

PREA Facility Audit Report: Final

Name of Facility: Yazoo County Regional Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 01/11/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Amy J Fairbanks	Date of Signature: 01/11/ 2024

AUDITOR INFORMATION	
Auditor name:	Fairbanks, Amy
Email:	fairbaa@comcast.net
Start Date of On-Site Audit:	12/04/2023
End Date of On-Site Audit:	12/05/2023

FACILITY INFORMATION	
Facility name:	Yazoo County Regional Correctional Facility
Facility physical address:	154 Roosevelt Hudson Drive, Yazoo City , Mississippi - 39194
Facility mailing address:	

Primary Contact	
Name:	Marilyn Hathorne
Email Address:	ycrcftraining@yazoocountymms.gov
Telephone Number:	662-571-0613

Warden/Jail Administrator/Sheriff/Director	
Name:	Chaz White
Email Address:	ycrcfwarden@yazoocountymms.gov
Telephone Number:	662-763-7162

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

Facility Health Service Administrator On-site	
Name:	RN Cindy Griffins
Email Address:	ycrcfmedical@yazoocountymms.gov
Telephone Number:	662-751-8484

Facility Characteristics	
Designed facility capacity:	300
Current population of facility:	288
Average daily population for the past 12 months:	296
Has the facility been over capacity at any point in the past 12 months?	No

Which population(s) does the facility hold?	Males
Age range of population:	18-67
Facility security levels/inmate custody levels:	Medium and Minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	42
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	1
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0

AGENCY INFORMATION

Name of agency:	Yazoo County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	211 East Broadway Street , Yazoo City , Mississippi - 39194
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Kim Dingess	Email Address:	kdingess@mdoc.state.ms.us
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-12-04
2. End date of the onsite portion of the audit:	2023-12-05

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	300
15. Average daily population for the past 12 months:	296
16. Number of inmate/resident/detainee housing units:	5
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	299
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>42</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>0</p>

<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>1</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>26</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>They were selected by oldest, youngest, longest and newest Each housing unit had at least 4 to 5 inmates interviewed.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	0
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. It additionally included observations made while touring the operation. With the limited medical coverage requirement, I found this credible.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. Additionally, observations during any visits within the facility did not reveal any indications to contradict this.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. It additionally included observations made while touring the operation. I reviewed inmate rosters and selected though who were not Caucasian or African American which yielded two interviews (Asian and Arabic).</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. It additionally included observations made while touring the operation.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. It additionally included observations made while touring the operation.</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. It additionally included observations made while touring the operation.</p>

<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. It additionally included observations made while touring the operation. Additionally, no allegations of sexual abuse or sexual harassment were received.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. It additionally included observations made while touring the operation.</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>With the small population number, I was able to formally and informally interview 10 percent of the inmates, and most of the staff. After analysis of the operation and how they receive inmates, I was convinced there were no targeted inmates during the audit. This included informal conversations with inmates interviewed. It additionally included observations made while touring the operation. Additionally, through observation and informal conversations, it was confirmed they do not have a restrictive housing area.</p>

70. 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.
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:	12
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72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
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73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
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Specialized Staff, Volunteers, and Contractor Interviews

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

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	7
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76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
83. Provide any additional comments regarding selecting or interviewing specialized staff.	The contractor assigned is the facility consultant who assisted the facility with preparations for this audit and was available for questions, clarifications throughout the audit process.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

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

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

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

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

- Yes
 No

Non-certified Support Staff

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

- Yes
 No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

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

Identify the name of the third-party auditing entity

American Correctional Association

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Organization Charts · Interview with the PREA Coordinator/PREA Compliance Manager (PCM) · Interview with the Sheriff · Observations during the audit · FAQ <p>The following policy excerpts demonstrate the facility’s commitment to the requirements of zero tolerance for sexual abuse and harassment as well as an outline for preventing, detecting, and responding to allegations of sexual harassment and</p>

abuse.

