.01 and MTC # 903E.02, 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. Interviews with staff and the inmate population confirmed opposite gender staff (female) announce their presence by stating "Female on the zone." Per interviews with the inmate population, the announcement of "Female on the zone," is conducted in manner that can be heard. Interviews with two (2) inmates identified as hard of hearing indicated a notice is posted on red paper and in large font when female staff are within their housing unit. There were no concerns expressed by the inmate population of the opposite gender viewing when showering, changing clothes and/or performing bodily functions. The Auditor also viewed the video monitoring capabilities of showers and inmate cells that confirmed inmates were able to shower, perform bodily functions, and change clothing without opposite gender viewing of buttocks, or genitals. Shower curtains, and/or doors prevented viewing.

The facility identified one (1) transgender was designated within the 12-month review period for approximately three months. Staff interviews indicated the transgender inmate was assigned to take showers in a single stall shower within the medical

department. Interviews with random and specialized staff indicated zero inmates identified as intersex have been assigned at the facility.

115.15 (e) (f) Agency policies MTC#903E.02 and MDOC #20.14.01 governs the mandate of the standard provisions. The facility shall not search or physically examine transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Per interviews with staff, all were aware that inmate an inmate identified as transgender, or intersex shall not be searched for the sole purpose of determining their genital status. Inmates identified as intersex and/or transgender were not housed at the facility during the site visit.

MTC#903E.02 states security staff shall be trained 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. MDOC #20.14.01 notes, the agency shall train security staff in how to conduct cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Per the PAQ, 100% of security staff received search training. This training is held during new hire orientation and annually during pre-service training. Staff interviews confirmed their receipt of search training. Per staff interviews, the one (1) inmate identified as transgender was searched by male staff. A request to be searched by female was not made.

A learning objective outlined within the MTC Mississippi Correction Lesson Plan "Advanced Control of Contraband" a one (1) hour training course includes crossgender pat down searches, and searches of transgender and intersex inmates in a professional and respectful manner while in the least intrusive manner possible, consistent with security needs. The training curriculum and confirmation of randomly selected 28 security staff completion was submitted for review by the Auditor.

Based on the review of the agency's policies, PREA training curriculum that includes inmates searches to include transgender, staff's training records, interviews with staff, EMCF does meet all applicable provisions of the standard.

Inmates with disabilities and inmates who are limited English proficient Auditor Overall Determination: Meets Standard Auditor Discussion Evidence Reviewed (documents, interviews, site review): 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)

- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. East Mississippi Correctional (MDOC) Facility Policies and Procedures #12.004
- 5. Agreement Between MTC and Language Line Service
- 6. TTY Services via Minicom
- 7. Assigned Staff Interpreter
- 8. PREA Material in Spanish Language
- 9. Inmates with Disabilities Acknowledgement of PREA Training
- 10. Interviews:
- a. Agency Head
- b. Random Staff
- c.Targeted Group Inmates

115.16 (a) (b) (c) Per MTC #903E.02, MTC will take appropriate steps to ensure inmates with disabilities and who are limited English proficient have an equal opportunity to participate in or benefit from all aspects of MTC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. i) Contracting with interpreters or other professionals (including designated facility staff) hired to ensure effective communication with inmates who are Limited English Proficient. ii) Developing written materials used to effectively communicate about PREA with inmates with disabilities or limited reading skills. iii)Training staff on PREA complaint practices for inmates with disabilities.

Pursuant to MDOC #20-14-01 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. 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. 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.

Pursuant with EMCF #12.0004 Staff shall make appropriate provisions for offenders not fluent in English, those with low literacy levels, and those with disabilities which may hinder their ability to understand the information.

The Auditor observed various PREA posters throughout the facility in English, Spanish and in large font accessible to the inmate population.

The facility utilizes Minicom IV to provide service via TTY for those inmates identified as deaf or hard of hearing. The Minicom IV is stored within the inmates' housing unit when such inmates are assigned. The Auditor conducted interviews with two inmates identified as hard of hearing. Both inmates were aware of the available resource but had not requested to utilize it. The inmates were previously assigned hearing aid that enabled their hearing. A notice stating "Female on duty" is posted at the housing unit entry in housing units where inmates identified as hard of hearing are assigned.

Interviews were conducted with inmates identified with various disabilities to include physical, cognitive, and low vision, indicated all acknowledged the receipt of PREA education and was aware of various methods to report sexual abuse and/or sexual harassment. The inmates identified the PREA posters and notices on walls with telephone numbers to report to include via third party such as the Mississippi Coalition Against Sexual Assault (MCASA) and/or family or friends, in addition to the option of reporting to staff both verbally, in writing.

MTC established a Master Service Agreement with Language Line Services, Inc. Language translation services are available in the following: Spanish, Chinese, (Mandarin and Cantonese), French, Japanese, Polish, Russian, Vietnamese, Armenian, Cambodian, German, Haitian Creola, Italian, Korean, Portuguese, Farsi, Tagalog, Thai, Urdu and additional languages. There were zero inmates assigned at the facility who required translation services in any of the aforementioned languages. The Auditor conducted a test call and confirmed the available language translation services were available. The Language Line offers an online sign language option in the event these services are needed. MTC has not had to use this particular service at East Mississippi Correctional Facility as the state will generally not house inmates who are clinically diagnosed deaf or need assistance to perform normal bodily functions at EMCF. If EMCF did receive a deaf inmate, these services would be available for use.

Staff authorized to serve as translator in the Spanish language was identified by staff. However, there were zero inmates identified as whom their first language was that other than English. An inmate roster was identified as noting the language spoken by

each inmate. All were identified as speaking the English language. The designated staff assigned to provide translation services in the Spanish language confirmed his appointment to provide translation services. However, these translation services have not been required.

Interviews with random staff confirmed their knowledge of the agency's policy not to utilize an inmate as an interpreter in relation to the reporting of PREA allegations. All stated they would contact a supervisor for applicable translation services. Staff was aware of bi-lingual staff who was fluent in the Spanish language. Per the review of the PAQ and interviews with staff, there were zero inmates whom first language was not that of the English language to include in the previous years. Therefore, there were zero instances where an inmate was utilized to translate for another inmate when reporting and/or investigating PREA allegations.

Per the Agency Head, MTC take appropriate step to prevent, and detect, and respond to sexual abuse and sexual harassments that include Language Line Services, Inc., or other professionals including designated facility staff, who are hired to ensure effective communication with inmates who are limited English proficient. Developing written material are used for effective communication about PREA with inmate with disabilities or limited reading skills. Staff receive training on PREA compliance practices for inmates with disabilities. For PREA related activities, MTC prohibits the use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay obtaining an effective interpreter could compromise the inmate's safety.

Based on the review of agency policies, language line agreement that provides various language translations, observation of the Minicom IV for hard of hearing/deaf inmates, posting of PREA information to include reporting options in English, Spanish and large font, assigned EMCF staff to provide translation services in the Spanish language, staff awareness of inmate limitation of inmate interpretation, interviews with staff and inmates identified with various disabilities, EMCF does meet all provisions of the standard.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003

- 4. Employees, Contractors and Volunteers Background Checks
- 5. New Hires, Contractors, Volunteers and Promoted Staff PREA Verification Forms
- 6. Interview:
- a. Human Resource Manager
- b. Recruiting Specialist
- c. Team Lead Dispatcher

115.17 (a) (b) (c) (d) (e) (f) (g) (h) The MTC #903E.02 and MDOC #20-14-01, outlines the agency's policies and procedures to ensure criminal background checks are conducted on all new hires to include contractors and volunteers prior to approval for employment.

MTC #903E.02 notes MTC prohibits hiring and/or promoting staff who have contact with inmates who have engaged in sexual abuse and/or sexual harassment. Material omissions or the provision of materially false information by staff is prohibited as detailed in MTC policy Rules of Conduct s203.01.1.B.8.b.

MDOC #20-14-01 states The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility; juvenile facility, or other institution (as defined in 42 U,S.C, 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by forcer 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. (b) 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. (c) 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. (d) The agency shall also perform a criminal background record check before enlisting the services of any contractor who may have contact with inmates. (e) 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. (f) 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. (g) Material omissions regarding such misconduct, or the

provision of materially false information, shall be grounds for termination. (h) 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.

Interviews were conducted with the Human Resource Manager, Recruiting Specialist, and Team Lead Dispatcher who are assigned to conduct background checks in reference to the standard. The interviews confirmed the initial background investigations are completed for applicates upon meeting the qualifications for employment once confirmed by the Recruiting Specialist. Per the Team Lead Dispatcher, once the applicant has been identified as meeting the requirements of the job they have applied for, staff utilize the NCIC system to run a criminal history of all applicants. The finding of the NCIC is forwarded to the MDOC Chief of Background Investigations for review. Per the Team Lead Dispatcher, their department is responsible only for conducting applicants' initial background investigations during the hiring process. Background investigations are conducted for all maintenance, vendors, contractor and MDOC/ MTC applicants.

Per an interview with the EMCF Human Resources Manager, she assumed the position during the review period in October 2023. She confirmed applicants initial background investigations are completed by the MDOC Background Investigation Unit and are forwarded to the facility upon completion. However, she acknowledged her unawareness of agencies policies that require the completion of a criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or the requirement to have in place a system for otherwise capturing such information for current. The Human Resource Manager also acknowledged the facility did not have a process in place to capture such information. However, she did indicate background checks have been completed for numerous selected seasoned staff since her appointment to the position as instructed by the previous administration. Documentation was presented to support background checks were completed in November 2023 and December 2023 for 27 staff employed well in excess of five years. There was no documentation presented to support the previously required five-year background checks were completed in accordance with agency policies nor the standard.

The Auditor requested a date of employment roster for all employees. Sixty-eight staff were identified as hired during the 12-month review period. Six new hires were randomly selected for confirmation of background checks with no discrepancies noted. Additionally, the Auditor selected 10 staff employed in an excess of five years. Documentation presented indicated three (3) staff background investigations were completed in November 2023 and the remaining seven (7) were dated as completed during the pre-audit phase upon being requested by the Auditor.

Upon the discovery that documentation could not be produced to support the completion of five-year background investigations for numerous staff, the Human Resource Manager conducted a background investigation for the additional 40 staff with an excess of five years employment. The Auditor conducted a comparison of staff's date of employment and completion of background checks that confirmed a

recent background check was completed during the pre-audit and post audit phases and not particularly at the five-year period and/or intervals of the employees' fiveyear anniversary.

The Human Resource Manager acknowledged as the discrepancies were identified during the pre-audit phase, she formulated a monitoring system to ensure the completion of five-year background investigations for all applicable staff in accordance with agency policies. The monitoring practice includes conducting a monthly review of a facility employee roster that includes staff date of hire. A background check will be initiated for all staff approaching the five-year anniversary of their most recently conducted background investigation. The background investigation will be initiated at a minimum two months prior to the anniversary month.

In addition to the previous 27 background investigations completed November and December 2023 and 40 were completed during the pre-audit and post audit process, the facility was successful in the completion of background checks for all staff employed at the facility in an excess of five years.

All applicants to include new hires, contractors, volunteers and staff seeking promotions are required to complete the section of the Eligibility Questions that include the following PREA Interview Questions: 1) Have you ever been found to have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, or convicted of engaging or attempting to engage in sexual activity with any person by force, threat of forced or coercion or if the victim did not or could not consent?; 2) Have you been civilly or administratively adjudicated to have engaged in the activity described in (1)?; Have you ever been found to have engage in sexual harassment at work?

The facility reported 58 contract staff and 26 volunteers. The Auditor selected ten (10) contractors and nine (9) volunteers for background checks in accordance with agency policy as many were hired within five years. The contract for medical and mental health practitioners (Vital Care) was granted within a five-year period. Therefore, the completion of background checks for staff employed for five years was not applicable. Confirmation of contractors and volunteers' completion of the PREA Questionnaire identifying a "No" response was included in the review for all new hires.

Per the PAQ, 68 staff were hired during the review period. The Auditor randomly selected 12 MTC new hires for confirmation of completed criminal background checks and completion of the PREA Questionnaire identifying a "No" response with no discrepancies noted in the review.

The Auditor randomly selected five (5) staff identified as promoted during the review period for completion of the PREA Questionnaire identifying a "No" response that coincides with the date of promotion with no discrepancies noted.

The Human Resource Manager confirmed the agency policies are imposed upon all employees to disclose any previous misconduct and the agency's requirement to

provide information regarding a former employee upon request of another institution or agency. Upon receiving an authorization to release information of previous employment by a former staff member, the agency is authorized to release information regarding investigative findings.

Although the completion of all five-year background investigations was identified as not completed at the 5-year anniversary of numerous staff, a background check was completed of all applicable staff during the pre-audit and post audit phase. As such, there were no applicable five-year background checks pending, therefore, eliminating the necessity of a corrective action plan. Therefore, based on the review of the agency's policies, review of completed background checks for MTC employees, contract staff and volunteers, confirmation of completed PREA Verification questionnaires by new hires, contractors, volunteers and staff promoted, the facility does meet all provisions of the standard.

115.18 Upgrades to facilities and technologies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) SOP #20-14-01 PREA Act of 2003
- 4. Interviews with:
- a. MTC Agency Head
- b. EMDOC Warden
- c. MDOC Investigator

115.18 (a) Per MTC #903E.02 and FDC 602.053 governs the mandate of the standard. MTC #903E.02 states, when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, MTC will consider the effect of the design, acquisition, expansion, modification upon the agency to protect inmates from sexual abuse.

Pursuant to EMDOC #20-14-01, When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.

Per the Agency Head, stakeholders, including the MTC PREA Coordinator and the Assistant Coordinator, review the facility's plans to determine appropriate staffing and camera coverage during the design and/or renovation phase of the facility The process anticipates blind spots and mitigates risk through efficient design.

115.18.(b) MTC 903E.02, and EMDOC #20-14-01, notes when installing or updating a video monitoring system, electronic surveillance system or other monitoring technology MTC will consider how such technology may enhance the facility's ability to protect inmates from sexual abuse.

The Auditor recommended the installation of three (3) mirrors within the food service kitchen area to eliminate blind spot and increase staff observation of the areas. A copy of the submitted purchase order was provided and the installation of the mirrors remained pending arrival.

Per the Agency Head, MTC uses video monitoring to assist staff to observe inmate activity in areas particularly vulnerable to misbehavior or violence. Priority to camera placement is primarily influenced by areas of increased risk and any prevalence of substantiated and unsubstantiated incidents of sexual abuse.

An interview with the Warden and EMDOC Investigator indicated there has not been any substantial expansion or modification of the existing facility and/or additional cameras since the last PREA audit.

Based on the review of agencies' policies, observation during the site visit, camera locations, and interviews with the Warden, EMDOC Investigator and MTC Agency Head, and EMDOC meets all provisions of the standard.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Memorandum Agreement Between MDOC and Mississippi Coalition Against Sexual Assault (MSCASA)
- 4. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 5. Sexual Abuse Investigative Case Files
- 6. Observation During Site Visit

- 7. Interviews:
- a. MSCASA PREA Advocate Coordinator
- b. MDOC Integrity Investigator
- c. EMCF PREA Compliance Manager
- d. Inmates Who Reported Sexual Abuse

115.21 (a) (b) (c) (d) (e) (f) (g) (h) The MDOC #20-14-01 and MTC #903E.05 policies outline the procedures for the completion of both administrative and criminal investigations.

MTC # 903E.02 mandates the following in accordance with the standard provisions. To the extent MTC is responsible for investigating allegations of sexual abuse, MTC will follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions, The protocol shall be developmentally appropriate for youth where applicable. MDOC #20-14-01 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. 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. The agency evidence protocol is outlined within both agency's policies and supports similarly comprehensive authoritative protocols in the National Protocol for Sexual Assault Medical Forensic Examinations, Second Edition 2013. Youthful offenders are not housed at the facility.

Per agency policies and interviews with the EMCF Investigators and the MDOC Integrity Investigator, as all investigations are conducted by staff within the agency. The EMCF is a facility within the Mississippi Department of Corrections and is contracted through the Management and Training Corporation (MTC). Administrative investigations are conducted by EMCF Investigators. All investigations that have the potential to result in criminal prosecution are conducted by investigators assigned to the Mississippi Department of Correction investigations Division (Integrity Investigator).

Random and specialized staff interviews confirmed their awareness of the agency protocol of immediately separating the victim and aggressor upon receiving a reporting of sexual abuse, securing the crime scene notifying the shift commander, duties of advising the victim to preserve all physical evidence to include body fluids and functions, providing medical treatment for both inmates, completion of a thorough report of information received/knowledge, investigation completion by the facility investigators. All staff are issued and retain in their possession a PREA Frist Responder Duties Card that outlines actions to step as a first responder.

MTC will offer all victims of sexual abuse access to forensic medical examination, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examination will 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. MTC will document efforts to provide SAFEs or SANESs. 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.

Per the PAQ, 22 forensic examinations were completed during the 12-month review period. However, the EMCF PREA Compliance Manager later identified the correct number as nine (9). Each of the nine (9) forensic examinations remained pending lab results throughout the initial audit process. Per interviews with the Director of Nurses and the Health Services Administrator, all inmates who report sexual abuse are required to be escorted to the local hospitals for the determination of applicable forensic examinations. However, inmates have the option to decline all medical treatment to include the forensic examination. All medical services are free of cost to the inmates regardless of the services received. Documentation supports the forensic examination were completed by qualified SANE. An interview with a SANE assigned to the Ochsner Rush Medical Center indicated a SANE would be provided upon requested.

Pursuant with MTC 903E.02, 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. If an MTC staff member is used to provide services, documentation of qualifications will be maintained.