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) 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, and responding to such conduct. (b) An agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities and (c) Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.*

Evidence reviewed/analyzed by provision:

(a) The policy language mirrors the standard language. It includes definitions for the following: Staff, Sexual Assault, Sexual Perpetrator, Sexual Misconduct, Inmate-on-inmate Sexual Abuse/Assault, Abusive Sexual Contact, Staff Sexual Harassment, Staff Sexual Misconduct, Sexual Abuse, Nonconsensual Sex Act, Exigent Circumstances, Intersex, LGBTI, Gender Nonconforming, and Transgender. It addresses all standards and standard provisions. It addresses requirements for both Prison and Jail and Community Corrections. It additionally incorporates American Correctional Association (ACA) standards relevant to the PREA law.

(b) (c) This facility contracts with the Mississippi Department of Corrections (MDOC) to house inmates while serving their sentence. The auditor reviewed the organization chart for the facility. It demonstrates a direct line to the Warden from the MDOC's PREA Coordinator. The organization chart demonstrates that there is an ACA Manager/Program Director who has responsibility for ensuring compliance with all PREA standards. Serving in her various capacities, she maintains continual contact with the inmate population which affords her the ability to keep a line of communication open with them. She can communicate with the MDOC's PREA Coordinator when necessary to ensure compliance with the requirements of this law. She is actively involved in all efforts towards compliance by working closely with the Warden, Chief of Security, nurse, case manager, and personnel staff. This was demonstrated to the auditor throughout the onsite audit.

Summary of evidence to support findings: Review of policy, interviews and observations during the onsite audit led the auditor to conclude that the policy addresses the requirements of the standard, a PREA Coordinator/PREA Compliance Manager (PCM) has been designated who is actively involved in all matters relating to compliance and she has the influence necessary to effectuate changes, which will be reflected throughout this report. The auditor finds the facility compliant with the standard provisions.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview with the Warden · PAQ <p>The PAQ confirms that the agency does not contract for the confinement of inmates.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p><i>Prison Rape Elimination Act of 2003 SOP 20-14-01 (a) A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with PREA standards. (b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.</i></p> <p>Summary of evidence to support findings: The PAQ indicates that the agency does not contract for the confinement of inmates. The interview with the Warden as well as observations during the audit led the auditor to find no evidence to dispute this. A policy is in place to ensure the standard requirements are met if this changes. The MDOC contracts for the confinement of their inmates with this facility/agency. Therefore, the standard is not applicable - compliant.</p>
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115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview with the Warden · Interview with the PREA Coordinator/PCM · Randomly requested staffing rosters · Interview with the Sheriff

- Interviews with random staff formal and informal
- Documentation of unannounced rounds (10/18/2023 days and nights)
- Current staffing plan
- Annual Staffing Review
- Observations
- PAQ

The PAQ indicates that the average daily population since the last PREA audit is 296. The design capacity is 300. The staffing plan is predicated on an inmate population of 300. The facility reports there have been no deviations.

The following policy excerpt supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors. (b) In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan. (c) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan. (d) Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.*

Policy mirrors the requirements of the standard provisions.

Evidence reviewed/analyzed by provision:

(a)The auditor reviewed the annual staffing plan provided by the facility dated 12/12/2023 and interview the Warden. It provides a detailed assessment of the minimum direct care staff to inmate ratio during day and night shifts. It addresses line of sight observation and staff training. It takes into consideration video monitoring. (1) Generally accepted detention and correctional practices; This facility is currently accredited by ACA. this facility participates in accreditation with the American Correctional Association. (2) Any judicial findings of inadequacy; the auditor was informed there were none and found no evidence to dispute this. there are none. (3) Any findings of inadequacy from Federal investigative agencies; the auditor was informed there were none and found no evidence to dispute this. there are none. (4) Any findings of inadequacy from internal or external oversight bodies; the staffing plan and interview ensure this is addressed. per the interview, no major deficiencies have been identified by the twice-yearly compliance visits from the MDOC. (5) All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated); facility staff are aware of blind spot areas and have contingency plans (increased rounds) for addressing them. (6) The composition of the inmate population; these are medium custody inmates housed for the MDOC. These inmates are placed here if they are medically stable, have no mental health needs and a prison record void of issues requiring increased supervision. Transfer back to the MDOC is addressed if they cannot be managed at this operation. (7) The number and placement of supervisory staff; this level of staffing has been established.(8) Institution programs occurring on a particular shift; the facility offers Adult Education, Alcohol and Drug treatment, Anger Management, Basic Computer Skills, Bible Study, Parenting, Pre Release/Smart Start(9) Any applicable State or local laws, regulations, or standards; the auditor was informed there were none and found no evidence to dispute this. (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse (none); and (11) Any other relevant factors.