A Memorandum of Understanding (MOU) has been established between MDOC and Mississippi Coalition Against Sexual Assault (MSCASA). The lasts review and agreement was entered and agree on October 1, 2023, with an effective date from October 1, 2023, to September 30, 2025. The MOU outlines the responsibilities of the MDOC and those of the MCASA. The agreement of MSCASA includes but is not limited to the following: Respond to victim request for services to incarcerated survivors of sexual abuse and sexual harassment; The supports services are related to sexual violence including, hospital accompaniment for the victim during the forensic medical examination process; in -hospital investigatory interviews; and emotions support services in person and referrals; Respond to calls from inmates to the toll-free hot line number as well as written correspondence; Provide follow up services and crisis intervention to victims of sexual assault as resources allow; Maintain confidentiality of communications with victims who receive MSCASA advocacy support services; Maintain and provide MDOC with a list of current rape crisis center personnel by

regions, who have completed MDOC volunteer training; Communicate any questions or concerns to the MDOC Statewide PREA Coordinator along with occasional phone meetings or phone calls as needed; Coordinate any supplemental training with MDOC facility on PREA overview as it relates to sexual victimization, LGBTA population while in confinement, and other PREA related victim service access; When requested and possible, ensure MDOC medical staff receive training on forensic medical examinations.

Per an interview with the MSCASA PREA Advocate Coordinator, her agency provides services within the facility to include telephonic, virtually, and/or in-person. Due to state-wide budget cuts, staff are limited, therefore the victim may be required to leave a message and/or return a call. She added that often the center has received anonymous calls and/or she has had to explain what the intent of calls made to the center are for. She added as needed she has made arrangements with facility staff to set up zoom calls in the visitation room. Services are available during the forensic examination, investigative process and for emotional support. She placed emphasis of the positive relationship that has been established with the EMCF Investigative Staff. She is currently working with several Sheriff's Offices throughout the state to increase victim advocate services and provide victim advocate training within the communities.

The EMCF Religious Chaplain has received training appropriate training to serve as a qualified agency staff member to provide victim advocate services when a victim advocate is not available from the MSCASA, and or requested by the inmate population. The Chaplain's completion of the review guide "Meeting the Needs of Prison Rape Victims" that is a Technical Assistance Guide for Sexual Assault Counselors and Advocates presented through the National PREA Resource Center. Per the Chaplain, although not requested by the inmate population, she has offered counseling and victim advocate services to inmates who reported allegations of sexual abuse. A notice was identified as posted in the housing units identifying the facility Chaplain as victim advocate.

Per the Auditor's review of 33 investigative cases files, it was noted that the EMCF Facility Investigator completed an Inmate Sexual Assault /Abuse Advocate Form noting whether the alleged victim of both sexual abuse and sexual harassment wer offered a Sexual Assault /Abuse and /or Requested a Sexual Assault/Abuse Advocate. There were no circumstances documented by the EMCF Investigator where an inmate requested a Sexual Assault/Abuse Victim Advocate.

Interviews conducted with four (4) inmates who reported/identified in sexual abuse investigations, indicated they were aware of the various services provided by MSCASA as it posted throughout the facility. Each also stated at the initiation of reporting and interview process, the facility investigator inquired if they would like to speak with a victim advocate in which each victim stated they declined the offer.

Based on the review of agency policies, review of sexual abuse case files, MOU between MCASA and MDOC, interviews with inmates who reported sexual abuse, MDOC Investigator, EMCF Investigator MCASA PREA Advocate Coordinator, and EMCF PREA Compliance Manager, EMCF does meet all provisions of the standard.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. Investigative Case Files
- 5. Interviews:
- a. MTC Agency Head
- b. MDOC Integrity Investigator

115.22 (b) MTC #903E.02, Pursuant to MTC 903E.02, MTC requires 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. Facilities will document all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. If administrative criminal investigations of alleged sexual abuse are performed by an entity other MTC efforts will be made to obtain the agencies investigative policy. MTC will make the entity aware of investigating requirements under PREA.

Per the MTC Agency Head, MTC investigates where the agency has authority and refers cases when it doesn't have jurisdictional authority. In these areas, where MTC does not have jurisdictional authority, MTC works with and encourages administrative or criminal investigations to be completed for all allegations of sexual abuse or harassment. All initial investigations will begin immediately by correctional staff identified and trained as primary investigators, to ensure preservation of physical and/or circumstantial evidence. In accordance with the contract requirements, the investigative authority, such as respective Offices of Inspector General (OIG), Crime Investigations Divisions (CID) Office of Internal Affairs (OIA), local law enforcement, and /or FBI will be notified immediately and will assume control of the investigation when appropriate.

Per interviews with the EMCF Investigators and MDOC Integrity Investigator an investigation is completed for all reported allegations of sexual abuse and sexual harassment. The EMCF Investigators are responsible for conducting administrative investigations. All allegations that could possibility include criminal charges are completed by the MDOC Integrity Investigators. The PAQ noted 93 PREA allegations during the 12-month review period. This number was later identified by the EMCF

PREA Compliance Manager/Investigator as 89. These investigations were identified as the following: 63 inmate-on-inmate sexual abuse while nine (9) remained pending; six (6) staff-on-inmate sexual abuse; 20 inmate-on-inmate sexual harassment; 0 staff on inmate sexual harassment. Thirty-three investigations were selected for review that included substantiated, unsubstantiated, unfounded sexual abuse and sexual harassment; administrative and criminal investigations; and ongoing investigations. The following investigations were concluded as substantiated: two (2) inmate-on-inmate sexual abuse; and four (4) staff on inmate sexual abuse. Two (2) substantiated staff on inmate cases have been accepted for criminal prosecution. One inmate on inmate sexual abuse has been submitted to the Lauderdale County Grand Jury for prosecution. Two (2) staff and inmate substantiated sexual abuse investigations were identified as pending indictment. The remaining one (1) substantiated inmate on inmate sexual abuse investigation did not include criminal charges.

It should be noted the facility is classified as a maximum mental health facility and numerous allegations were repeatedly reported by a selected group of inmates while the investigative findings were determined as unfounded. The EMCF Investigator reported 63 sexual abuse investigations. Thirty-two inmates on inmate sexual abuse investigations were concluded by the investigative staff as unfounded. Nine remain pending completion. The Auditor's review of the 33 investigative cases also identified numerous inmates were identified as admitting to reporting false allegations that was contributed to debt owed to other inmates for illegal drug usage. A thorough investigation was completed for each reported allegation.

A review of MTC's website https://www.mtctrains.com/prea/ lists the MTC Sexual Safety on Prisons Policy that includes the investigatory procedures for MTC. To make an allegation of inmate-on-inmate or staff-on-inmate sexual abuse or sexual harassment, please contact via email the MTC Prison Rape Elimination Act (PREA) coordinator. MTC will ensure an administrative or criminal investigation for all allegations of sexual abuse and sexual harassment. MTC PREA contact: Heather Manuz, MTC PREA Coordinator, Heather.Manuz@mtctrains.com Mike Atchison, Assistant PREA Coordinator, Mike Atchison@mtctrains.com

Based on the review of agency policies, investigative case files and log, agency's website, interviews with agency head, investigative staff, EMCF does meet all provisions standards.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review):
	East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)

- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. MTC/MDOC Mississippi Corrections Pre-Service and In-Service PREA Training Lesson Plans
- 5. Employee Training Documentation
- 6. Interviews:
- a. Random Staff

115.31 (a) (b) (c) (d) MTC #903E.02 and MDOC #20-14-01 addresses the requirements for all employees on matters related to PREA and the staff's completion of PREA training. All staff shall be thoroughly trained and informed regarding the Department's zero-tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment at least every two years. Although the agency policy states the training will be held every two years, interviews with staff and training documentation supports, the training is held annually. The facility utilizes the MTC/ MDOC Mississippi Corrections PREA Lesson Plan prepared by the MTC Region III Training Staff. The New Employee Training Lesson Plan is scheduled as a two-hour course. The In-Service Lesson Plan is scheduled as a one-hour course annually during refresher training.

The training course includes performance objective that 1) Discuss the MDOC /MTC Zero Tolerance Policy as described in the PREA of 2003; 2) Defines sexual abuse and sexual harassment as related to inmate-on-inmate and staff-on- inmate allegations; 3) Identify characteristics and sign of potential victims of sexual abuse, and harassment, as well as characteristics of potential predators; 4) Identify staff reporting requirements; 5) Define appropriate terminology to use when communicating with the Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) population; 6) Conduct professional communication with inmates, include LGBTI; 7) PREA considerations when conducting inmate searches.

Additional topics included in the lesson plan are: First Responder Duties; Effective Professional Communication with Inmates; Staff and Inmates' Rights to be free from Retaliation; Evidence Protocols and Forensic Medical Exams; Referral of Allegations for investigation; Detecting Sign of Actual and Threatened Sexual Abuse/Harassment; Sign and Symptoms of Sexual Abuse; Physical Signs; Psychological Signs of Sexual Abuse; Victim of Sexual Abuse; Red Flag Indicators of Sexual Victimization; Inmate on Inmate Abusive Behaviors; History and Signs of Abusive Behavior; Signs of Staff-On-Inmate Sexual Abuse; Continuum of Staff Sexual Misconduct; Sexual Abuse and the Impact of Trauma; Protection and Detection Strategies.

EMCF is designated as a male facility. The Common Responses of Male Victims in Confinement Settings is also included in the lesson plan.

Security staff also receive training of the MTC Mississippi Correction Lesson Plan "Advanced Control of Contraband" a one (1) training course that includes cross-

gender pat down searches, and searches of transgender and intersex inmates in a professional and respectful manner while in the least intrusive manner possible, consistent with security needs.

The Auditor observed continuous PREA education was accessible to the staff and inmate population through the posting of PREA posters throughout the facility on walls and bulletin boards in English, Spanish and large font.

The facility reported a MTC staff complement of 277 staff. The Auditor selected 95 staff for confirmation of PREA training that was supported through attendance rosters, and staff signatures on the PREA Acknowledgement EMCF forms.

Twenty-five staff to include security and non-security staff were selected for random interviews. All selected staff acknowledged receiving PREA training during new hire orientation and annually during refresher training.

Based on the review of agency policies that outlines the requirement of PREA training, the inclusion of PREA training as outlined in the standard provisions, and documentation of staff's completion and understanding of the PREA training received, EMCF does meet all provisions of the standard.

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) SOP #20-14-01 PREA Act of 2003
- 4 Contractors and Volunteers PREA Training Acknowledgement Documentation
- 5. Interviews:
- a. Contract Staff
- b. Volunteer

115.32(a) (b) (c) MTC #903E.02 and MDOC #20-14-01 addresses the requirements for all staff, volunteers, and contractors' completion of PREA training. 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 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. The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.

The facility reported 17 volunteers and contractors. This number was later identified correctly as 84. Twenty-six volunteers assist the facility's Chaplian with religious services programs. A random selection of nine (9) volunteers' PREA training was selected for review with no discrepancies noted. Confirmation of training was supported through the review of the MTC PREA Training Acknowledgment forms for the selected volunteers. An interview with one (1) volunteer indicated their awareness of the agency's zero tolerance for sexual abuse and sexual harassment and their duty in response of an inmate reporting a PREA allegation. All volunteers are required to complete PREA training during their initial orientation. Per the Religious Services Chaplian, refresher training is scheduled annually in February. All volunteers are issued PREA refresher cards that are attached to their identification badge.

The facility's 58 contract staff are assigned to the medical and mental health department. Ten were randomly selected for confirmation of PREA training pursuant to the standard with no discrepancies noted. Confirmation of training was supported through the review of the MTC PREA Training Acknowledgement forms for each selected. Interviews were conducted with three (3) contract staff that included both medical and mental health practitioners who acknowledged receipt of the PREA training through their contracting agency and EMCF. Refresher training is scheduled annually. All contract staff are issued PREA refresher cards that are attached to their identification badge.

Based on the review of agency policies, confirmation of documented PREA training completed for the selected volunteers and contract staff signature of completion and interviews with both contractors who demonstrated their knowledge of the agency's' zero-tolerance for sexual abuse and sexual harassment, EMCF does meet all provisions of the standard.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review):
	East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)

- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. Observation of Intake Process
- 5. EMCF Inmate Handbook
- 6. Inmates Acknowledgement of Receipt of Orientation on The PREA of 2003
- 7. PREA Posters
- 8. PREA Educational Video
- 9. Interviews:
- a. Intake Staff
- b. Inmates

115.33 (a) (b) (c) (d) MDOC #20-14-01 and MTC # 903E.02 address the requirements for the inmate population receipt of PREA training upon arrival during intake.

Per MDOC #20-14-01, 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. 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. 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 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. The agency shall maintain documentation of inmate participation in these education sessions. 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.

The facility identified the arrival of 932 inmates during the 12-month review period. An interview with intake staff confirmed all newly arriving inmates review the PREA educational video and receive an inmate handbook upon their arrival that includes PREA education, and a briefing by staff on PREA and the agency's zero tolerance.

A review of the EMCF Inmate Handbook confirmed PREA education is included on pages 64 -68. The agency's zero-tolerance policy of sexual assault, sexual

misconduct and sexual harassment. The inmate handbook also includes but is not limited to various methods of how to report that includes staff, grievance process, outside resources, available Hotlines numbers, advocacy center information, how to avoid becoming a victim, guidance if they are assaulted, and if they become a victim. Interviews with the 49 inmates demonstrated each and all acknowledged receiving and understanding of the agency's zero-tolerance and how to report allegations of sexual abuse, sexual harassment, and retaliation. PREA posters were observed posted throughout the facility in both English and Spanish in addition to in large font. Methods of how to report sexual abuse and sexual harassment were posted near all inmate telephones accessible to the inmate population that provided a continuous degree of awareness of the agency's' zero tolerance of sexual abuse and sexual harassment in addition to PREA posters throughout the facility in all housing units, programs, visitation areas and work assignment areas.

The Auditor observed the initial risk screening process during the intake arrival of two (2) inmates. Case Managers verbally conducted an overview of the PREA pamphlet individually with each inmate, issued each an EMCF Inmate Handbook that included PREA education and asked each inmate if they were able to read and understand. Inmates were told various ways to report PREA allegations and were given various free and confidential Hotline numbers to report. The PREA video from the National PREA Resource Center "PREA: What You Need to Know" was presented for viewing by the inmates. Prior to their departure, each inmate was asked if they understood and whether they had any questions. The PREA video was present to the inmates in English, but was identified as available English, Spanish, PREA Adult Comprehensive ASL, PREA Adult Comprehensive Captioned English, and PREA Adult Comprehensive Captioned Spanish.

Interviews were conducted with 26 randomly selected inmates and 23 target group inmates, all confirmed receiving PREA education at MTC. The target group included inmates identified as low vision, hard of hearing, physically disabled, and cognitive behavior disabled. Inmates also stated PREA information was verbally explained by the intake staff during the intake process. The vast majority of inmates acknowledged the receipt of PREA education upon their arrival, during intake/orientation presented by the intake case manager, receipt of the facility's innate handbook and/or observance of the PREA video, and observance of the PREA posters posted throughout the facility and in all housing units that provide continuous PREA education awareness. There were no inmates identified as Limited English Proficient housed at EMCF to include in an access of the 12-month review period.

The selected inmate confirmed the facility provided PREA education in a manner they were able to clearly understand. Inmates acknowledged receiving an institution inmate handbook that includes PREA information and observing the PREA video during intake. The PREA education is provided in large font, verbally, in written format, in English and Spanish. Per the PREA Compliance Manager, additional methods of providing PREA education would be made available upon identifying the need.

The Auditor randomly selected 60 inmates from the arrival of the 932 during the

review period for confirmation of receiving PREA education and all were identified as acknowledging receipt of PREA training via their signature. Each inmate acknowledged receiving a facility inmate handbook that includes PREA educational material and provided their signature as receipt of PREA education on the EMCF Orientation form.

Observation and interviews with the inmate population indicated inmates were able to utilize the inmate telephones and tablets to report PREA allegations and receive victim advocate services without entering their pin number and/or other identifying information. Telephones are staged in all housing units at a distance that allow privacy during conversation.

The Auditor observed mailboxes in all housing unit areas identified for outgoing mail, medical, case manager, administrative remedy process, and legal mail. Inmate telephones are accessible in all housing units while PREA postings noting methods of reporting to include the various hotline numbers and MCASA for third party reporting. An interview with the mailroom staff confirmed the inmates' outgoing mail is not screened prior to departure. Incoming inmate mail from the MCASA or other confirmed PREA related organizations would be treated the same as legal mail.

Additionally, per interviews with staff and the inmate population, inmates are provided with paper and writing utensils to forward letters to family and friends and inmate request forms to staff. The Auditor received five requests from the inmate population requesting interviews during the site visit. All were selected during the random interview selection.

Based on the review of review of agency policy, review of inmate's arrival date and confirmation of receiving PREA training via signature, PREA education inclusion in the inmate handbook, observation of PREA video during intake process, continuous PREA education posted throughout the facility and interviews with inmates and intake staff, EMCF does meet all provisions of the standard.

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. Texas Department of Criminal Justice Developed "Conducting a Thorough

Investigation" Lesson Plan

- 5. Documentation of MDOC Corrections Investigations Division Integrity Investigator Training
- 6. Documentation of EMCF Investigators' Investigative Training
- 7. Interviews with:
- a. EMDOC Investigators
- b. MDOC Integrity Investigator

115. 34 (a) (b) (c) Agencies policies MTC #903E.02 and MDOC #20-14-01, outline the mandate of the standard. Per MTC #903E.02, If MTC conducts its own investigations of allegations of sexual abuse, investigators ae trained in conducting sexual abuse investigations in confinement settings. Documentation of such training will be maintained showing that investigators have completed the required training.

Pursuant to MDOC #20-14-01, In addition to the general training provided to all employees pursuant to e 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. 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 agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.