(b)The facility indicates there are no deviations from the staffing plan. The auditor randomly requested Staffing rosters for February 1, 2023, July 1, 2023, and November 1, 2023, which also determined that there have been no deviations from the staffing plan. The interview with the Warden confirmed that they have not had to deviate from the staffing plan; overtime is utilized.

(c) Notation in the PAQ, review of the Staffing Plan and interviews with the Warden and PREA Coordinator/PCM provided the auditor assurance that the staffing plan is reviewed annually or more often as deemed necessary, in collaboration with the PCM, and that staffing, video monitoring and resources are assessed.

(d)Policy requires that intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment for night shifts as well as day shifts. Policy prohibits 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. One

	<p>documentation supporting this requirement was received with the PAQ. During the audit, the auditor asked staff during the random staff interviews. All assured the auditor that the Chief of Security and the Warden are making frequent rounds, day shift and night shift. Comments received were, “all the time”. They assured the auditor that no one is alerting staff when they are conducting rounds.</p> <p>Summary of evidence to support findings: Review of the policy, interview with the Warden and random staff, observations, documentation regarding unannounced rounds and review of the staffing plan confirmed to the auditor that there is sufficient evidence to support a finding of compliance with all provisions of the standard.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview with the PREA Coordinator · Interview with the youngest inmate <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p><i>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, (a) A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area or sleeping quarters. (b) In area outside of housing units, agencies shall either: Maintain sight and sound separation between youthful inmates and adult inmates or provide direct staff supervision when youthful inmates and adult inmates have sight, sound or physical contact. (c) Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercises and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.</i></p> <p>Policy mirrors the standard requirements.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) (c) The PAQ indicates the facility does not house inmates under the age of 18 years old. The age of majority is 18 years old in this state confirmed by the auditor</p>

	<p>through research of state laws. Policy does address the requirements of the provision in the event that an exception occurs. The auditor requested to interview the youngest inmate; he was twenty years old.</p> <p>Summary of evidence to support findings: Based on the evidence above, the auditor finds the facility compliant with the standard provisions – not applicable.</p>
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115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview with Warden · Interviews with random staff (males and females) · Interviews with random inmates · Observations of living areas · Observations of strip search areas · Review of video monitoring · Training curriculum · Staff training documentation · PAQ · Frequently Asked Questions - Clarification of Application to PREA Standards Provisions (FAQ) <p>The PAQ indicates that there has been no cross-gender strip or cross-gender visual body cavity searches of inmates no cross-gender strip or cross-gender visual body cavity searches of inmates. It indicates forty-two (42) security staff (100%) have received training in cross gender supervision.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) The facility shall not</i></p>

conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. (b) As of August 20, 2015, or August 20, 2017, for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. (c) 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. (d) 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. (e) The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. (f) The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Policy mirrors the requirements of the standard.

Evidence reviewed/analyzed by provision:

(a) Policy and the PAQ supports that the facility has not conducted any cross-gender searches. Formal and informal interviews conducted during the onsite audit confirmed this to the auditor. The auditor observed male staff, to include the Warden and Chief of Security, that provided further assurance that a cross gender strip search will not occur.

(b) The facility does not house female inmates.

(c) Per policy, if exigent circumstances exist warranting this, the facility has an Extraordinary Occurrence Report (EOR) that would be completed.