Per the PAQ, two staff are assigned as facility investigators. Certificates for completion of investigative training were submitted for both the EMDOC Facility Investigator and the EMDOC PREA Compliance Manager who is also approved to conduct PREA investigations. The lesson plan was developed by the Texas Department of Criminal Justice Correctional Training and Development, identified as "Conducting a Thorough Investigation." Presentation of the training was provided for assigned training staff within the MTC. The following performance objectives are included in the 33-page lesson plan: (1) Understand the history of the Prison Rape Elimination Act and PREA definitions consistent with TDCJ policy; (2) Explain the PREA standards relating to sexual abuse and sexual harassment investigations; (3). Discuss the systematic approach to ensure successful sexual abuse and sexual harassment investigations. (4) Discuss the criteria and evidence used for determining whether an allegation is substantiated, unsubstantiated or unfounded. (5) Describe the effect of report writing on administrative action and prosecutorial referral. (6) Understand the proper use of Miranda and Garrity warnings. (7) Describe the requirements of the

PREA standards with regard to medical and mental health protocols as they relate to the investigative process. (8) Identify the timeline and methods for successfully obtaining evidence through the FME process. (9) Explain how background information about the victim can aid an investigation and how delayed reporting impacts the Investigation. (10) Explain techniques for interviewing sexual abuse victims as they relate to group dynamics and identify ways to manage personal biases.

Interviews with the EMCF Investigators identified the completion of the specialized training that include the requirement of the standard provisions: techniques for interviewing sexual victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement setting; and the criteria and evidence required to substantiate a case for an administrative action or prosecution referral. The course was presented by staff assigned to the MTC Regional III Training Department.

Per an interview with the MDOC Integrity Investigator, her office is part of the Mississippi Department of Corrections. Additionally, she is a sworn law enforcement officer, and the requirement of training far exceeds that of the standard provision. However numerous certifications of investigative training were presented for review by the Auditor to include training certificates from the Mississippi Bureau of Law Enforcement Training Academy; MLEOTA Certified Investigator Program; Federal Bureau of Investigations and those presented through the Mississippi Department of Corrections, State of Mississippi Law Enforcement, and law enforcement training completion through various Colleges.

Based on the review of policies, training documentation, lesson plan and interviews, EMCF does meet all provisions of the standard.

115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections #20-14-01 PREA of 2003
- 4. Documentation of Completed Specialized Training and Training Modules
- 5. Interviews:
- a. Health Services Administrator

- b. Director of Nurses
- c. Mental Health Administrator

115.35 (a) (b) (c) (d) (e) MTC 903E.02 and MDOC #20-14-01 outlines the requirements for the completion of medical and mental health practitioners as directed in all provisions of the standard. MTC ensures all full and part-time medical and mental health care practitioners who work regularly in its facilities have been trained. 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: (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. (b) If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations. (c) The agency shall maintain documentation that medical and mental health practitioners have 687 received the training referenced in this standard either from the agency or elsewhere. (d) Medical and mental health care practitioners shall also receive the training mandated for employees under standard 115.31 or for contractors and volunteers under standard 115.32, depending upon the practitioner's status at the agency.

Interviews with two (2) medical staff and one (1) mental health practitioner acknowledged their completion of the specialized PREA training and identified the course modules and completion of PREA education pursuant to standard 115.31. The PowerPoint Training Models Completed are listed as: 1) Detecting and Assessing; 2) Reporting; 3) Responses; 4) Forensic Examination Evidence; in addition to training as member of Sexual Assault Response Team; and the Trauma Informed Care Approach. Per the Health Services Administrator, Director of Nurses and Behavioral Mental Health Administrator, all staff assigned within the department are required to complete the specialized training in addition to the PREA educational training pursuant to standard 115.32 as all medical and mental health staff are contract workers.

The facility identified 58 contract medical and mental health staff. A random selection of 15 were chosen by the Auditor for confirmation of specialized training completion. Documentation of both specialized and PREA education pursuant to standard 115.32 was submitted for review with no discrepancies noted.

Based on the review of agency policy, specialized training modules, documented completed specialized training, and interviews with both medical and mental health practitioners, EMCF does meet all provisions of the standard.

115.41 Screening for risk of victimization and abusiveness Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3 Mississippi Department of Corrections MDOC # 20-14-01, Prison Rape Elimination Act of 2003
- 4. MTC Screening for Risk of Victimization and Abusiveness Form
- 5. Inmates Initial PREA Assessments and Delinquent Reassessments Forms with Arrival Date
- 6. Observation During Site Visit
- 7. Interviews:
- a. Case Manager
- b. PREA Compliance Manager
- c. MTC PREA Coordinator
- d. Random and Targeted Group Inmates

115.41 (a) (b) (c) (d) (e) (f) (g) (h) (i) MTC) #903E.02 and MDOC # 20-14-01 governs the mandate of the standards. MTC #903E.02 requires that inmates be screened using an objective screening instrument of risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake per the provisions of the standard. Within 30 days from the inmates' arrival at the facility. The Classification staff are required to screen all inmates within 72 hours of intake through utilization of an objective instrument. Within 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based on upon any additional, relevant information that bears on the inmate's risk or sexual victimization or abusiveness. An inmate will be reassessed when warranted due to a referral, request, incident of sexual abuse, or al

MDOC # 20-14-01, outlines the following: (a) 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. (b) Intake screening shall ordinarily take place within 72 hours of arrival at the facility. (c) Such assessments shall be conducted using an objective screening instrument. (d) 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 has

prior convictions for sex offenses against an adult or child; gender nonconforming; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes. (e) 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. (f) 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. (g) 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. (h) Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to standard. (i) 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.

Per interviews with Case Managers assigned to conduct the inmates' screening for risk of sexual victimization or sexually abusing other inmates, staff utilized the objective instrument identified as the MTC Screening for Risk of Victimization and Abusiveness form. Staff indicated all inmates receive their initial (72 hour) risk screening on the day of their arrival. Inmates are not disciplined for refusing to provide responses to the questions. Each question on the instrument form is read to the inmate while documenting the inmate's response. Inmates' records are maintained in the Offender Data System. Inmates are assigned to housing based on their risk screening and as such victims and abusers are not housed together. The Count Room Officer and Central Control Staff are responsible for inmate cell assignments.

The Auditor observed the initial risk screening process upon the arrival of two (2) inmates. The risk screening interviews were conducted separately, allowing privacy for each inmate. Each question was asked in a professional manner. Case Managers discussed the PREA pamphlet individually with each inmate, issued each an EMCF Inmate Handbook that included PREA education and asked each inmate if they were able to read and understand. Inmates were told various ways to report PREA allegations and were given free and confidential Hotline numbers to report. The PREA video from the National PREA Resource Center was presented for viewing by the inmates. Each inmate was asked if they understood and whether they had any questions. Upon completion, inmates acknowledged via their signature receiving the PREA education. Staff conducting the risk screening assessment explained the use of the Offender Data System that is reviewed prior to the arrival of all inmates and prior to their initial risk screenings.

Per the PAQ, the number of inmates entering the facility (either through intake of transfer) within the past 12 months whose length of stay in the facility was for 72

hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility as zero (0). The number was later identified as 932 by the EMCF PREA Compliance. The EMCF utilizes the MTC Screening for Risk of Victimization and Abusiveness form to determine an inmates' risk assessment. Based on the responses provided by the inmate and previously collected and stored electronically within the Offender Data System of the inmate criminal history, a scoring of the inmates' risk of victimization and/or at risk of abusiveness is determined. The Auditor randomly selected five (5) newly arriving inmates for each month during the 12-month review period (60) for confirmation of timely 72 hours risk assessments. The review revealed all selected inmates received their initial risk screening on the date of their arrival as noted on the screening form.

Per the PAQ, the number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was 932. The Auditor requested documentation of completed 30-day reassessments for selected five inmates each month during the 12-month review period, (60 inmates). Although Case Managers were identified as responsible for conducting the 30-day reassessment risk screenings, there was no documentation to support the 30-day risk assessments were completed. Specifically, the review revealed zero (0) of the 60 selected inmates received a 30-day reassessment prior to the discovery of the discrepancy by the Auditor during the pre-audit phase. Upon the Auditor's notification to the EMCF PREA Compliance Manager, each of the 60 randomly selected inmates who arrived between April 2023 and March 2024 were reassessed. However, these reassessments were completed in an excess of two (2) - 14 months after the inmates' arrival at EMCF.

The Auditor received various responses from the inmate population of random and target group inmates in regard to responding to the risk screening questions after arriving at EMCF. Inmate responses vary from yes, no and/or they did not recall being asked. However, the majority did identify they were asked the risk screening questions upon arrival but could not or did not recall being asked additional times.

Per the MTC PREA Coordinator, each facility has developed local policy and /or subscribes to the customer agency policy related to the handling of sensitive information. Information goes into the offender's unit file and is disseminated on a "need to know" basis. MTC policy #903E.02 restricts access consistent with state statute, professional licensure, and ethical standards. Information is secured while not in use.

Interviews with staff assigned to conduct risk assessments and the EMCF PREA Compliance Manager indicated the storage of inmates' risk screening documentation is electronically stored with limited access to authorized staff only. The information may be shared with medical, mental health staff, and investigative staff. All hardcopy documentation is stored in vaulted filed cabinets located in the secured Records Room with limited staff access. The secured Records Office area and procedures was

observed during the site visit.

Based on the review of agencies' policies that governs the mandates of the standard provisions for the completion of initial assessments and reassessment and the facility's failure to conduct the 30 assessments in accordance with agency policies and the PREA Standard, in addition to the failure to conduct a reassessment of inmates identified as victims and/or aggressors at the conclusion of substantiated sexual abuse investigative findings, EMCF does not meet the mandate of provisions (f) and (g). Therefore, the facility will be placed in a corrective action period for 150 days upon submission of the interim report due to corrective action measures were initiated during the pre-audit phase.

Corrective Action Plan:

The intake Coordinator is responsible for ensuring all inmates arriving at the EMCF be screened for risk of victimization or abusiveness within 24 hours of arriving at the facility. The Intake Coordinator will reassess the inmate's risk of victimization or abusiveness within 30 days of the initial assessment.

At the completion of all substantiated sexual abuse investigative case files, the PREA Compliance Manager will email the assigned Case Manager Supervisor and assigned Case Manager of the inmate reclassification status change of sexual victimization and/or abusiveness.

Corrective Action Applied:

The facility provided 43 initial and reassessment risk screenings upon initiating the corrective action measures during the post audit and corrective action period with documentation of the inmate's arrival date. Per the EMCF PREA Compliance Manager, a set date for the completion of risk screening reassessments has been determined as not later than 25 days of the inmate's arrival. The review of the 43 risk screening assessments indicated the following:

Five (5) risk screening reassessments were conducted on the 10th day; two (2) were conducted on the 11th day; one (1) was conducted on the 12th day; two (2) were conducted on the 14th day; eight (8) were conducted on the 15th day; six (6) were conducted on the 16th day; three (3) were conducted on the 17th day; two (2) were conducted on the 18th day; one (1) was conducted on the 19th day; two (2) were conducted on the 20th day; nine (9) were conducted on the 22nd day; one (1) was conducted on day 24th day. The review identified one reassessment was completed in an excess of 30 days.

The victim of a staff member on inmate sexual abuse allegation was transferred to another MDOC facility the following day of the reported allegation. Notification of the investigative finding and reclassification assignment as a victim of sexual abuse was forwarded to his newly assigned upon the completion of the investigative findings.

The facility has established a set time period for the completion of risk screening reassessments of 25 days. The facility demonstrated compliance of timely risk screening reassessments through the review of 42 completions within 24 days. One

risk screening reassessment was identified as completed in an excess of 30 days. Although one discrepancy was identified, EMCF has demonstrated procedures are in place for the completion of risk screening assessments to be completed within 25 days of the inmate's arrival. Therefore, EMCF does meet all standard provisions to include standard provision (f) and (g).

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (Documents, Interviews, Site Reviews)

- 1. East Mississippi Correctional Facility (EMCF) Completed PREA-Audit Questionnaire (PAO)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) # 20-14-01 Prison Rape Elimination Act of 2003
- 4. MTC Screening for Risk of Victimization and Abusiveness Form
- 5. Inmates Initial PREA Assessments and Delinquent Reassessments Forms with Arrival Date
- 6. Interviews:
- a. Case Manager
- b. PREA Compliance Manager
- c. MTC PREA Coordinator
- d. Inmate Interviews

115.42 (a) (b) (c) (d) (e) (f) (g) Agency policies MDOC 20-14-01, MTC#903E.02 and EMDOC #12.004 outlines the use of information from the risk screening when assigning inmate housing.

Pursuant to EMDOC #12.004, offenders are screened within 24 hours of arrival at the facility for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. Housing assignments are made accordingly.

Per MDOC SOP 20-14-01, 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.

Pursuant to MTC #903E. MTC will use information form the risk screening required to inform housing, bed, work, education, and program assignments with the goals of keeping separate those inmates at high risk of being sexually victimized from those who are at a high risk of being sexually abusive. Individual determinations on how to ensure the safety of each inmate will be made.

Per the PAQ and interview with the EMCF PREA Compliance Manager, 932 inmates were admitted to the facility during the 12-month review period. The Auditor randomly selected five inmates for each month of the 12-month review period for a total of 60 inmates for confirmation of 72-hour and 30-day reassessments. The reviews indicated each of the 60 inmates were assessed on the day of arrival. However, the documentation review also confirmed zero (0) inmates received a 30 day reassessment after their arrival. Upon the Auditor's notification to the EMCF PREA Compliance Manager, each of the 60 randomly selected inmates who arrived between April 2023 and March 2024 were reassessed. However, these reassessments were completed in an excess of two (2) - 14 months after the inmates' arrival at EMCF. However, the remaining 872 inmates were not identified as reassessed. Due to staff failure to properly conduct the inmates' reassessments in which the risk screenings are utilized to inform housing, bed, work, education, and program assignment with the goal of keeping separate those at high risk of sexually victimization for those at high risk of being sexually abusive was not accomplished in accordance with agencies policies and/or the standard provisions (a) and (b).

The Auditor requested a bed assignment roster of inmates that were identified with history of sexual victimization and/or history of sexual abusiveness as potential victim and potential aggressor. The review identified the most recent data entry for an inmate identified as a Potential Victim was dated October 5, 2022. The most recent data entry for an inmate identified as a Potential Aggressor was documented as September 7, 2021.

The facility identified zero (0) of the 932 inmates who arrived during the 12-month review period, were identified as reporting/having a history of sexual victimization and or history of sexual abusiveness. However, the Auditor's review of 60 inmates 72-hour risk assessment screenings identified two (2) inmates were identified as reporting a prior history of sexual victimization. There was no documentation to support the inmates who were identified as such by staff.

Interviews were conducted with four (4) inmates who were documented as reporting a prior history of sexual abuse with EMCF. Their arrival at EMCF was noted as previous years prior to the 12-month review period. An additional inmate identified himself as reporting a prior victim of sexual victimization during the initial risk screening, however he was not noted as identified by staff.

Per MDOC #20-14-01The agency shall make individualized determinations about how to ensure the safety of each inmate. 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. 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. A transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration.

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

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.

Pursuant to MTC #903E. MTC will use information form the risk screening required to inform housing, bed, work, education, and program assignments with the goals of keeping separate those inmates at high risk of being sexually victimized from those who are at a high risk of being sexually abusive. Individual determinations on how to ensure the safety of each inmate will be made. The housing assignment of transgender or intersex inmates will be made on a case-by -case basis.

Per the MTC PREA Coordinator, the process of assigning inmates to various facilities is performed by the customer agency classification process. However, when LGBTI inmates are assigned to an MTC facility, the initial inmate screening process is used simply to inform housing assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those inmates at high risk of being sexually abusive. It is MTC's policy that housing assignments for transgender or intersex inmates are made on a case-by-case basis.

MDOC #20-14-01 states 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.

Per the EMCF PREA Compliance Manager, there has not been an inmate identified as a transgender or intersex assigned at the facility since his employment as of February 2024. However, housing for the inmates would be determined on a case-by-case basis and facility designation would be determined prior to the inmates' arrival at EMCF. He added he was informed an inmate identified as transgender was previously assigned at the facility during the review period. He was aware that individuals identified as transgender and/or intersex would be reassessed bi-annually and stated the inmates would be allowed to express concerns in regard to their safety at any time. Transgender and intersex inmates would be allowed to shower in the medical department where they would have access to privacy in single stall showers.

One (1) transgender was designated at the facility August 13, 2023, through

November 16, 2023. Therefore, a bi-annual assessment was not required. There were zero transgender and/or intersex inmates housed at the facility during the site visit to conduct interviews. Staff did not identify a intersex inmate having been assigned to the facility. An interview with a case manager indicated an inmate identified as transgender and/or intersex would reassess bi-annually and would be allowed to provide input and express to their concerns of safety at the facility at any time. Per staff one transgender was assigned to a single cell and was allowed to have complete showers within the medical unit where privacy provided via single shower stalls and separately from the general population inmates.

Interviews with five (5) inmates identified as gay indicated they have not been assigned to a designated housing unit designated for gay, bi-sexual, or transgender individuals.

Based on the review of agency policies, the facility does have policies and scheduled procedures in place to the meets the provisions of the standard, however the facility failed to meet the provisions of (a) and (b). Documentation review for 30-day reassessments requested for the randomly selected 60 inmates revealed zero (0) 30-day reassessments were completed in accordance with agency policy and the standard. Therefore, staff failed to utilize information that could have assisted in ensuring proper housing, bed, work and program assignments. Additionally, although inmates were identified as acknowledging a prior history of sexual victimization, documentation did not support the information was captured by staff nor documented as required per agency policies nor the standard provisions (a) and (b). Based on the findings, the facility will be placed in a corrective action period for 150 days upon submission of the interim report due to corrective action measures being initiated during the pre-audit phase.

Correction Action Plan:

The Intake Coordinator is responsible for ensuring all inmates arriving at the EMCF be screened for risk of victimization or abusiveness within 24 hours of arrival at the facility. The Case Manager Supervisor will review each intake completed for accuracy and ensure reassessments are completed within 30 days. Information gathered during the risk screening will be utilized when determining the inmate's 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 identified high risk of being sexually abusive. All inmates identified as such will be documented as such in the ODS and housed accordingly.

Corrective Action Applied:

The facility provided a roster of incoming inmates during the corrective action period. The confirmation of completed risk assessments was in accordance with agency policy and the standard 115.41. The information collected during the risk screening was utilized in the determination of housing and programming. Rosters confirmed inmates identified with various mental health concerns are assigned to a designated housing unit. Inmates identified with a history of sexual abuse as a victim are identified and are house separately from those inmates identified as an aggressor.