(d) Policy supports that inmates are able 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. Staff of the opposite gender are required to announce their presence when entering an inmate housing unit. The following observations were made by the auditor during the onsite audit: Multi shower head showers are located in each housing unit(zone), a shower curtain with a clear top and white bottom covers the showers. Toilets and urinals have concrete barriers, built halfway to block views of them. All random staff and random inmate interviews confirmed to the auditor that the physical plant and staff behavior assures that

	<p>inmates can shower, use the toilet and change clothes without being seen by opposite gender staff. During all visits the housing units (zones), the opposite gender auditor and staff who escorted her were announced loudly stating “female staff entering the zone”. All random staff interviews and all random inmate interviews confirmed this. Facial expressions let the auditor to conclude that this is a regular occurrence.</p> <p>(e) Policy and all random staff interviews confirmed that the facility does not and would not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. Additionally, there were no transgender inmates housed at this facility.</p> <p>The auditor randomly and informally interviewed inmates who have been housed at this facility for several years and staff who have worked at this facility for several years if they recall a transgender/intersex inmate is housed here. All confirmed this has not occurred. The auditor believes that due the nature of the population (no medical and mental health needs), it is highly unlikely that a transgender/intersex inmate will be housed here. However, if this occurred, staff have been trained in cross-gender searches (see comments to provision f.) and to support compliance with the clarification established in the FAQ, female staff would likely conduct the pat searches.</p> <p>(f) Cross gender supervision training is occurring; but it does not address how to conduct cross-gender searches. The agency has agreed to provide additional training for staff, “PREA Cross Gender and Transgender Pat Search” training video, available through the PREA Resource Center website. The auditor viewed the video and found it to provide detailed instruction and illustration for searching transgender/intersex incarcerated individuals. Additional documents received demonstrate that the staff have received this training (seventeen examples).</p> <p>Summary of evidence to support findings: Policy, the PAQ, FAQ, interviews with the Warden, random staff, random inmates, review of security cameras, observation of living areas, review of training curriculum and training documentation provided ample evidence for the auditor to find the facility compliant with the standard provisions.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01

- Observations during the tour, PREA information postings
- Interview with the Sheriff
- Random staff interviews
- Interview staff who conduct orientation
- Interviews with LEP inmates
- PAQ

The PAQ indicates that the number of instances where inmate interpreters, readers, or other types of incarcerated individual assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under § 115.64, or the investigation of the resident's allegations is zero.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, 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.

Policy mirrors the requirements of the standard and provisions.

	<p>Evidence reviewed/analyzed by provision:</p> <p>(a) The PAQ indicates that the facility does not house inmates with disabilities – physical, mental or cognitive, based on the agreement with the Mississippi Department of Corrections. The auditor found this credible after observations during the onsite visit and informal interviews with staff and inmates.</p> <p>(b) Contract with a translator was provided to the auditor for review. It was clarified that this person will provide translation services for Spanish. The facility has PREA posters located in areas where inmates can view them in English and Spanish in addition to PREA inmate education in both English and Spanish. When selecting inmates to be interviewed, the auditor sought out those deemed Hispanic. Three inmates were interviewed that were bi-lingual, however all spoke and understood English. The auditor informally and formal asked numerous staff (Warden, officers, case manager and nurse) if they had any experience with an inmate that does not speak English or Spanish; they all indicated no. The auditor concluded that due to the nature of the population housed here, the MDOC would not send an inmate who cannot speak English as the facility would initiate a return transfer. Therefore, the auditor finds that they are able to meet the requirements of this provision.</p> <p>(c) Random staff interviews confirmed to the auditor that another inmate has not been used to interpret regarding any PREA situation (first responder duties). The auditor found this credible as they report not having any PREA allegations.</p> <p>Summary of evidence to support findings: Policy, interviews, observations, review of the interpreter contract, all provided the auditor with sufficient evidence to support a finding of compliance.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Documentation of background check – status employees (two examples provided with the PAQ, additional random files reviewed) · Interviews with the Human Resources staff · Review of personnel files – promotional and status · Application for Employment Questionnaire

· Observations

The PAQ indicates that zero staff have been hired who may have contact with inmates in the previous twelve months, zero contractual staff.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, (a) *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 force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. (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.*

Evidence reviewed/analyzed by provision:

(a)(b)(f) As information regarding these provisions was unclear, the facility agreed to adopt a personnel questionnaire for employees, contractors, volunteers and promotional staff that asks the following questions: (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

	<p>attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section; information regarding prior incidents of sexual harassment. All current staff have reviewed and signed this questionnaire; copies were provided to the auditor. Their signature acknowledges a continuing duty to report.</p> <p>(c) The interview with HR confirmed that background checks and reference checks are conducted on all potential candidates for employment. The auditor did not discover any staff with prior correctional experience. Additionally, the facility has not hired any new staff in the prior twelve months (new staff were in the process of being hired but the process was not complete).</p> <p>(d)The facility has one contractor, a consultant. A background check was conducted.</p> <p>(e) The HR staff confirmed that a background check is completed on all new candidates and no less frequently than every five years, but typically sooner. In addition to documentation provided to the auditor in the PAQ, the auditor randomly requested to review personnel files for staff with the last name of L, M, and S. All three files reviewed demonstrated a background check completed in 2023. Review of the staff recently promoted revealed a background check in 2023.</p> <p>(g) The Personnel Questionnaire and review of the application were reviewed. Both the Personnel Questionnaire form and application prompt the applicant to sign acknowledging that the information is true and complete, and that falsification and omissions may disqualify the candidate from employment.</p> <p>(h)The interview with the Warden and the HR staff confirmed to the auditor that contacted regarding a prior employee, they would provide hire date, position(s) held, termination date and if they would rehire them.</p> <p>Summary of evidence to support findings: Policy, interview with the Warden, HR staff, review of documentation all provided the auditor with sufficient evidence to support a finding of compliance. The auditor finds the facility compliant with the standard provisions.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01

	<ul style="list-style-type: none"> · Observations of camera monitoring · Observations during the tour · Interviews Sheriff · Interview Warden · PAQ <p>The PAQ indicates the facility has not acquired any new facilities or made any substantial expansions or modifications of existing facilities since the last PREA audit and has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p><i>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, (a) 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. (b) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.</i></p> <p>Policy mirrors the standard requirements.</p> <p>Summary of evidence to support findings: The interview with the Sheriff and the Warden provided the auditor assurances that any changes to video monitoring and the physical plant will include consideration for the facility's ability to protect inmates from sexual abuse. Policy supports the requirements of the provisions. The auditor finds the facility compliant with the standard provisions.</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · MOU with Mississippi Coalition · Verification of SANE exams available

- Interview with PREA Coordinator/PCM
- Interview with advocate from MSCASA
- Sexual Assault Response and Containment Checklist
- Observations
- PAQ

The PAQ indicates there have been no forensic medical exams, no SANE/SAFE exams nor exams performed by a qualified medical practitioner during the previous twelve months. The auditor found no evidence to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, (a) *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. (b)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. 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. (c)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 evidentiary 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. (d)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. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services. (e)As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and

referrals. (f) To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section. (g) The requirements of paragraphs (a) through (f) of this section shall also apply to: (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails. (h) For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

Policy mirrors the standard and provision requirements.

Evidence reviewed/analyzed by provision:

(a)(b) Interviews and review of the Sexual Assault Response and Containment Checklist supports the MDOC Criminal Investigation Division (CID) will be contacted in the event of a sexual assault. The facility will follow the checklists; the agency (MDOC) will be responsible for uniform evidence.

(c)(d)(e) The Sexual Assault Response and Containment Checklist supports that the medical staff will ensure that if warranted, the inmate will be transported to the local hospital for a SANE exam. The auditor researched the possibility of a SANE exam being available and found that the MSCASA can be contacted to find a hospital that can provide a SANE examiner. The website further confirmed that at that time a trained advocate can be requested. The auditor researched the hospital and MSCASA and confirmed that this organization can be contacted to provide a qualified victim advocate.