Inmates identified as an aggressor are not assigned to work assignments. Although inmates identified as an aggressor and/or a victim of sexual abuse may attend educational programs together, they are under direct staff supervision.

The facility is in compliant with all provisions of standard 115.42.

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed PREA-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. PREA Case Files
- 5. Interviews:
- a. Warden
- b. Staff who Supervise Segregation
- c. EMCF PREA Compliance Manager/Investigator

115.43 (a) (b) (c) (d) (e) MTC #903E.02 prohibits the placing 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. 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.

Pursuant with MDOC #20-14-01, Inmates at high risk for sexual victimization shall not be placed ininvoluntary 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 involuntarily segregated housing for less than 24 hours while completing the assessment. 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. The facility shall assign such inmates to involuntary segregated housing only unit an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If an involuntary segregated housing assignment is made pursuant to paragraph (a), the facility shall clearly document: (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. 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.

Per interviews with the EMCF Warden, EMCF PREA Compliance Manager/Investigative Staff, and staff assigned to supervise segregation, the facility does not assign inmates at high risk of sexual victimization in involuntary segregation. Alternate housing is available and would be arranged within the general population. The identified aggressor would be placed in segregation pending the investigation and further actions as applicable. The Auditor's review of 33 investigative case files confirmed there were zero inmates identified as at high risk for sexual victimization placed in involuntary segregated housing during the 12-month review period and/or during the site visit for interview.

Per an interview with staff assigned to supervise segregation, all inmates placed in segregation are given the opportunities for recreations, phone calls, education, haircuts, legal and leisure reading material, and personal property, etc. However, due to security measures within segregation, work opportunities are limited.

Based on the review of policy, investigative case files, and interviews with Warden, EMCF PREA Compliance Manager/Investigative Staff staff assigned to supervise segregation, EMCF does meet all provisions of the standard.

115.51 Inmate reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 Prison Rape Elimination ACT of 2003
- 4. MTC/EMCF MOU with Mississippi Coalition Against Sexual Assault (MCASA)

- 5 EMCF Inmate Handbook English/Spanish
- 6. PREA Posters English/Spanish
- 7. Completion of Call to External Entity
- 8. Completed Internal Call to PREA Hotline
- 9. Observation During Site Visit
- 10. Interviews:
- a. Random Staff
- b. Random and Target Inmates

115.51 (a) (b) (c) (d) MDOC Policy 20-14-01 states 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.

MTC 903E.02 states MTC has established procedures allowing for multiple ways to report allegations of sexual abuse or 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.

Per MDOC Policy 20-14-01, 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. PREA information is included in the MTC/EMCF Inmate Handbook pages 64 – 66 that includes various methods of reporting PREA allegations both internally and externally. Internal methods include immediately contracting staff verbally or via calling the MTC PREA Tip Line #66; or MDOC PREA Tip Line #99; Reports of sexual abuse are confidential and information, including but not limited to the identity of the victim, the identity of the person reporting the sexual abuse and the identity of the alleged perpetrator is only be shared with essential employees involved in the reporting, investigation, discipline, and treatment process or as otherwise required by law.

Third party reporting can be reported by calling staff members, and general public. Third-party reporting can be reported by calling the MDOC at 601-359-5600. The inmate handbook and posters throughout the facility identify the address for the Mississippi Coalition Against Sexual Assault as P.O. Box 4172 Jackson, MS 39202. Telephone number (888) 987-9011. MCASA can be contacted through written correspondence and telephonically.

The Auditor observed the inmate population accessibility of mailboxes, and use of facility issued tablets that allow inmates to communicate with staff and third parties

both verbally and written. An inmate demonstrated his use of the tablet that allows both internal and external reporting. Additionally, inmates have access to writing utensils such as paper, pencils and ink pens to forward letters both internally to staff to include an inmate request form and externally to third parties. Mailboxes are located within the housing unit core for outgoing mail, legal mail, administrative remedies and medical slips. An interview with the mailroom indicated only incoming inmate mail is screened with the exception of legal mail in addition to incoming mail from confirmed PREA related organizations.

The Auditor's notice of the scheduled PREA audit was also observed posted throughout the facility to include in all inmate housing, facility entrance, visitation, program and work assignment areas and was acknowledged by the inmate population during the interview process and through their submission of request to be interviewed. The Auditor also received correspondence from the inmate population requesting to be interviewed during the site visit through written correspondence and through third party.

The Auditor utilized the inmate telephones to conduct a test call to the MTC PREA Tip Line, MDOC PREA Tip and the MCASA crisis line and confirmed all calls were successful. The Auditor conducted a call to MDOC at 601-359-5600 while outside the facility. The call was received by MDOC personnel who stated the calls are answered Monday – Friday 8:00 a.m. – 5:00 p.m. only, recording services are not available to the callers.

MDOC Policy 20-14-01 and MTC 903E.02 includes the mandate that staff accept reports made verbally, in writing, anonymously, and from third parties with no exceptions and shall promptly document any verbal reports within 24 hours. Staff interviews confirmed their knowledge of policy that mandates they must accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously, and from third parties to supervisory staff. Each stated they would document the information they received and the method in which it was received to include verbally, written notes by an inmate, received via a third party and/or anonymously. Staff indicated they were comfortable reporting PREA allegations directly to their supervisor and/or the facility investigators to include the EMCF PREA Compliance Manager. Staff indicated they would document the information received as soon as possible and always prior to their departure from their shift.

The agency does not detain inmates solely for civil immigration purposes.

The review of the 33 completed PREA investigative case files, confirmed the inmate population utilized various reporting methods of reporting that included verbally to staff, utilization of the PREA Hotline, submission of written notes, and calls to the MCASA. Upon being asked if the grievance process was available for reporting, most inmates acknowledge the option. Ten allegations were reported through the MCASA crisis line, one (1) was reported to the MTC PREA Hotline; two (2) were reported through family members/other third-party resources and the remaining were reported directly to staff verbally and/or through written format.

Interviews with random and targeted group inmates confirmed their knowledge of the

various resources to report PREA allegations while identifying the various numbers posted near all inmate phones, on posters throughout the facility and within the inmate handbook. Interviews conducted with inmates identified as hard of hearing, low vision, cognitive disabilities, and physical disabilities also indicated they were aware of the various resources to report sexual and/or sexual harassment that are posted throughout the facility and noted in the facility's inmate handbook.

MDOC Policy 20-14-01 and MTC 903E.02 includes the mandate that staff accept reports made verbally, in writing, anonymously, and from third parties with no exceptions and shall promptly document any verbal reports within 24 hours. Interviews with random and specialized staff indicated all were aware of their duty to report all allegations, and/or knowledge of sexual abuse and/or sexual harassment immediately while documenting the information as soon as possible and always prior to their departure. Staff indicated a private method of reporting would be directly to the supervisor, EMCF investigators and/or via calling one of the Hotlines/Tip lines.

Based on the review of agency policies, investigative case files identifying the method of reporting, inmate handbook in Spanish and English, observation during site visit, PREA posters listing the available resources for reporting, agency's MOU with MCASA for reporting, the Auditor's testing of the inmate's phone, staff and inmate interviews, it is determined EMCF does meet all provisions of the standard.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-audit Questionnaire (PAO)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01
- 4. EMCF Inmate Handbook
- 5. PREA Investigative Case Files
- 6. Interviews
- a. EMCF Grievance Officer
- b. Inmates who reported sexual abuse
- 115.52 (a) (b) (c) (d) (e) (f) (g) MTC and MDOC have administrative policies that identify procedures for inmates to utilize the administrative remedy to address

inmate grievances regarding sexual abuse. The inmates' allowance to submit such grievances is also included in the EMCF Inmate Handbook.

MTC and MDOC allow an inmate to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred. No initial time limit shall be imposed for sexual abuse, sexual battery, staff sexual misconduct or sexual harassment grievances. An attempt to informally resolve the grievance is prohibited and the allegation of sexual abuse will not be referred to the any staff member identified as the subject of the complaint. Such grievance is not to be referred to a staff member who is the subject of the complaint.

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 to the grievance. The PAQ indicated the number of grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days as zero.

The agency may claim an extension of the 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. No documentation of an extension of time to respond was indicated as requested.

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 request on behalf of inmates.

If a third party files a request on behalf of an inmate, the facility will require as a condition of processing the request that the alleged victim agrees 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 their behalf, the agency shall document the inmate's decision.

There were zero grievances regarding sexual abuse filed on behalf of an inmate during the review period.

Policy limits the agency's ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the facility demonstrates that the inmate filed the grievance in bad faith.

Notices of third-party reporting were observed throughout the facility to include the entry, and visitation accessible and visible to visits, staff, contractors, volunteers and the inmate population. These resources include the Mississippi coalition Against Sexual Assault (MCASA) located at P.O. Box 4172 Jackson, MS 39296 or via calling 1-888-987-9011. Confirmation of the available resource was confirmed during an interview with the MCASA PREA Advocate Coordinator. This information is also included in the EMCF Inmate Handbook.

The PREA Tip Line is a fee confidential way for inmates to report sexual assault and sexual misconduct allegations. The tip line can be accessed by the inmate lifting the accessible inmate telephone handset, selecting language preference, entering the tip line number and leaving a two (2) minute recorded voice message. The Auditor conducted a test of the inmate's accessibility to the PREA Tip Line and confirmed the available resource.

A teletypewriter (TTY) phone is available for hearing impaired offenders. The Auditor observed the TTY phone was stored in the medical department and is placed within the housing unit of inmates who are required to communicate with family and friends through the use of it.

An interview with the EMCF Grievance Officer indicated marked mailboxes identified as "Administrative Remedy" are located within the housing unit pod available for the submission of grievances. The mailboxes are checked at a minimum once per day Monday – Friday. All grievances identified that report PREA allegations are immediately referred to the EMCF Investigators and/or the CID Investigators for an investigation and response to the inmate.

The facility provided three grievances in regard to sexual abuse allegations. Documentation indicated each of the allegations were referred to the CID Investigator.

Inmates acknowledged their awareness of their right to report sexual abuse and/or sexual harassment via the grievance process during the interview process.

Based on the review of agency policies, grievance referred to CID investigations, and review of the grievance process, observance during the site visit interviews with Grievance Officer and inmates who reported sexual abuse, EMCF does meet all provisions of the standard.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed PREA-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) SOP 20-14-01 Prison Rape Elimination Act of 2003
- 4. MOU Between Mississippi Department of Corrections and Mississippi Coalition

Against Sexual Assault (MSCASA)

- 5. Completed Calls to MCASA
- 6. EMCF Inmate Handbook
- 7. Observation during site visit
- 8. Inmate Telephones/Tablets
- 9. PREA Posters
- 10. PREA Investigative Case Files
- 11. Interviews:
- a. Inmates who reported sexual abuse
- b. Random and Target Group Inmates
- c. MCASA PREA Advocate Coordinator
- d. EMCF Investigator

115.53 (a) (b) (c) MTC#903E.02 outlines the facility's obligation to provide inmates with access to outside victim advocates for emotional support services related to sexual abuse while providing inmates with mailing addresses and toll-free hotline numbers. Each MTC facility informs inmates, prior to giving them access to outside support services, the extent to which such communication will be monitored, and inform inmates of the mandatory reporting rules governing privacy, confidentiality and /or privilege that apply for disclosure of sexual abuse made to outside victim advocate, including limits of confidentiality.

Pursuant to MDOC #20-14-01, 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 manner as possible. 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. 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.

The Mississippi Department of Corrections has entered a Memorandum of Understanding (MOU) with the Mississippi Coalition Against Sexual that includes

EMCF. This agreement was confirmed by the MSCASA PREA Advocacy Coordinator. The most recent MOU was signed by MSCASA Executive Director and MDOC Commissioner on October 1, 2023, with an effective date October 2, 2023, to September 30, 2025. MSCASA agrees to respond to victim request of services to incarcerated survivors of sexual abuse and sexual harassment. The support services are related to sexual violence including, hospital accompaniment for the victim during the forensic medical examination process, in-hospital investigatory interviews, emotional support series in person and referrals. Respond to calls form inmates to the toll-free hotline number as well as written correspondence. Provide follow up services and crisis intervention to victims of sexual assault, as resources allow. Maintain confidentiality of communication with victims who receive MSCASA advocacy support service. Maintain and provide MDOC with a list of current rape crisis center personnel by regions, who have completed MDOC volunteer training. Communicate any questions or concerns with the MDOC Statewide PREA Coordinator along with occasional phone meetings or phone calls as needed.

A review of the MDOC agency website at mdoc.ms.gov/inmates/information-all-inmates/prison -rape-elimination-act, noted the following: MS Dept. of Corrections & MS Coalition Against Sexual Assault (MCASA) in accordance with PREA Standard §115.53 & PREA Standard §115.253 Inmate access to outside confidential support services. We can provide the support you need to include counseling services, confidentiality, reporting abuse and advocacy support. To Report Sexual Abuse Contact: MS Coalition Against Sexual Assault at: P.O. 4172 Jackson, MS 39296 or Call: 1-888-987-9011.

The EMCF Inmate Handbook page 66 notes the MSCASA is available for an inmate to contact as an outside victim advocate for emotional support services related to sexual abuse. PREA posters were also posted throughout the facility accessible to the inmate population with confidential unmonitored outside source information to include via phone and/or written. The MSCASA may be reached the MSCASA Tip Line at *888, or 1-888-987-9011 in addition via written correspondence at MS Coalition Against Sexual Assault P.O. Box 4172 Jackson, MS 39296.

The Auditor conducted an interview with the MCASA PREA Advocate Coordinator who confirmed the services identified within the contract between her agency and EMCF. She added victim advocacy services are available via phone, virtual and/or in-person as needed. The advocate services work in conjunction with the local hospitals. Victim advocacy services are unlimited and are available during the examination, investigation and for emotional support. Anonymous calls are also received. She added, as the facility often receives calls that are non-related to sexual abuse, staff explain to the inmates the purpose of the phone line and services provided.

The Auditor utilized the facility's inmate telephones to confirm inmates' accessibility to complete a call to the MCASA Tip Line *888 that also provides victim advocate services. The calls were confirmed to be free and confidential as noted on the posters throughout the facility. The information is posted near the inmate telephones within all housing units with the inmates' viewing accessibility while printed on red paper in large font.

The Auditor observed the inmate population accessibility of mailboxes, and use of facility issued tablets that allow inmates to communicate with the MSCASA. Additionally, inmates have access to writing utensils such as paper, pencils and ink pens to forward letters to the MSCASA. Mailboxes are located within the housing unit core for outgoing mail. An interview with the mailroom staff indicated only incoming inmate mail is screened with the exception of legal mail and confirmed PREA related organizations.

Interviews with random and targeted group inmates to include physical disabilities, low vision, hard of hearing and bi-sexual/gay expressed their awareness and knowledge of the MSCASA postings, however, numerous stated they have not attempted to utilize the services. However, per the Auditor's review of 33 investigative cases files, it was noted that the EMCF Facility Investigator completed an Inmate Sexual Assault /Abuse Advocate Form noting whether the alleged victim was offered a Sexual Assault /Abuse and /or Requested a Sexual Assault/Abuse Advocate for each inmate upon reporting sexual abuse and/or sexual harassment. There were no circumstances documented by the EMCF Investigator where an inmate requested a Sexual Assault/Abuse Victim Advocate.

Interviews conducted with four (4) inmates who reported/identified in sexual abuse investigations, indicated they were aware of the various services provided by MSCASA as it posted throughout the facility. Each also stated at the initiation of reporting and interview process the facility investigator inquired if they would like to speak with a victim advocate in which each victim stated they declined the offer.

Based on the review of the MOU agreement between MDOC and MSCASA, interviews with the MSCASA PREA Advocate Coordinator random and targeted group inmates, inmates who reported sexual abuse, review of investigative case files that documented staff offering of a victim advocate to inmates, PREA posters, phone number postings, observation during site visit, and inmates' awareness of the available advocacy services, EMCF does meet all provisions of the standard.

Auditor Overall Determination: Meets Standard Auditor Discussion Evidence Reviewed (documents, interviews, site review): 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ) 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons 3. Mississippi Department of Corrections (MDOC) 20-14-01 PREA of 2003

- 4. MTC Website
- 5. EMCF Inmate Handbook
- 6. Observation During Site Visit
- 7. Third Party Reporting Posters and Flyers
- 8. PREA Investigative Case Files
- 9. Interviews:
- a. MCASA PREA Advocate Coordinator
- b. MTC PREA Coordinator

Per MDOC #20-14-01 The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly inform on how to report sexual abuse and sexual harassment on behalf of an inmate.

MTC#903E.02, notes MTC provides a method to receive third-party reports of inmate sexual abuse or sexual harassment in accordance with MTC policy. MTC facility publicly distribute information on how to report inmate sexual abuse or sexual harassment on behalf of inmates.

A review of the MTC website at www.mtctrains.com/prea, notes "To make an allegation of inmate-on-inmate or staff-on-inmate sexual abuse or sexual harassment, please contact via email the MTC Prison Rape Elimination Act (PREA) Coordinator. MTC will ensure an administrative or criminal investigation for all allegations of sexual abuse and sexual harassment. MTC will ensure an administrative or criminal investigation for all allegations of sexual abuse and sexual harassment. MTC PREA contact: Heather Manuz, MTC PREA Coordinator, Heather.Manuz@mtctrains.com; or Mike Atchinson, Assistant PREA Coordinator, Mike.Atchison@mtctrains.com. The Auditor submitted a test email to the MTC PREA Coordinator that was acknowledged within three minutes of the forwarded email.

Third party reporting is also included in the EMCF inmate handbook that notes staff members, general public and third-party reporting through the MDOC at 601-359-5600. The Auditor conducted a test call and was advised the service is available Monday – Friday 8:00 a.m. – 5:00 p.m.

Methods of third-party reporting was observed posted throughout the facility on bulletin boards and walls to include but not only on red copy paper noticeable to all staff, contractors, volunteers, visitors and inmates that includes the PREA Mississippi Coalition Against Sexual Assault (MCASA) TIP Line *888; MTC PREA Hotline *99#; MDOC PREA Hotline *66#. The MCASA mailing address P.O Box 4172 Jackson, MS., 39296 and additional phone number 1-888-987-9011 is included. These calls are free and confidential. The Auditor successfully utilized the inmates' institutional phones to contact the MCASA Tip Line *888; MTC PREA Hotline *99# and the MDOC PREA Hotline *66# during the site visit. This information is available in Spanish and English.

The Auditor observed the inmate population accessibility of mailboxes, and use of facility issued tablets that allow inmates to communicate with staff and third parties both verbally and written. An inmate demonstrated his use of the tablet that allows both internal and external reporting. Additionally, inmates have access to writing utensils such as paper, pencils and ink pens to forward letters both internally to staff to include an inmate request form and externally to third parties. Mailboxes are located within the housing unit core for outgoing mail, legal mail, administrative remedies and medical slips. An interview with the mailroom indicated only incoming inmate mail is screened with the exception of legal mail and confirmed PREA related organizations.

The Auditor's notice of the scheduled PREA audit was also observed posted throughout and was acknowledged by the inmate population during the interview process and through their submission of request to be interviewed. The Auditor also received correspondence from the inmate population requesting to be interviewed during the site visit.

The Auditor conducted an offsite interview with the MCASA PREA Advocate Coordinator via calling 1-888-987-9011, during the pre-audit phase. She indicated upon receiving a call from the inmate population, an email is immediately forward to the EMCF PREA Compliance Manager EMCF Investigators with a summary information provided by the inmate.

Interviews with staff and the inmate population in addition to the review of PREA investigative case files confirmed the inmate's awareness of third-party reporting methods. The Auditor's selection of 33 PREA investigative case files identified ten (10) inmates elected to report via the MCASA and one (1) elected to report to a family member who forwarded his allegation of sexual abuse to the inmate's attorney.

Based on the review of agencies policies, observation during the site visit, confirmation of inmate phone and tablet access, confirmation of various third-party reporting resources, investigative reports, EMCF does meet the mandate of the standard provisions.

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons (PREA)

- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA of 2003
- 4. PREA Investigative Case Files
- 5. Interviews:
- a. Warden
- b. MTC PREA Coordinator
- c. Random Staff'
- d. Medical and Mental Health Staff
- 115.61(a) In accordance with MTC #903E.02, and MDOC # 20-14-01, all staff are required to report immediately any knowledge, suspicion, 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 organization. All staff are required to report immediately any retaliation against inmates or staff who reported an incident of sexual abuse or harassment, staff neglect or violation of responsibilities that may have contributed to an incident of retaliation.
- 115.61 (b) MTC #903E.02 and MDOC # 20-14-01, notes, the following, 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.

Interviews with 25 randomly selected security and non-security staff from various shifts and positions confirmed their awareness of their responsibility to report all information reported to them and/or information they became aware of to their first line supervisor and/or a higher-ranking supervisor to include the EMCF Facility Investigators. Staff indicated they would only share information of reported PREA allegations to staff with a need to know, such as security supervisors, medical, mental health, and investigative staff. Staff further stated they would document the information in written format for submission to the shift supervisor and/or investigating staff as soon as possible and prior to departing from their shift. The information would not be noted in the housing unit logbooks and/or methods accessible to others without the need to know.

115.61 (c) 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. Interviews with both medical and mental health staff confirmed the disclosure of limitation confidentiality is given to the inmate during the department intake process. There were no circumstances in which reported allegations were required to be reported to other agencies outside of MTC at the facility level. All reported allegations of sexual abuse were immediately reported to the facility investigators.

115.61 (d) 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. Per the MTC PREA Coordinator, although MTC makes does not confine person under the age of 18, if an allegation of sexual abuse or sexual harassment is made by someone considered to be vulnerable adult under state or local law or perceived to be a vulnerable adult, the agency would report the allegation to the designated State or local services agency and investigative authority under applicable mandatory reporting laws. Per interviews with the Warden, EMCF PREA Compliance Manager and review of the facility inmate roster that includes the age of inmates, the facility does not house inmates under the age of 19. In cases of vulnerable adult inmates, the Mississippi Department of Human Services Adult Protective Services would be notified by the MDOC Integrity Investigator. Additionally, an investigation would be completed by the EMCF and/or MDOC Investigators.

115.61 (e) The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. The review of 33 PREA investigations confirmed investigation were completed upon being reported by third-party (Mississippi Coalition Against Sexual Assault Crisis Line), written and verbal reporting of allegations to staff. There were zero allegations reported anonymously. However, interviews with the EMCF and MDOC Investigators confirmed an investigation is completed regardless of how an allegation is reported.

Based on the review of agency policies, investigative case files, interviews with random security and non-security staff, Warden, MTC PREA Coordinator, medical and mental health staff, EMCF does meet all provisions of the standard.

115.62 Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons (PREA)
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA of 2003
- 4. East Mississippi Correctional Facility Policies and Procedures #12.004 Offender Rights

- 5. Interviews:
- a. Warden
- b. Agency Head
- c. Random Staff

115.62 (a) In accordance with MTC 903E.02, and EMCF # 20-14-01 requires immediate action to protect the inmate to including taking some action to assess appropriate protective measure without unreasonable delay upon learning that an inmate is subject to a substantial risk of imminent sexual abuse. EMCF #12.004 notes Any staff member wo observes Incidents of behaviors that cause a reasonable concern that an offender may be at significant risk of sexual victimization or is potential sexual predator shall verbally report concerns to a supervisor and document the incident or observation on an incident report form.

Per an interview with the Agency Head, the agency requires immediate action to protect the inmate to include an action to assess appropriate protective measures without unreasonable delay. Efforts of protection includes at least temporarily, separate the inmate who is reportedly subject to a substantial risk of imminent sexual abuse from the general population, notifying supervisory staff in a confidential manner, document observations and information, and investigate the nature and scope of risk to the offender, and taking action consistent with the facts derived and customer agency policy.

The Warden confirmed any inmate identified as subject to substantial risk of imminent sexual abuse would immediately be removed from the possible threat to ensure a safe environment and an investigation would be initiated.

The EMCF PAQ identified zero instances where an inmate was identified as subject to a substantial risk of imminent sexual abuse. A review of the 33 investigative case files to include sexual abuse and sexual harassment did not identify an inmate as being subject to substantial risk of imminent sexual abuse prior to reporting the allegation and the initiation of the investigation. Interviews conducted with 25 random confirmed upon being advised of an inmate being subject to a substantial risk of sexual abuse, the inmate would immediately be removed from the area of threat, while maintaining a visual on the inmate and notifying the shift supervisor.

Based on the review of agency policy, interviews with random staff, Warden and Agency Head and review of PREA investigative case files, EMCF does meet all provisions of the standard.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons (PREA)
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA of 2003
- 4. Interviews:
- a. Warden
- b. Agency Head
- c. EMCF PREA Compliance Manager

115.63 (a) (b) (c) (d) Pursuant with MTC 903E.02 and EMCF #20-14-01, upon the facility receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head if the facility or appropriate office of the agency /facility where sexual abuse is alleged to have occurred. Within 72 hours, the facility head provides such notification as soon as possible after receiving allegation and document the notification. Both policies require allegations received from other facilities to be investigated.

An interview with the Agency Head indicated the facility's head/warden is the designated point of contact in accordance with MTC 903E.02 and the facility ensures the allegation is investigated in accordance with the policy.

The EMCF PAQ indicated one (1) allegation of sexual abuse was received from another facility during the 12-month review period. However, this statement was later identified as incorrect by the EMCF PREA Compliance Manager, as there was zero reported.

Per the EMCF Warden, the facility has not received any notification from other correctional facilities of a previous unreported act of sexual abuse having occurred at EMCF. Additionally, EMCF has not reported any previous acts of unreported sexual abuse that occurred at an inmate's previous correctional facility. However, she or her designated staff would notify the affected correctional facility immediately on the day of notification. The notification would be made verbally and via a corresponding email.

Based on the review of agency policies, statement of fact, and interviews with the Warden and Agency Head, EMCF does meet all provisions of the standard.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed PREA-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA of 2003
- 4. Interviews:
- a. Inmates Who Reported Sexual Abuse
- b. Security Staff First Responders
- c. Random security and non-security staff

115.64 (a) (b) (c) (d) MDOC ##20-14-01 and MTC #903E.02 govern the mandate of the standard. Procedures are outlined in the response to an allegation of sexual abuse for security and non-security staff and require 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: a) Separate the alleged victim and abuser; b)preserve and protect any potential crime scene until appropriate steps can be taken to collect any evidence, the , and protect crime scene until appropriate steps to collect evidence; c) if the alleged abuse occurred within a time period that still allows for the collection for physical evidence, request the alleged victim and alleged aggressor not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating; d) if the first responder is not a security staff member, request that the alleged victim not take any action that could destroy physical evidence, and the notify security staff. Interviews with both security staff and non-security random staff identified their knowledge of first responder duties and indicated they would immediately separate/ remove the inmate from any identified threat, while maintaining a visual and/or secure in a separate area and notify their security supervision who would continue with further protocol measures.

The facility reported 69 sexual abuse allegations during the 12-month review period. Nine (9) sexual abuse investigations remained pending throughout the initial audit process. The PAQ did not note the number of sexual abuse allegations were reported to a security staff member and/or a non-security staff member, where the alleged victim does not take any actions that could destroy physical evidence. However, the facility later identified there were 12 instances where the first responder was identified as security staff and the victim was instructed to not take any actions that could destroy the physical evidence.

All staff to include contractors and volunteers are issued and carry a PREA First Responder Duties Card. The card outlines first responder duties as the following: 1) Separate the victim and abuser; 2) Preserve and protect any crime scene until the

collection of evidence. 3) Request the victim and/or abuser not take any actions that could destroy evidence, (washing, brushing teeth, changing, etc.) 4) If not a security staff member, responder shall be required to request that the victim not destroy evidence then notify security. Staff reference the PREA First Responder Duties Card during interviews.

Interviews were conducted with both security and non-security staff who were aware of their responsibility in response to a reported sexual abuse/observation of sexual abuse as a first responder while stating they would advise the inmate to preserve all physical evidence, maintain a visual on the victim while ensuring separation from the aggressor and notify the shift commander and/or nearest security staff member.

An interview with a security first responder indicated separation of the abuser and victim was ensured, to include the removal of both inmates from the identified area (cell) while the identified area was secured to prevent the removal and/or contamination of possible physical evidence. The shift supervisor was immediately notified, and the alleged victim was immediately escorted to the medical department for a medical examination. The alleged aggressor was also escorted by security staff from the affected area.

Interviews were conducted with four inmates who reported sexual abuse/or identified in sexual abuse investigations. Each indicated upon reporting and/or being approached, they were removed from their area, separated from all inmates, interviewed by investigative staff, applicable clothing was collected and bagged as evidence, each inmate was examined by medical staff at the facility and/or at the local hospital for applicable forensic examinations. Each inmate indicated staff acted quickly upon being informed.

Based the review of agency policies, interviews with security first responder, random staff to include security and non-security and their knowledge of first responder duties, in addition to interviews with inmates who reported sexual abuse, EMCF does meet all provisions of the standard.

Auditor Overall Determination: Meets Standard Auditor Discussion Evidence Reviewed (documents, interviews, site review): 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ) 2. East Mississippi Correctional Facility Policies and Procedures #12.004 Offender Rights

- 3. Interview
- a. Warden

The EMCF Coordinated Response is outlined in East Mississippi Correctional Facility Policies and Procedures #12.004. The written plan details the facility's coordinated actions taken in response to an incident of sexual abuse. The policy was confirmed by the EMCF Warden, as the facility's coordinated response.

Procedures for the following are outlined within the policy: Staff Responsibilities; Separation of Victim and Perpetrator; Crime Scene and Evidence Preservation; Transport of Victim to Local Emergency Room for Examination and Testing; Proper Handling of Forensic Evidence; Medical Services Responsibilities; Mental Health Responsibilities; Further Medical/Mental Health/Chaplains and Treatment Services; Screening, Identification, Monitoring and Counseling of Offender with Histories Sexual Victimization or Sexually Aggressive Behavior; Investigative Procedures; and Administrative and Criminal Sanctions for Inmates and Staff.

In addition to the facility's written coordinated response, all staff are issued a PREA refresher card identified as PREA First Responder Duties that outlines the responsibility of the first responder. Duties include: 1) Separate the victim and abuser; 2)Preserve and protect any crime scene until the collection of evidence; 3)Request the victim and/or abuser not to take any actions that could destroy evidence, (washing, brushing, teeth, changing, etc); If not a security staff member, responder shall be required to request that victim not destroy evidence then notify security.

Based on the review of the agency policy that details the facilities' coordinated response for staff, to include first responder duties, medical and mental health treatment, preservation of evidence, and investigative procedures, the facility does meet the standard provision.

115.66

Preservation of ability to protect inmates from contact with abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons (PREA)
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA of 2003

- 4. Interviews with:
- a. Agency Head
- b. EMCF Warden

115.66 (a) (b) MTC #903E.02, mandates that any collective bargain agreement or other agreement must comply with PREA Standards dated August 20, 2012. Per MDOC #20-14-01, 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 pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of standard 115.72 and 115.76; or (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.

Per an interview with the Agency Head, MTC has an existing Collective Bargaining Agreement (CBA) with the Otero County Prison Facility located in New Mexico. The agreement documents that MTC maintains the right to remove alleged staff sexual abusers from contact with any inmates pending an investigation or a determination of whether and to what extent discipline is warranted. There were and are no provisions in the CBA which limits the Management's Rights clause specifically to management's right of removal of an employee from contact with inmates.

Review of the EMCF PAQ and interview with the EMCF Warden, the facility does not have an organizational union. Management staff maintain the right to assign.

Based on the review of the agencies policies, and interviews with EMCF Warden and Agency Head, the facility does meet the provisions of the standard.

115.67 Agency protection against retaliation Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1.East Mississippi Correctional Facility Completed PREA-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) 20-14-01 PREA Act of 2003

- 4. PREA Investigative Case Files
- 5. Interviews:
- a. Agency Head
- b. Warden
- c. Inmates Who Reported Sexual Abuse
- d. Staff Assigned to Conduct Retaliation Monitoring

115.67 (a) (b) (c) (d) (e) (f) MDOC #20-14-01 and MTC #903E.02 outline the mandates of this standard. Per MTC #903E.02 MTC protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmate or staff MTC designates staff member or charges department with monitoring for possible retaliation.

Pursuant to MDOC #20-14-01, 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. 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.

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 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. In the case of inmates, such monitoring shall also include periodic status checks. 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. An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded. A designated staff member is required to conduct retaliation monitoring on all staff and inmates who report allegations of sexual abuse, sexual harassment, and/or those who cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates and/or staff.

Per the Agency Head, MTC policy prohibits retaliation against those that allege sexual abuse or sexual harassment for both the inmate population and staff. Staff violation of policy is subject to MTC's progressive disciplinary process. Inmate retaliation on others is subject to inmate discipline. Placement in protective custody or restrictive

housing pending investigation or pending transfer is used to protect the inmate after all other alternatives for protection have been considered. If an individual who operates with an investigation expresses a fear of retaliation, an initiation of targeted monitoring techniques will begin on both the informant and those inmates perceived as a threat. Monitoring is completed via video, phone calls, mail, observation of commissary spending and direct observation.

At the initiation of the investigation, the assigned EMCF Investigator provides the inmate victim with a copy of the PREA Retaliation Prevention and Monitoring notification. The form includes to following information and is signed by the inmate:

1) The agency shall monitor conduct and treatment of inmate or staff who report sexual abuse and of inmates who reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmate or staff. 2) The agency's monitoring shall include periodic status checks. 3) Any individual who expresses fear of retaliation shall have appropriate measures taken to protect that individual. 5) The agency's monitoring shall be at least 90 days following the initial report of sexual abuse. The Auditor randomly selected 33 PREA investigative case files and confirmed the victim was identified as acknowledging and/or refusing to acknowledge their signature on the notification of retaliation monitoring form.

The facility reported 26 substantiated and unsubstantiated sexual abuse investigative findings in addition to nine (9) pending sexual abuse investigations pending lab results. The Auditor randomly selected 20 cases for review for review of retaliation monitoring compliance. The review confirmed documentation was not presented to support the alleged victims of sexual abuse were monitored for retaliation monitoring at any time after reporting the allegation. Although case managers were identified to conduct inmate retaliation monitoring for inmates assigned on their caseloads, those staff interviewed stated they were unaware of their duties as such. This discrepancy was identified during the pre-audit phase upon being requested by the Auditor.

Per an interview with the EMCF Warden, the investigative department and the case managers will work together to ensure all the provisions of the standard are adhered too. All inmate victims of substantiated and/or substantiated sexual abuse investigations would be monitored for a minimum of 90 days and longer, if necessary, upon reporting their allegation. The inmate's assigned case manager will monitor the inmate victim for unjustified discipline, housing change and/or job changes in addition to interaction with other inmates and staff. Staff requiring retaliation monitoring would be monitored by the EMCF Compliance Manager and would be monitored for any unjustified discipline, denial of requested leave, post and shift assignment changes and interaction with other staff. The review of the case files also confirmed there were zero circumstances that required retaliation monitoring for staff.

Interviews were conducted with four (4) inmates who reported sexual abuse, each confirmed they were not contacted by staff after reporting sexual abuse in regard to any negative interaction and/or concerns with their safety after reporting the allegation. However, each stated they do feel they were retaliated against in any manner by staff and/or inmates after reporting.

Although the agencies have policies that dictate the procedures to conduct retaliation monitoring in accordance with the standard provisions, staff failed to implement the procedures. Based on the facility's failure to conduct retaliation monitoring in accordance with agency policies and the standard provisions, the facility "Does Not Meet" standard provisions (c) and (d). As the discrepancies were identified during the pre-audit phase and corrective measures began prior to the site visit the facility will be placed in a corrective action not to exceed 150 days.