The MOU with the Mississippi Coalition Against Sexual Assault (MSCASA) indicates that the MSCASA will do the following:

- Respond to requests to provide services to incarcerated survivors of sexual abuse and sexual harassment to include hospital accompaniment, in-hospital investigatory interviews, emotional support services in person and referrals.
- Respond to calls from inmates to the toll-free hotline numbers as well as respond to written correspondence.
- Provide follow up services and crisis intervention to victims (inmates) of sexual assault
- Complete all security clearances and training
- Maintain confidentiality of communication with clients who receive MSCASA advocacy support services.
- Maintain a list of rape crisis center personnel by region who have completed certified volunteer training

	<p>The interview with the advocate from MSCASA confirmed this agreement.</p> <p>(f) The agency, MDOC, is the entity responsible for conducting all investigations of this facility and in accordance with their policy, quoted above, will follow the requirements of provisions a. through e.</p> <p>Summary of evidence to support findings: Policy, MOU, confirmation of availability of SANE exams and presence of a qualified victim advocate provide the auditor with evidence supporting the requirements. The auditor finds the facility compliant with the standard provisions.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview Sheriff · Sexual Assault Response and Containment Checklist · Observations · PAQ <p>The PAQ indicates there have been zero allegations resulting in administrative investigations and zero resulting in criminal investigations in the past 12 months.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a)The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.(b)The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency shall publish such policy on its Web site or, if it does not have one, make the policy available through other means. The agency shall document all such referrals. (c)If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity. (d)Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in</i></p>

place a policy governing the conduct of such investigations. (e)Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.

Policy mirrors the standard language.

Evidence reviewed/analyzed by provision:

(a) (b) Policy and the interview with the Sheriff confirmed to the auditor that all allegations of sexual abuse and sexual harassment will be referred to the investigating entity (CID) for investigation. The facility reports that they have not received any allegations. After concluding all onsite audit activities, the auditor found this credible.

(c)The MDOC is the responsible entity for conducting criminal investigations. A copy of the Sexual Assault Response and Containment Checklist is available on the MDOC website for review. It describes the response process which includes notification to CID of MDOC

Summary of evidence to support findings: Policy, interview with the Sheriff, Sexual Assault Response and Containment Checklist, onsite audit observations and informal interviews all provided evidence of support. The auditor finds the facility compliant with the standard provisions.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Training curriculum · PREA Training requirements Orientation and in-service training · Staff training records/acknowledgment of comprehension (one example with PAQ) · Observations · Interviews random staff · PAQ

· FAQ

The PAQ indicates that all employees who have contact with inmates were trained on PREA requirements as outlined in the provision.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a)The agency shall train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' right to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. (b) Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa. (c) All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies. (d) The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a) (b)The auditor reviewed the training plan. It is a 17-page power point presentation that addresses the following:

- Zero tolerance
- Purpose and the law
- MDOC policy
- Definitions sexual abuse and sexual harassment
- Inmate reporting - verbal, writing, anonymous and 3rd party

	<ul style="list-style-type: none"> · Reports documented · PREA tip line (free, confidential) · Inmates with disabilities and LEP · Reporting to other confinement facilities · Extraordinary Occurrence Report (EOR) · PREA investigations – all allegations reported · Administrative and Criminal, referral for prosecution · Staff first Responder Duties <p>Additionally, staff view three videos regarding PREA. The auditor reviewed the videos. They provide the following information: review of the law, dynamics of abuse, harassment, and reactions of victims. It is tailored to male inmates. Cross Gender Supervision addresses the following: Male Supervision of Female Inmates, Female Officers supervising male inmates, Pitfalls of Cross Supervision, Warning signs of possible romance, Limits to Cross-Gender viewing and searches, searches and interaction with inmates who identify as transgender or intersex.</p> <p>(c) Policy and interviews reflected that staff get trained annually as reflected by the training requirements for both orientation (new staff) and in-service annual training. All current employees have been trained as concluded by the training requirements and documentation.</p> <p>(d) The auditor reviewed the PREA training acknowledgement that does require the staff to sign noting “I understand the information provided regarding the Prison Rape elimination Act (PREA) of 2003. “ All staff interviewed demonstrated to the auditor a thorough understanding of the requirements of the PREA standards.</p> <p>Summary of evidence to support findings: As illustrated, policy, interviews with staff, review of the training curriculum, documentation showing PREA training occurs at orientation, prior to contact with inmates, it is address annually, the materials address the required points in the provision all addressed the requirements. The auditor finds the facility compliant with the standard provisions.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