Corrective Action Plan

The Investigation Department will notify by telephone and email to the case manager assigned to the inmate that a PREA investigation has been initiated and that retaliation monitoring needs to be started. In the email, a retaliation monitoring form will be attached along with the inmate's name, MDOC number, date of PREA allegation and date PREA was reported. The retaliation monitoring will continue for 90 days unless the case manager receives notification from the Investigation Department that the outcome of the investigation was unfounded. The case manager will document on the retaliation monitoring form in the comment section the date monitoring stopped and submit the completed form to the Investigations Department.

Retaliation monitoring will be completed for all sexual abuse investigative findings throughout the corrective action period to include substantiated, unsubstantiated and unfounded.

Corrective Action applied:

The facility initiated corrective action measures upon identified by the auditor during the pre-audit, post audit and throughout the corrective action period. Periodic checks were noted as conducted within 72 hours of the report, within 15 days, 45 days, 60 days, 75 days, and 90 days.

There was one substantiated staff on inmate sexual investigation throughout the period. The victim was transferred to another MDOC facility the following day after the reported incident. An email with an attached retaliation monitoring form was forwarded by the EMCF PREA Compliance Manager to the receiving facility requesting the completion of retaliation monitoring.

One inmate on inmate sexual abuse allegation was determined as unsubstantiated. Documentation supported the victim was monitored for retaliation for 90 days.

One reported inmate on inmate sexual abuse allegation that remained pending investigative findings. Documentation supported the victim was monitored for retaliation for 90 days.

The facility provided retaliation monitoring for three victims identified in sexual harassment investigations. Two cases were concluded as unsubstantiated and one was determined as substantiated. Retaliation monitoring documentation supported each of the three victims were monitored for 90 days.

Staff assigned to conduct the retaliation monitoring noted changes in the of the inmate disciplinary reports, housing changes, program changes, work assignment changes grievances filed, earned time credit changes. Comments of interaction and conversation between staff and the inmate were documented.

There were zero staff who met the requirements for the standard for retaliation monitoring. However, the EMCF Retaliation Monitoring form includes areas to monitor if staff involved receive any negative performance reviews since the incident; whether staff were reassigned based on the incident; any negative behavior or evaluations received.

The facility provided documentation of completed retaliation monitoring for both sexual abuse and sexual harassment investigative findings that demonstrated of compliance with standard provisions c and d. Therefore, EMCF does meet all provisions of standard 115.67.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons (PREA)
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA of 2003
- 4. PREA Investigative Case Files
- 5. Interviews with:
- a. Warden
- b. Staff who supervise segregation
- c. Inmates who reported sexual abuse

115.68 (a) MTC 903E.02 and MDOC #20-14-01 notes the facility may house inmates who are alleged to have suffered sexual abuse shall be subject to the requirement of standard 115.43. Both policies prohibit the placement of inmates at high risk of 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. If an involuntary segregation housing assignment is made, a review will be conducted every 30 days to

determine whether a continuous stay is needed. Per an interview with the EMCF Warden, MTC policy prohibits the placement of inmates who have reported sexual abuse in involuntary segregation as other available housing is provided to ensure separation and safety. The inmate would have the option of placement in segregation. However, the alleged aggressor would be placed in involuntary segregation pending the completion of the investigation. All placements would follow the agency's protocols for protective management procedures to ensure the inmate's safety. Per the supervisor of segregation, all inmates placed in involuntary segregation would be reviewed every 30 days and would have access to education material delivered by education staff, canteen, property, telephone and mail privileges, recreation, haircuts, etc. Due to the security measures required for segregation, work opportunities are restricted.

The facility identified there were zero inmates placed in involuntary segregation during the 12 - month review period. Additionally, the review of 33 investigative case files, indicated inmates who reported sexual abuse and/or sexual harassment were not placed in involuntary segregation based on their reported allegation along. Interviews with four (4) inmates who reported sexual abuse indicated they were not placed in involuntary segregation upon reporting sexual abuse.

Based on the review of agency policy, interviews with Warden, supervisor of segregation, completed investigative case files of inmates who reported sexual abuse and interviews with inmates who reported sexual abuse, EMCF does meet the standard provision.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility EMCF) Completed Pre-Audit Questionnaire (PAO)
- 2. Management and Training Corporation # 903E.02 Sexual and Safety in Prisons (PREA)
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. PREA Investigative Casefiles
- 5. Interviews:
- a. EMCF Warden
- b. EMCF Investigator

- c. MDOC Integrity Investigator
- d. MTC PREA Coordinator
- e. Inmates Who Reported Sexual Abuse

115.71 (a) (b) (c) (d) MTC 903E.02, and MDOC #20-14-0, outlines all provisions within this standard. Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to standard 115.34. When the agency conducts its own investigation into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymously. Where MTC Investigators are involved, they shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring date; shall interview the alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality or evidence appears to support criminal prosecution, MTC investigators typically will turn such evidence over to outside investigators. Should MTC Investigator be involved, they shall conduct compelled interviews only after consulting with the Warden, prior to seeking out prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. 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 MTC facility 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. MTC will take appropriate steps to ensure that substantiated allegations of conduct that appear to be criminal are referred for prosecution. MTC retain all written reports pertaining to administrative or criminal investigation of alleged sexual assault or sexual harassment for as long as the alleged abuser is in incarcerated or employed by MTC, plus five years. Any state entity or Department of Justice component that conducts administrative criminal investigation of sexual assault or sexual harassment does so pursuant to the requirements of the standard. All allegation so inmate sexual abuse or sexual harassment ad their subsequent investigations shall be entered into the Offender Data System (ODS) within 72 hours of receiving the allegations.

The facility reported 89 sexual abuse and sexual harassment allegations during the 12-month review period. Nine investigations were reported as pending lab results throughout the audit process.

Interviews were conducted with EMCF Investigator assigned to conduct administrative investigations and the MDOC Integrity Investigator assigned with the MDOC Corrections Investigation Division assigned to conduct criminal investigations. Confirmation of appropriate training to conduct investigations pursuant to standard 115. 34 were submitted for review. An open line of communication is maintained between the EMCF Investigators and the MDOC Integrity Investigators. The initial investigation is started by the EMCF Investigator and if possible criminal charges are identified, the investigation is referred to the MDOC Integrity Investigators for

completion. Both investigators confirmed the collection and preservation of all direct and circumstantial evidence that includes all physical and DNA evidence, clothing, objects that may be identified as a means of penetration, securing the crime scene, conducting interviews with the victim, aggressor and any they may identify as witnessing the incident, interviews others that may have been within the identified area, and offering both the victim and aggressor the opportunity to submit to a forensic examination. The aggressor would be made aware of his Miranda rights prior to questioning. The victim would be offered a forensic medical examination and have the option to refuse or accept.

Per EMCF Investigator and MDOC Integrity Investigator, all investigations would continue regardless of a staff member termination, resignation, inmate's release and/ or transfer to another correctional facility. An interview would be scheduled for a face-to-face interview with all identified as involved to include possible witnesses. Statements would be video recorded and if necessary, a warrant would be issued to a DNA sampling as applicable. All investigations are conducted pursuant to the standard provisions. A review of the investigative casefiles confirmed one (1) staff on inmate sexual abuse investigation was completed after the submitted resignation of the staff member. The former staff member is currently pending indictment based on the substantiated finding.

Per the investigators, the regardless of the method in which an allegation of sexual abuse and/or sexual harassment is reported to include anonymously, an investigation would immediately to initiated. The investigative findings are based on the evidence collected only, not on the credibility of an alleged victim, aggressor, or witness.

The initial investigation begins at the facility's' level immediately upon being reported. Investigators indicated at no time would a victim be requested to submit to a polygraph or other truth telling devices. The MDOC Integrity Investigator is responsible for collecting the sexual assault kit from the local hospital and delivery to the Mississippi Crime Lab at the completion of each forensic examination. The basis of their investigative findings would be determined on the evidence collected and not the status of an individual to include inmate, or staff. Each confirmed regardless of an inmates' release from custody, transfer to another correctional facility and or the termination and/or resignation of a staff member, the investigation would continue as confirmed for one staff on inmate sexual abuse investigation.

The Auditor's review of 33 investigative case files identified the allegations were reported through third party, written notes to staff and/or verbally to staff. No allegations were identified as reported anonymously. The review confirmed the vast majority of investigations with the exception of those pending crime lab results were normally completed within three days of reported.

The Auditor reviewed 33 investigative casefiles that include both administrative and criminal investigative findings. Each of the investigative reports thoroughly documented statements submitted by the alleged victim, aggressor, witnesses as applicable to include verbal and written, prior complaints, photos of victims and aggressor, review of video, mail, telephone calls, inmate tablet usage data, injuries,

medical documentation and collection of physical evidence to include applicable forensic examinations results.

The investigative reports also included agency violations of staff assigned to the areas identified during the review of video, witnesses and interviews. Prohibited actions resulting in disciplinary sanctions included the following: (1) Condoning a violation of company or facility rules by staff and inmates; (2) Careless or inefficient performance of duties; and (3) Loafing, loitering or leaving work areas without permission during working hours, including unauthorized presence in an area other than the assigned work area resulting in improper security checks.

The MDOC Integrity Investigator indicated she has 27 years of investigative experience and is well versed in the evidence needed to pursue prosecution. However, on occasions she does consult with the prosecutors. The investigator confirmed two (2) staff and one (1) inmate have been indicted and two (2) additional staff are pending indictment. The indictments are based on substantiated sexual abuse investigative findings concluded during the 12-month review period.

Interviews with the EMCF PREA Compliance Manager, EMCF Warden, and MTC PREA Coordinator, confirmed the MDOC Corrections Investigation Division is part of the Mississippi Department of Corrections. Per the MTC PREA Coordinator, the facility remains informed on the progress of a sexual abuse investigation through an open line of communication as confirmed during interviews with the MDOC Integrity Investigator and EMCF Investigators. She added typically, once the investigation is referred, and an investigation has been performed, the investigating agency reports the result of the investigation to the facility Warden. If results are not obtained within are reasonable time, the investigating agency will be contacted by facility personnel periodically until the results of the investigation are known. The review of the 33 investigative casefiles confirmed all were completed by the EMCF Investigators and MDOC Integrity Investigator.

All written reports pertaining to administrative or criminal investigations of alleged sexual assault or sexual harassment are maintained in accordance with agencies policies for as long as the alleged abuser is incarcerated or employed by MTC, plus five years.

Based on the review of policies, investigative case files final reports, interviews with MDOC Integrity Investigator and EMCF Investigator, Warden, EMCF PREA Compliance Manager, MTC PREA Coordinator, and inmates who reported allegations of sexual abuse, it is determined EMCF does meet all provisions of the standard.

	115.72	Evidentiary standard for administrative investigations
		Auditor Overall Determination: Meets Standard
		Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management and Training Corporation # 903E.02 Sexual and Safety in Prisons (PREA)
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. Interviews:
- a. EMCF Investigative Staff
- b. MDOC Integrity Investigator

115.72 (a) In Accordance with MTC 903E.02 and MDOC #20-14-01, the agency the agency imposes a standard of a preponderance of evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated. Per the EMCF Investigator and MDOC Integrity Investigator, the investigative finding does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Based on the review of policies, and interviews with the EMCF Investigator and MDOC Integrity Investigator, EMCF does meet the provision of the standard.

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility EMCF) Completed Pre-Audit Questionnaire (PAO)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. Notification of Investigative Findings
- 5. Completed PREA Investigative Casefiles
- 6. Interviews:
- a. EMCF Warden
- b. MDOC Integrity Investigator

- c. EMCF Investigator
- d. Inmates who reported sexual abuse

115.73 (a) (b) (c) (d) (e) (f) MTC 90E.02 and MDOC #20-14-01 govern the mandate of the standard. Agency policies require any inmate who alleges that he or she suffered sexual abuse in an MTC facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfound following an investigation by MTC. If an outside entity conducts such an investigation, MTC requests the relevant information from the investigative entity in order to inform the inmate as to the outcome of the investigation. All notifications to inmates described under this standard are required to be documented.

Pursuant with MDOC #20-14-01, 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. If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate. 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. (d) 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. All such notifications or attempted notifications shall be documented. An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody

The PAQ reported 21 criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months of the audit. However, this number was later identified correctly as 60. The Auditor selected 33 investigative case files for review that included 28 sexual abuse investigations and five (5) sexual harassments. Each of the investigative case files included documentation of the inmate's notification.

The PAQ reported the number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months as three (3). However, this number was later identified correctly as 0. The Mississippi Department of Corrections Investigations Division (Integrity Investigators) are part of a division within the MDOC.

The PAQ also noted in the past 12 months, the number of notifications to inmates that were provided pursuant to this standard as 93. This number was later identified by

the EMCF PREA Compliance Manager and EMCF Investigators as 60.

Interviews with four (4) inmates who reported sexual abuse confirmed they were notified of the investigative finding by the EMCF Investigators.

Four staff on inmate sexual abuse investigations were concluded as substantiated. Three (3) staff were terminated, and one staff (1) resigned prior to termination during the completion of the investigations. However, documentation was not presented to support neither of the four (4) victims were notified in accordance with agency policies and standard provision (c): The staff member was no longer posted within the inmate's unit; and/or the staff member was no longer employed at the facility.

Two staff were indicted on the charge of Sexual Penetration of Incarcerated Offender by Law Enforcement. The remaining two staff abusers were identified as pending the aforementioned criminal charges. Documentation was presented to support one (1) inmate was advised of the indictment related to the sexual abuse. However, documentation was not presented to support the second victim received notification that the alleged abuser had been indicted on a charge related to sexual abuse within the facility in accordance with standard provision (c).

Per the review of investigative case files, and an interview with the MDOC Integrity Investigator one (1) inmate identified as the abuser in a substantiated inmate-on-inmate sexual abuse investigation was indicted pending prosecution for sexual assault. Documentation to support the victim was notified in accordance with standard provision (d) that the alleged abuser has been indicted on a charge related to sexual abuse within the facility was not provided.

Confirmation of the agency's policies and procedures to inform victims of the investigative findings was confirmed during interviews with the EMCF Investigators, EMCF Warden, and the MDOC Integrity Investigator. However, the review of 33 investigative case files, confirmed documentation was presented to support each inmate was notified of the investigative finding as unfounded, substantiated and or unsubstantiated only.

Based on the review of 33 PREA investigative case files, all inmates acknowledged via their signature notification of the investigative findings. However, the review confirmed inmates were not notified in accordance with standard provisions c and d. Therefore, the facility does not meet standard provisions c and d. The discrepancies were identified during the pre-audit phase and corrective measures were implemented by the EMCF PREA Compliance Manager. The facility was placed in corrective action for 150 days of the submitted interim report.

Corrective Action Plan:

The EMCF Investigators will inform the victims of sexual abuse in accordance with the standard provisions that includes the following: The staff member is no longer posted within the inmate's unit; The staff member is no longer employed at the facility; The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or The agency learns that the staff member has been

convicted on a charge related to sexual abuse within the facility. Additionally, the victim is abused by another inmate the victim will be notified 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. Documentation of the notification and/or attempts shall be documented.

Corrective Action Applied:

The facility identified one substantiated staff on inmate sexual abuse investigative finding during the post audit period. Zero staff on inmate sexual abuse investigations were determined as substantiated during the corrective action period. Confirmation of the victim notification of the investigative findings and actions taken toward the staff member was provided for review. The victim acknowledged notification that the staff member was no longer employed at the facility and the staff member had been charged by the MDOC with "Engaging in sexual penetration with a state incarcerated inmate." Therefore, the facility has demonstrated compliance with provision (c).

There were zero substantiated sexual abuse investigations of inmate-on-inmate sexual abuse and therefore no documentation was required for the notification to the victim of an inmate aggressor's indictment or conviction per standard provision (d). An interview with the EMCF PREA Compliance Manager explained procedures in ensuing that an inmate would be notified of his aggressor's indictment and/or conviction per the standard in accordance to the agency's policy and the standard provision.

The facility does meet compliance with all standard provisions to include (c) and (d).

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1 East Mississippi Correctional Facility EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management and Training Corporation # 903E.02 Sexual and Safety in Prisons (PREA)
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA Act of 2003
- 4. PREA Investigative Casefiles
- 5. Interview with:

a. EMCF PREA Compliance Manager/Investigator

115.76 (a) (b) (c) (d) MTC prohibits hiring and/or promoting staff who engage in sexual harassment against inmates. Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Disciplinary sanctions for violators of MTC policies relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history and the sanctions imposed for comparable offense by other staff with similar histories.

Per MDOC ##20-14-01, Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. 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. 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.

Per a review of the 33 completed PREA investigative casefiles, four (4) staff on inmate sexual abuse allegations were determined as Substantiated. Three staff were terminated for sexual contact with an inmate. One staff member resigned during the investigation after placement on administrative leave. Two staff have been charged with Sexual Penetration of Incarcerated Offender by Law Enforcement. Per the EMCF PREA Compliance Manager/Facility Investigator the remaining two staff identified in the substantiated staff on inmate sexual abuse investigations remain pending criminal charges. The reporting of staff to relevant licensing bodies was not applicable.

Based on the review of agency policy, review of completed PREA investigative casefiles, documentation of criminal charges, and interview with EMCF PREA Compliance Manager is determined EMCF meets all provisions of the standard.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review):
	East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)

- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections #20-14-01 PREA of 2003
- 4. PREA Investigative Case Files
- 5. Interview with:
- a. Warden

115.77 (a) (b) MTC #903E.02 and MDOC # 20-14-01 requires any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. Additionally, they shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies as applicable. The facility shall take remedial measures and 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.

The Auditor's review of the 33 completed PREA investigations confirmed there were no reported allegations of sexual abuse and/or sexual harassment reported for volunteers and/or contract workers. Therefore, remedial discipline, referral to law enforcement agencies, and reporting to a licensing body was not applicable.

Per an interview with the Warden, contractors and volunteers' entry into the facility would immediately be denied upon notification of sexual abuse and/or sexual harassment against an inmate and they would be reported to their agency/ organization. Restricted access to the facility would continue throughout the completion of the investigation. Substantiated acts of sexual abuse would be referred for criminal prosecution and to their relevant licensing bodies as applicable by their employment agency.

Based on the review of agency policy, completed PREA investigative case files, and interview with EMCF Warden, EMCF does meet all provisions of the standard.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review):
	East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
	2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
	3. Mississippi Department of Corrections #20-14-01 PREA of 2003

- 4. PREA Investigative Case Files
- 5. Inmate Rules Violations/Referral for Prosecution
- 6. Interviews:
- a. Warden
- b. Mental Health Practitioner

115.78 Pursuant to MTC 903#.02, and MDOC #20-14-01 outlines the mandate of the standard provisions. Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on- inmate sexual abuse. Inmates are subject to disciplinary sanctions pursuant to formal disciplinary process following a criminal finding of quilt for inmate -on-inmate sexual abuse.

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 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. 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. 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.

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. 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.

An interview with the Warden indicated inmates who are determined to have committed sexual abuse would receive disciplinary sanctions in accordance with the Inmate Rule Violations in addition to applicable criminal charges.

The PAQ notes the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility as five (5), however this number was later identified as incorrect. The facility reported a total of 54 completed inmate on inmate sexual abuse allegations. Nine (9) investigations remained pending throughout the initial audit process. Two (2) inmate-on-inmate sexual abuse investigations were concluded as substantiated. One inmate received facility disciplinary sanctions for Inappropriate Sexual Behavior with Another Person. The second inmate remained pending indictment of criminal charges for an incident that included sexual abuse of

another inmate. Although facility discipline was not identified by the EMCF PREA Compliance Manager, the case was referred to the District Attorney's Office for submission to the Lauderdale County Grand Jury.

MTC disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact. The four (4) inmates identified as victims in staff on inmate sexual abuse investigations did not receive discipline sanction for their involvement.

Agency's policy prohibits disciplinary action for a report of sexual misconduct 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. Two (2) inmates received disciplinary sanctions for filing false PREA allegations as concluded during the investigative process in an effort to expedite a potential movement from his current housing assignment. Per the EMCF PREA Compliance Manager/Investigator zero inmates received disciplinary sanctions after reporting sexual misconduct made in good faith based on a reasonable belief that the alleged conduct occurred. The Auditor's review of investigative sexual abuse casefiles included 11 Unfounded investigative findings. There was no documentation presented that indicated the inmates received disciplinary sanctions for filing false reports made in good faith.

MTC prohibits all sexual activity between inmates. Inmates are subject to discipline for actions of sexual abuse only if the activity was determined to be coerced.

Per an interview with the mental health practitioner, the facility does offer normal therapy, and counseling to the inmate population to include individual cognitive behavior therapy as the facility is classified as a Maximum mental health facility. The services are available to the inmate population regardless of their participation in various other programs.

Based on a review of agency policy, completed PREA investigations, discipline sanctions and referral for prosecution, in addition to interviews with Warden and mental health staff, EMCF does meet all provisions of the standard.

Auditor Overall Determination: Meets Standard Auditor Discussion Evidence Reviewed (documents, interviews, site review): 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ) 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons

- 3. Mississippi Department of Corrections #20-14-01 PREA of 2003
- 4. Inmate Roster
- 5. Interviews:
- a. EMCF PREA Compliance Manager
- b. Staff who conduct risk screening
- c. Mental Health Practitioner
- d. Inmates who reported prior sexual abuse

115.81 (a) (b) (c) (d) (e) MTC #903E.02 and MDOC #20-14-01 govern the mandate of the standard. MTC #903E.02 states all inmates at MTC facilities who have disclosed prior sexual victimization during a screening pursuant to 115.41 are offered a follow-up meeting with a medical or mental health practitioner. Per MTC 904E.310, If screening indicates that a resident has experienced prior sexual victimization or has previously perpetrated sexual abuse whether it occurred in an institution 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. MTC's medical and mental health staff maintain secondary materials. (e.g., form, log) documenting compliance with the above required services.

Pursuant with MDOC #20-14-01, If the screening pursuant to standard 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. (b) If the screening pursuant to standard 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. (c) If the screening pursuant to standard 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. (d) 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. (e) 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.

Per the PAQ, and interview with the EMCF PREA Compliance Manager 932 inmates reported to the facility during the 12-month review period. Staff who conduct risk

screening, confirmed their use of the Screening for Risk of Victimization and Abusiveness instrument during the initial risk screening of all newly arriving inmates that require the identification of inmates as at risk of abusiveness and those at risk of victimization. The Auditor selected six months per each of the 12-month review period for confirmation of completed risk screening as required within 72 hours of an inmate's arrival and a reassessment not later than 30 days of the inmates' arrival. A total of 60 inmates risk screenings were reviewed that confirmed although the 60 inmates were screened on the day of their arrival, zero inmates received a reassessment prior to being identified during the pre-audit phase to include in an excess of 14 months of their arrival.

Per an interview with the mental health practitioner, upon receiving mental health referrals, a Psychiatric Provider Follow-up would be completed. Inmates who report prior sexual victimization or abusiveness sexual victimization would be seen on the day of the referral and/or as soon possible to include the next business day. All inmates are always seen within 14 days of receiving a mental health referral. She added although mental health staff are normally scheduled Monday – Friday, services are available 24/7, as a mental health practitioner is scheduled on -call during evenings, weekend, and holiday. She added she was unaware of receiving mental health referrals from case managers due to an inmate's risk screening score as prior sexual victimization or abusiveness.

Per the EMCF PREA Compliance Manager and interviews with staff who conduct risk screenings, staff indicated zero inmates were identified as at risk of victimization and zero were identified as at risk of abusiveness. However, the Auditors' review of the 60 randomly selected inmates identified two (2) inmates who acknowledged they were prior victims of sexual abuse. There was no documentation presented to support the two (2) inmates identified were offered a mental health referral.

The Auditor requested a roster identifying the housing of all inmates identified as risk of victimization/prior victim and/or risk of abusiveness/history of abusiveness. The review identified the most recent data entry for an inmate identified as a Potential Victim was dated October 5, 2022. The most recent data entry for an inmate identified as a Potential Aggressor was documented as September 7, 2021. The two inmates identified by the Auditor during the review of 60 inmates who arrived during the 12-month review period were not included on the roster.

Interviews were conducted with four (4) inmates identified as prior victims of sexual abuse who had arrived during previous years due to no inmates being identified as arriving during the review period. The inmates acknowledged they were previously assigned to the mental health caseload upon arrival and they were seen by mental health staff within a week of their arrival.

MTC #904E.310 states 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, and education, and program assignments, or as otherwise required by Federal, State, or local law.

Interviews with the EMCF PREA Compliance Manager and staff who conduct risk screenings indicated inmates' risk screening documentation is stored electronically. All hardcopy documentation is stored in a vaulted filed cabinet located in the secured Records Room with limited staff access. The information may be shared with case managers, medical and mental health staff, investigators, .

Interviews with medical and mental staff confirmed all inmates sign a consent form upon their arrival at EMCF. Each stated if an incident was reported to have occurred within the community, they would request a consent form, but regardless they have a duty to report. All confirmed the facility has not and will not house offenders under the age of 18 years old.

The agency has policies in place that dictate the requirements of the standard provisions, however the practice was not implemented. Staff assigned to conduct risk screening did not complete the risk screening assessment in accordance with standard 115. 41 and therefore did not identify inmates with a history of prior sexual victimization and or prior sexual abusiveness. However, the Auditor identified two (2) inmates during the random selection of 60 inmates from the arrival 932 inmates. There was no documentation to support the two (2) inmates identified as having a prior history of sexual victimization were offered a mental health referral. Additionally, based on the review of the inmate roster utilized to track inmates with a history of sexual victimization and history of sexual abusiveness that identified the most recent Potential Victim was dated as identified on October 5, 2022, and the most recent data entry for an inmate identified as a Potential Aggressor was documented as September 7, 2021, the facility does not meet standard provisions (a) (b) (c). The facility implemented procedures of corrections during the pre-audit phase as identified by the Auditor. Therefore, the facility will be placed in corrective action for 150 days pending the release of the interim report.

Correctional Action Plan:

The following procedures were initiated for the corrective action period. During intake screening by the case management staff, if an inmate indicates that they have experienced prior sexual victimization to has previously perpetrated sexual abuse, whether in an institution setting or in the community, staff will complete a Medical/ Mental Referral form to ensure that inmate is offered a follow-up with medic or mental health practitioner within 14 days of the intake screening. The PREA Compliance Manager will conduct reviews with the medical or mental health department to ensure referrals received are being adhered to within 14 days of the referral. The Compliance Manager will make periodic checks with the mental health department to review referrals.

Corrective Action Applied:

The facility began corrective action measures immediately upon the discrepancies identified by the auditor during the pre-audit period and continued throughout the post site visit and corrective action period. The facility identified 11 inmates who reported and/or were identified having a history of prior sexual victimization during intake and a mental health referral was completed for each. The victims were

identified as seen by a mental health practitioner within the following time frame: Two (2) were evaluated on the day of the submitted referral; one (1) was evaluated the following day of the submitted referral; one (1) was noted as evaluated two days following the submitted referral; two (2) were noted as evaluated on day three of the submitted referral; one (1) was noted as evaluated on day six of the submitted referral; one (1) was evaluated on day seven of the submitted referral; two (2) were noted as evaluated on day eight of the submitted referral; one (1) was noted as evaluated on day nine of the submitted referral.

Based on the documentation provided by the facility that confirmed inmates with a prior history of sexual victimization were offered mental health evaluations during risk screening and confirmation of the completed mental health evaluations within 14 day of the referral, EMCF does meet all provisions of the standard.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA of 2003
- 4. EMCF Policies and Procedures #12.004 Ensuring Safe Prisons
- 5. PREA Investigative Case Files
- 6. VitalCore Health Services Policy and Procedure
- 7. Inmate's Medical and Mental Health Documentation
- 8. Interviews
- a. Medical and Mental Health Professionals
- b. Security and Non-security First Responders
- c. Inmates Who Reported Sexual Abuse

115.82 (a) (b) (c) (d) MTC #903E.02, MDOC #20-14-01, EMCF #12.004 governs the mandate of the standard provisions. Pursuant to MTC #903E.02, MTC's medical and mental health staff maintain secondary materials, (form, Log) documenting the timeliness of emergency medical treatment and crisis invention services that were

provided: the appropriate response by non-health staff in the event health staff are not present at the time of the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.

Per MDOC # 20-14-01, 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. 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 standard 115.62 and shall immediately notify the appropriate medical and mental health practitioners. 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. 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.

Pursuant with EMCF #12.004, In cases of alleged completed acts of Sexual Violence, Victims are referred under appropriate security provisions to a community facility for treatment and gathering of evidence, or if these procedures are performed in-house, the following guidelines are used: A history is taken by health care professionals who conduct an examination to document the extent of physical injury and to determine if referral to another medical facility is indicated. With the Victims consent, the examination includes the collection of evidence from the Victim, using a rape kit approved and stocked by the appropriate authority. Provision is made for testing of sexually transmitted diseases (for example, HIV, gonorrhea, hepatitis, and other diseases) and counseling as appropriate. Prophylactic treatment and follow-up for sexually transmitted diseases are offered to all Victims, as appropriate. Following the physical examination, there is availability of an evaluation by mental health professional to assess the need for crisis intervention counseling and long-term follow-up. A report is made to the facility or program administrator or designee to assure separation of the Victim from his/her assailant. Document patients" demeanor during the exam process (e.g., crying, shaking, or showing signs of upset) and their statements made related to the assault. Each facility shall enter into written agreements with both the local Sexual Violence treatment center and the local investigative authority.

Offenders referred to mental health by medical services following an allegation of Sexual Violence will be seen by a mental health professional that will then complete either a detailed screening or a mental health evaluation. Immediate attention to staff Victims of Sexual Violence should include at a minimum the name, address and phone number for a local professional who can provide services, as well as information consistent with employee benefits about the employee assistance program. If the Sexual Violence occurred within the past seventy-two (72) hours, the supervisor shall: Report the allegation of Sexual Violence to the facility investigator or

shift commander.

Interviews conducted with both security and non-security first responders indicated they were aware of their responsibilities as a first responder. Security staff indicated they removed the victim from the area while maintaining a visual on the inmate and contacted the security supervisor who arrived on scene. Non-security staff indicated the reporting victim was not in the area of the reported allegation upon reporting. They ensured the inmate remained with them while they contacted the security supervisor. Both security and non-security staff indicated the victim was not placed in an area that would allow the inmate to take any actions that could destroy physical evidence such as washing, brushing teeth, changing clothes, urinating, smoking, defecating, drinking or eating. Each acknowledged that the victim was escorted to the medical health department.

EMCF medical and mental health staff are contracted through VitalCore. The VitialCore Health Service Policy and Procedure. Response to Sexual Trauma, Sexual Abuse and Physical Abuse outlines procedures in response to sexual trauma, sexual abuse and physical abuse for both medical and mental health.

Interviews with the Health Services Administrator, Director of Nurses, and Behavioral Health Practitioner. Per the medical staff, medical staff are assigned at the facility 24/7 and inmates who report sexual abuse are treated immediately. All inmates who report any method of sexual penetration are also transported to the local hospital for a forensic examination by a SANE upon the completion of a visual assessment for stabilization by facility medical staff. The initiation of sexually transmitted infections prophylaxis is conducted at the local hospital if accepted by the inmate. The follow-up procedures and repeated testing are continued at the facility and managed by facility's VitalCore staff assigned to Infection Control. Nine (9) were identified as receiving a forensic examination by a SANE at the local hospital during the review period. The results of the findings remained pending throughout the post audit phase.

Per the mental health practitioner indicated inmates who report sexual abuse are seen upon the completion of separation and preservation of evidence. If an inmate is required to be transported to the local hospital for a forensic examination, he is seen by mental health staff upon his return. She added although mental health staff are scheduled Monday – Friday, a mental health practitioner is scheduled on-call duty hours and is available to report to the facility as needed. Both medical and mental health practitioners indicated their departments maintain secondary materials (e.g. form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided. Each indicated the level of services provided by their departments are based on their professional judgement, agency policies, in addition to state and federal laws. Inmates are not required to provide financial compensation for the medical and/or mental health services provided services upon reporting an allegation of sexual abuse regardless of the investigation findings.

The Auditor selected 15 random sexual abuse investigative casefiles that included

documented services provided by both medical and mental health. All inmates were documented as evaluated by medical staff on the day of the reported allegations and documented thorough the examination of the inmate. Documentation of completed forensic examinations for applicable inmates and were completed on the day of the reported sexual abuse and included the acceptation and/or refusal of a forensic examination and/or the refusal of sexual transmitted infections acknowledged by the inmate. Mental health documentation confirmed each of the 15 selected inmates were evaluated as the following: eight (8) were evaluated on the day of the reported sexual abuse; four (4) were evaluated the following day of reporting; and three (3) were evaluated three days after reporting. Interviews with four (4) inmates who reported sexual abuse acknowledged they were seen by mental health practitioners within a week of reporting sexual abuse.

Based on the review of agency polices, confirmation of timely medical and mental health services for victims of sexual abuse in accordance with agency policy and standard provisions, and interviews with staff and inmates, EMCF does meet all provisions of the standard.

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

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections #20-14-01 PREA of 2003
- 4. Inmate's Medical and Mental Health Documentation
- 5. Interviews
- a. Medical and Mental Health Professionals
- b. Inmates who Reported Sexual Abuse

115.83 (a) (b) (c) (d) (e) (f) (g) (h) MTC #903E.02 and MDOC #20-14-01 governs the mandate of the standard provisions.

MTC #903E.02 states MTC facilities 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 facilities. Inmate victims of sexual abuse while

incarcerated at an MTC facility are offered tests for sexually transmitted infections medically appropriate.

MDOC #20-14-01 states 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 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.

Interviews with medical and mental health practitioners and review of medical and mental health documentation for sexual abuse investigative casefiles confirmed follow-up services and treatment plans were documented and acknowledged by the inmates. The level of care provided to the inmates are consistent with the level of care within the local community. Documentation of treatment is electronical, stored and shared with medical and mental health throughout the agency in addition to the inmate's file. Those inmates released from EMCF custody would be scheduled for their initial appointment of continued care at the local free clinic.

Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. 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.

Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. The Auditor's random selection of sexual abuse investigation casefiles included those with the completion of forensic examination. The review confirmed inmates were offered testing for sexually transmitted infections. The inmates accomplished their acceptance and/or refusal for testing. Interviews conducted with four inmates who reported sexual indicated all were offered testing for sexually transmitted infections but refused. One inmate acknowledged he was given pills for consumption while at the local hospital. The inmates confirmed they were not advised of any financial responsibility for the medical services received.

Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. EMCF is an adult male facility only. Therefore, provisions (d and (e) are not applicable.

Agency policies indicate the 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. Interviews with both medical and mental health practitioners confirmed at no time are victims of sexual abuse responsible for the financial cost of medical and/or mental health treatment.

115.83 (h-1) MTC #903E.02 and MDOC #20-14-01 notes 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. The facility reported two (2) substantiated inmate-on-inmate sexual abuse investigations. However, there was no documentation submitted an evaluation was attempted and/or completed for the identified aggressors by a mental health practitioner. Additionally, per an interview with a mental health practitioner she acknowledged she has not been informed of identified of inmates identified as an aggressor for a substantiated sexual abuse investigation.

The facility and agency have a policy that outlines the mandate of each provision. Documentation and interviews confirmed compliance with provisions (a) (b) (c) (f) (g). Provisions (d) and (e) were identified as not applicable as the facility does not house female offenders. However, documentation was not supported for compliance of provision (h-1). Specifically, there was no documentation nor did the interview with the mental health practitioner support mental health evaluation of all known inmate-on inmate abusers were completed within 60 days of learning of such abuse history for the two identified aggressors in the substantiated sexual abuse investigations. Therefore, the facility does not meet compliance for standard provision (115.83 h-1). The facility will continue in corrective action for 150 days as non-compliance of provision (h-1) was identified during the pre-audit phase.