	<ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview contractor (consultant) · Review contractor training records · Observations · PAQ <p>The PAQ indicates there are zero volunteers and one contractor who has been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) 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 procedure. (b)The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contract 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. (c)The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) (c)The auditor was informed that the contractual staff receive the same training as direct supervision staff. Documentation was provided that one contractual staff did receive the training. The facility reports they do not use volunteers and have not since prior to the pandemic. The auditor found this credible.</p> <p>Summary of evidence to support findings: Policy, interview and review of the documentation provided sufficient evidence. The auditor finds the facility compliant with the standard provisions.</p>
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Prison Rape Elimination Act of 2003 SOP 20-14-01
- Observations posters
- Demonstration of the intake process
- Demonstration of Orientation
- Interviews Intake staff
- Interviews with staff who conduct Orientation
- Orientation Checklist
- Inmate education and signed acknowledgment (two examples provided)
- Review of randomly requested inmate intake records
- Randomly selected inmate interviews
- Interview with inmate housed at the facility the longest
- PAQ

The PAQ indicates that ninety (90) inmates were admitted that were given information at intake, 90 stayed past 30 days who received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) 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. (b) 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. (c) 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. (d) 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. (e) The agency shall maintain documentation of inmate participation in these education sessions. (f) 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.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a) The auditor reviewed the intake process with the booking officer and the case manager. At intake, the booking officers' review PREA (Staff Sexual Misconduct, the law forbidding staff to engage in sexual abuse with inmates, - KES 510.120 (1c), how inmates can protect themselves, if you are a victim, if you are a perpetrator consequences). Inmates sign acknowledging this information was reviewed.

The case manager meets individually the same day (or no later than the next day) and provides inmates with the Inmate handbook and again reviews PREA (zero tolerance, prevention, for sexual assault towards someone else). Inmates sign acknowledging receipt of this information also. All inmate interviews confirmed they received this information. The auditor requested and received documentation demonstrating the receipt of this information for inmates for the month of November 2023.

(b) The auditor was not present on a day that orientation is given. Review of the process with the PREA Coordinator/PCM confirmed the staff review the operation which includes the Inmate Handbook which has information about PREA. An orientation check list confirmed this process. The handbook provides the following: how to report internally, how to report externally (Mississippi MS Coalition Against Sexual Assault (MSCASA), to include the address. It further explains that support services relating to sexual violence (hospital accompaniment for the victim, in-hospital investigatory interviews, and in-person support services) are available through MSCASA. All inmate interviews confirmed they are knowledgeable regarding their rights under this law, mostly referencing the posters and acknowledged possession of the handbook.

(c) All inmates acknowledge receiving the information. The auditor specifically requested to speak to the inmate housed at this facility for the longest (eight years) who confirmed he has received this information.

(d) Information (handbook, posters) are available in English and Spanish. The auditor analyzed and assessed this operation and concluded that they will not house inmates who speak a different language as they would promptly be returned to MDOC. The auditor sought out Hispanic inmates to interview and confirmed although they are bilingual, they are able to understand English. See comments to 115.16.

(e) The auditor received documentation of participation in orientation. Additionally, the auditor randomly requested and received additional documents demonstrating this.

(f) PREA posters were evident in numerous places in the facility: front lobby, administrative hallway, near food service, every housing unit, booking area, zone hallway and medical area. Three main posters were located at eye level (no wheelchair bound inmates housed here). They were in English and Spanish and laminated. The first poster, black background, yellow and white font, 8 1/2 x 11