Corrective Action Plan:

The EMCF Investigators will make notification by email of all substantiated sexual abuse investigations while identifying the aggressor. The mental health practitioner will offer the identified aggressor a mental health evaluation within 60 days of finding that will be documented. The EMCF Investigators will receive confirmation notification via email of the mental health evaluation.

Corrective Action Applied:

There were zero inmate on inmate substantiated sexual abuse investigations during the post audit and/or corrective action period. Therefore, zero inmates were identified as an aggressor in an investigative finding. However, the facility demonstrated procedures were in place to conduct a mental health evaluation with inmates identified as aggressors through the completion of mental health evaluations with those inmates identified as aggressor in unfounded and unsubstantiated sexual harassment investigative findings for corrective action compliance review.

The sexual harassment allegation was reported on November 13, 2024, as unfounded. The alleged aggressor was evaluated by mental health on November 20, 2024, November 28, 2024, and December 5, 2024.

An unsubstantiated sexual harassment report was made on August 5, 2024. The alleged aggressor was evaluated by mental health staff on September 10, 2024, and November 7, 2024.

Based on the documentation provided by the facility and procedures initiated by the facility to ensure those identified as aggressors are offered treatment when deemed appropriate by mental health practitioners, EMCF does meet all standard provisions to

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed PREA-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) #20-14-01 PREA of 2003
- 4. Sexual Abuse Investigative Case Files
- 5. Interviews:
- a. Warden
- b. PREA Compliance Manager
- c. Member of the Incident Review Team

115.86 (a) (b) (c) (d) MTC #903E.02 and MDOC #20-14-01, outlines the agency's requirements to conduct sexual abuse incident reviews in accordance with all provisions of the standard. Incidents reviews are required to be conducted not later than 30 days of the completed investigation for all reported allegations of sexual abuse except for those with an investigative finding of unfounded.

Pursuant to MDOC #20-14-01, 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. (b) Such review shall ordinarily occur within 30 days of the conclusion of the investigation. (c) The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. (d) 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 and any recommendations for improvement and submit such report to the facility head and PREA compliance manager. The facility shall implement the recommendations for improvement or shall document its reasons for not doing so.

The PAQ identified 51 criminal and/or administrative investigations of alleged sexual abuse completed at the facility, during the review period excluding only "unfounded" incidents. This number was later identified as correctly as 26, not 51. The current EMDOC PREA Compliance Manager assumed these duties after the review period and prior to the pre-audit phase. The EMCF Warden was also assigned to the facility two weeks prior to the site visit. Per interviews with the EMCF Facility Investigator/PREA Compliance Manager, there was no documentation to support incident reviews were conducted for any investigative cases. The discrepancies were identified during the pre-audit phase and corrective actions were immediately initiated by the current EMDOC PREA Compliance Manager, and newly assigned Executive Staff (Warden and Deputy Warden).

The EMCF PREA Compliance Manager initiated corrective action measures immediately during the pre-audit phase. The facility's incident review team was identified, and an incident review was completed for each of the substantiated and unsubstantiated sexual abuse investigative findings identified throughout the review period and pre-audit. The review team noted the review of all requirements per the standard provisions. However, the delayed incident reviews were completed in an excess of 60 days through 14 months of the investigative findings.

The Auditor's review identified that although the agencies, MDOC and MTC has policy in place to meet all provisions of the standard, the facility failed to complete and/or did not provide confirmation of practices outlined within the standard during the 12-month review period. As corrective measures were initiated during the pre-audit phase, the facility will remain in corrective action not to exceed 150 days.

The EMCF was interviewed as a member of the incident review team. He indicted upon the discovery of the discrepancy in conducting the incident reviews, he has implemented procedures to schedule at a weekly with the recently identified team members that include the medical, mental health, investigators, Duty Warden, line staff supervisor, classification supervisor, and Warden. The review team discuss the investigation while including the staffing levels, monitoring technology accessibility, occurrence location, and any position reason that could have contributed to the occurrence.

The Auditors' review confirmed the agency's policies does include the mandate of incident review completion in accordance with the PREA standard. However, the facility failure to follow policy in the completion of the 26 substantiated and unsubstantiated sexual abuse investigations within 30 days of the investigative findings during the 12-month review period. Although the EMCF PREA initiated the completion of the incident reviews, they were not completed in accordance with the standard. Therefore, as immediately corrective action measures were implemented

during the pre-audit phase, the EMCF will be placed in corrective action for 150 days upon the release of the interim report.

Corrective Action Plan:

A review team, which includes upper-level management official, line supervisor, investigator, and medical and mental health practitioners, will meet weekly to review substantiated and/or unsubstantiated sexual abuse incidents within 30 days of the investigation conclusion. The EMCF PREA Compliance Manager will ensure the reviews are conducted in accordance with policy. The EMCF Compliance Manager will conduct periodic checks to ensure time limits are met.

Corrective Action Applied:

The facility provided documentation of seven completed incident reviews completed during the post audit review period and corrective action period.

Four sexual abuse investigations were determined as unsubstantiated during the post audit review period. The investigations and incident reviews were completed as follows: Two (2) investigations were completed on June 21, 2024, and an incident review were completed for each on June 28, 2024; One (1) was completed on July 3, 2024, and an incident review was completed on July 24, 2024; One (1) was completed on July 6, 2024, and an incident review was completed on July 15, 2024.

Corrective action period incident reviews: One (1) sexual abuse investigation was concluded on July 21, 2024, as unsubstantiated and an incident review as completed on July 30, 2024. An error was initially noted for the completion of the investigation but documented correctly with an explanation.

The facility also conducted three incident reviews for unfounded sexual abuse investigations to demonstrate procedures were put in place for the compliance of the standard. The review identified the incident incidents were conducted as follows: One (1) investigation was completed as unfounded on September 16, 2024, and the incident review was conducted on October 2, 2024; One (1) unfounded investigation was completed on September 18, 2024, and an incident review was conducted on October 2, 2024; One (1) unfounded sexual abuse investigation was completed on October 23, 2024, and an incident review was conducted November 6, 2024.

The review of the completed sexual abuse incident reviews confirmed that incident team members consisted of the staff within the following positions Deputy Warden, line staff supervisors, facility investigators, PREA Compliance Manager, medical and/ or mental health staff and Warden.

The review team documented the review of all elements of standard provision (d) while noting comments of each area reviewed and any noted concerns. There were no recommendations made.

Based on the documentation provided that confirms the facility completed sexual abuse incident reviews in accordance with all provisions a - e of the standard, the facility does meet all provisions of the standard.

115.87 Data collection

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Correctional Facility (EMCF) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) SOP 20-14-01 Prison Rape Elimination Act of 2003
- 4. MTC Agency Website
- 5. MTC Annual PREA Reports
- 6. Interview with:
- a. MTC Agency PREA Coordinator

115.87(a) (b) (c) (d) (e) (f) MTC #903E.02 and MDOC SOP 20-14-01 governs the mandate of the standard.

Pursuant with to MDOC SOP 20-14-01, 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. The agency shall aggregate the incident-based sexual abuse data at least annually. 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 agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. Upon request} the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Per MTC #903E.02, The PREA Coordinator is responsible for the compilation and reporting of data related to PREA incidents including the data using a "Survey of Sexual Victimization -Incident Form," The collected data is utilized to improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, action and the preparation of an annual report that includes a comparison of the current year's data and corrections with those from the prior year on an annual basis.

MTC 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

standard instrument includes, at a minimum, the date necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the department of Justice.

The MTC PREA Coordinator indicated she began in April of each year, collecting and reviewing data from the various facilities for the submission of the annual report on June 30th of each year. She and the Assistant PREA Coordinator are able to collect data from the previous years that includes a comparison that is included in each annual report that is posted on the agency's website. The agency's annual review is scheduled for April 2024 for the 2023 calendar year. She produced an email forward to each facility on April 2, 2024, to begin collecting data for the MTC Annual PREA Report by reviewing all ODS PREA entries to confirm all data related to PREA allegations, investigations, incident reviews, etc. for January 1 – December 31, 2023, are accurately entered into the ODS with a scheduled date for response. The Auditors' review of the agency's website confirmed the MTC Annual PREA Reports beginning 2013 – 2022 were visual to the public and included applicable data for all facilities under the management of MTC.

Based on the review of agency policies, and review of the MTC agency website which documents its compliance with standard, the agency does meet all the provisions of the standard.

115 00	Data	roviow	for	corrective	action
112.00	Data	review	TOF	corrective	action

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. East Mississippi Department of Corrections (EMDOC) Completed Pre-Audit Questionnaire (PAQ)
- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) SOP 20-14-01 Prison Rape Elimination Act of 2003
- 4. MTC Agency's Website
- 5. MTC Annual PREA Reports
- 6. Interviews with:
- 7.Interviews:
- a. MTC Agency Head
- b. EMDOC PREA Compliance Manager

c. MTC Agency PREA Coordinator

115.88 (a) (b) (c) (d) MTC #903E.02 and MDOC #20-14-01, outlines the mandate of provisions within the standard.

MDOC #20-14-01 mandates the following, 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: Identifying problem areas; Taking corrective action on an ongoing basis; and Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. Such a report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse. The 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. 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.

Pursuant to MTC #903E.02, MTC reviews data collected an aggregated pursuant to 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: i) identifying problem areas; ii) Taking corrective action on an ongoing basis; iii) Preparing an annual report of its findings from its data review and any corrective action for each facility as well as the agency was a whole.

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

With approval of the respective customer agencies, MTC will make its annual report readily available to the public at least annually through its website. The reports are approved by the head of MTC. With approval from and coordination with customer agency policy and procedures, when MTC 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. MTC indicates the nature of material redated.

Per an interview with the facility EMCF PREA Compliance Manager, he was recently selected for the position, and therefore was not involved in the data collection for previous years. However, he is aware of his role in assisting the MTC PREA Coordinator in gathering the data for submission.

The MTC PREA Coordinator indicated the agency does 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, and training. The agency's annual review was scheduled for April 2024 for the 2023 calendar year. She produced an email forward to each facility on April 2, 2024, to begin collecting data for the MTC Annual PREA Report by reviewing all ODS PREA entries to confirm all data related to

PREA allegations, investigations, incident reviews, etc. for January 1 – December 31, 2023, are accurately entered into Operational Data System (ODS) noting a scheduled date for appropriate response. The agency takes corrective action on an ongoing basis based on the collected data whenever there is an issue that requires remediation in accordance with standard 115.13.

The agency does prepare an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a hold. The annual review is scheduled to take place in April for each current calendar year. The agency has developed a data collection instrument that mirrors the DOJ Survey of Sexual Violence. A report for each facility and an aggregated report for MTC is made available at completion. The MTC makes aggregated data available and redacts facility specific data. Should the agency have any personally identifiable information in the reports or material that presents a clear and specific threat to the safety and security of a facility, such information would be redacted.

Per the Agency head, the annual review has been conducted annually since the beginning of 2012. Each calendar year, a report is published for the previous year. The agency PREA Coordinator has been assigned the responsibility to: identity areas of noncompliance with policy; analyze trends in allegations of sexual abuse and harassment, as well an investigative determination; collaborate on best practices; develop solutions based on consideration of various constraints; provide the field with clarification through interpretive guidance, and overseeing the implementation of agreed upon decisions related to necessary changes to policy, physical plant, staff and/or training. Per the MTC Vice President Corrections, she is the approving authority of the report.

A review of the annual report includes a comparison of each current year and any corrective action with those from the prior year. A review of MTC Annual PREA Reports from 2013 -2022 confirmed compliance of the standard provisions as the appropriate Annual PREA Reports for all correctional facilities managed by MTC are located on the agency's website at https://www.mtctrains.com/prea/ and are visible to the public.

Based on the review MTC policy, agency website and review of the Annual PREA Reports that includes a data comparison of current and previous years, and interviews with MTC PREA Coordinator, MTC Agency Head, and EMCF PREA Compliance Manager, the agency does meet all provisions of the standard.

115.89	Data storage, publication, and destruction				
	Auditor Overall Determination: Meets Standard				
	Auditor Discussion				
	Evidence Reviewed (documents, interviews, site review):				
	1. East Mississippi Correctional Facility (EMDOC) Completed Pre-Audit Questionnaire				

(PAQ)

- 2. Management & Training Corporation (MTC) #903E.02 Sexual Safety in Prisons
- 3. Mississippi Department of Corrections (MDOC) SOP 20-14-01 Prison Rape Elimination Act of 2003
- 4. MTC Agency's Website
- 5. MTC Annual PREA Reports
- 6. Interview:
- a. MTC Agency PREA Coordinator

115.89 (a) (b) (c) (d) MDOC #20-14-01 and MTC #903E.02 outline the mandates of the standard.

MDOC #20-14-01 states the agency shall ensure that data collected pursuant to 115.87 is securely retained. 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 oner through other means. Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers. The agency shall maintain sexual abuse data collected pursuant to standard 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.

Per MTC #903E.02, MTC ensures that incident -based and aggregate data are securely retained. MTC aggregated sexual abuse data from MTC facilities under its direct control are made readily available to the public annually through its website. Before making aggregated sexual abuse data publicly available MTC removes all personal identifiers. MTC maintains sexual abuse data collected pursuant to standard 115.87 for not less than 10 years after the date of initial collection, unless federal, state, or local law requires otherwise. An interview with the MTC PREA Coordinator, weekly tapes are encrypted and stored off-site at a secure facility. Prior to the off-site storage, tapes are logged for accountability, and transported within metal boxes to the designated facility. Backups of the collected data are verified through daily reports in accordance with MTC Policy 600.6 Backup and Storage of Corporate Information.

Per a review of the agency's website the agency's (MTC) Annual PREA Reports from 2013 -2022 were made available annually to the public. The annual reports did not include any personal identifiers and did not include any information that could possibility identify individuals or any information that could pose a threat to the security of a facility.

Based on the review of the agency's policy, agency's website, and interview with the agency PREA Coordinator, EMCF and the agency (MTC) does meet all provisions of the standard.

115.401 Frequency and scope of audits

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.401 This is the second year of the fourth audit cycle. Operational management of the East Mississippi Correctional Facility is awarded to the Management & Training Corporation (MTC) by the Mississippi Department of Corrections. The review of the MTC agency website at https://www.mtctrains.com/prea/ confirmed correctional facilities under its management were posted each year for auditing cycles one (1), two (2), three (3), and year two (2) of the current cycle.

The auditor was provided full access to all buildings and areas during the tour and throughout the site visit. Areas observed during the site visit included but was not limited to the following: housing units, food service, medical, mental health, administrative offices, inmate program areas, inmate restricted housing units, maintenance, warehouse, mailroom, religious services, observation of inmate risk screening, visitation area, and recreation.

The OAS was used to complete the audit process with a review period of April 1, 2023, through March 31, 2024. The auditor was provided with copies of requested documentation and information to include electronically stored documentation. The auditor requested and received sufficient sampling based on the size of the facility and inmate count, investigative reports, confirmation of background investigations, staff and inmate PREA training, medical, mental health, and investigators specialized training, inmate risk screenings, mental health referrals, and other documents. The review of documentation included on site and an upload within the OAS.

The auditor received confirmation of the PREA Audit Notice Posting on April 25, 2024, an excess of six weeks prior to the first day of the on-site visit. The PREA Audit Notice was observed posted throughout the facility upon entering the front entrance, visitation, recreation, food services, program areas, administration, intake, mental health, medical, and housing units accessible for viewing by all inmates and staff.

The auditor was awarded office space to conduct all inmate and staff interviews within private settings. Interviews were conducted with random and specialized staff in addition to random and target group inmates. The inmate's count on the first day of the site visit was 1300. Twenty-six inmates were selected for random interviews and 23 were selected for the targeted groups interviews.

An interview with staff assigned to the mailroom confirmed the inmate outgoing mail is sealed by the inmate prior to placement in the outgoing mail. The Auditor received did receeve two written correspondences and one request through third party requesting to be interviewed. These inmates were selected during the random inmate interview selection. However, their requested for interview was not related concerns for their safety from sexual abuse and/or sexual harassment. The auditor

did not receive any confidential mail and/or request for interview from EMCF staff.

Based on the above, the facility has demonstrated compliance with all provisions of this standard.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 This is the second quarter of the fourth audit cycle. The review of the agency's website https://www.mtctrains.com/prea/ confirmed the Management & Training Corporation (MTC) has made public the final PREA reports for all correctional facilities under its management during each audit year cycle in accordance with the standard to include the East Mississippi Correctional Facility since the first year audit cycle August 2013 - August 2014 thorugh the current audit cycle 4, year two.

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 harassmer coordinator	nt; PREA		
	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 coordinator	nt; PREA		
	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 o	f 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 o	f 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 proficient	l English
	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 proficient	l English
	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 proficient	l English
115.16 (c)		yes
115.16 (c) 115.17 (a)	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?	_
	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?	_
	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? 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	yes
	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? 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)? 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	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.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

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

	-	
	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 investig	ations
	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 investig	ations
	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	
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
115.31 (a)	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual	yes
115.31 (a)	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? 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,	
115.31 (a)	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? 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? Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual	yes
115.31 (a)	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? 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? Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from	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	

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	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	
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
	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	yes
	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)	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? 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	
115.34 (a)	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? 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).)	
115.34 (a)	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? 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).) 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	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
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	suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
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 nonconforming 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 degree, 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 degree, 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.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
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 service	25
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support service	:S
	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 service	es
	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

115.66 (a)	Preservation of ability to protect inmates from contact abusers	ct with
	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
	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?	Ves

	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	yes
	after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	
115.71 (e)	after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal	
115.71 (e)	after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? 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	yes
115.71 (e) 115.71 (f)	after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? 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? 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	
	after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? 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? 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?	

	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 (I)	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 investigation	S
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

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

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	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 sex	ual 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 sex	ual 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 sex	ual abuse
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sex	ual 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 sex	ual 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)	15.82 (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)	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 serv	ices	
	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 a victims and abusers	buse	
	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 a victims and abusers	buse	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes	

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

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

1	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
1	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	yes
	correspondence to the auditor in the same manner as if they were communicating with legal counsel?	

(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