	<p>inches, informed inmates about zero tolerance, right to report and victim support services. The second poster, MDOC PREA Tip Line, 8 1/2 x 11 inches, provided a speed dial and other phone number for staff members and inmates to report. It indicated that they can report anonymously and the hotline call was free. It also emphasized that reports can be made to any supervisor or staff, or by written, verbal and outside third-party allegations. The third poster, blue background, black font, 8 1/2 x 11 inches, focuses on the MSCSA services and how to reach them. Additionally, the tip line poster was located by the phones in a secure bulletin board. The auditor tested the tip line number, from the inmate phone and was able to reach staff for MSCASA. All inmate interviews confirmed to the auditor that the posters have been present for a long time.</p> <p>Summary of evidence to support findings: Policy, review of booking documents, intake documents, orientation documents, interviews with booking staff, orientation staff, random inmates and observations all provided evidence which the auditor could triangulate and thus provide a determination that there was sufficient evidence to support a finding of compliance with all provisions of the standard.</p>
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115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Interview with the Warden · PAQ # of investigators agency <p>The PAQ indicates there are currently zero investigators trained at this facility to handle and respond to sexual abuse allegations.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) In addition to the general training provided to all employees pursuant to § 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. (b) 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. (c) The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. (d) Any State entity or</i></p>

	<p><i>Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Finding of compliance is based on the following: The interview with the Warden confirmed to the auditor that the contracting agency, MDOC conducts all investigations pertaining to sexual abuse, sexual harassment and retaliation for reporting. No facility staff would complete them. Therefore, the auditor finds the standard not applicable - compliant.</p>
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Specialized medical health training curriculum · Training records · Observations · Interviews medical staff · PAQ <p>The PAQ indicates that the facility has one medical and no mental health staff, 100% have received specialized training.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) 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 received the training referenced in</i></p>

this standard either from the agency or elsewhere. (d) Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency.

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a) (c) (d) The auditor interviewed the medical staff (registered nurse) and reviewed acknowledgement of training and the training curriculum. The interview and the review of the training curriculum confirmed that the training addressed the following: (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. The interview additionally confirmed to the auditor that she receives regular PREA training yearly. She provided information that in the need for mental health, they have a contractual arrangement with an outside provider.

(b) Not applicable, forensic exams are provided at a local hospital.

Summary of evidence to support findings: Policy, review of the training curriculum, interview with the nurse all provided sufficient evidence for the auditor to find the facility compliant with the standard provisions.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Risk Assessment tool · Interviews Staff who perform risk screens - case manager · Risk assessments · Interview PREA Coordinator/PCM · PAQ · FAQ

The PAQ indicates that ninety (90) inmates were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility, ninety (90) inmates remained past 30 days 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.

The following policy excerpts supports compliance with the requirements of this standard: Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(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's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's 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 paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section. (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.

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a)(b) Policy, interviews with Intake staff, booking officer, case manager and demonstration of intake support that an initial intake screen is completed immediately upon arrival to assess risk of sexual abuse or risk of being sexually abused.

(c)(d) (e)An example of the screening tool was provided with the pre-audit documentation. The questions were asked in several different ways but did not appear to have an objective assessment. A new form has been implemented; all inmates have been rescreened. Copies verifying this were provided to the auditor. The objective screening tool used now considers the following information:

Risk of being sexual victimization

- mental, physical, development disability
- age
- physical build
- first incarceration
- convictions for sex offense against an adult or child
- perception of or self identifies as gay, lesbian, bisexual, transgender, intersex or gender nonconforming, including screener's subjective assessment (this meets the clarification of the FAQ)
- crimes exclusively nonviolent
- previous experience as a victim of sexual abuse community and/or while incarcerated
- inmate's perception of vulnerability

The updated risk screen developed and used at this facility addresses all of the requirements of the provision. No additional questions are used to make the objective determination. The facility does not hold inmates who are detained solely for civil immigration. The screen is completed upon arrival by the intake case manager, typically within hours but can take up to the 72-hour time limit. This conclusion was based on interviews with staff who conduct the screens, intake staff, inmates and review of risk assessments. With the new screen, points are assessed based on the criteria, a total reflects whether the inmate will be designated as a potential victim or a potential perpetrator.

(e) The screening tools did not clearly address the following:

Risk of being Sexually Abusive

Institutional incidents of sexually abusing other inmates

Inmate has prior acts of violent sexual abuse (non-institutional)

Inmate has prior convictions for violent offenses

Inmate has prior violence within institutional setting or jail

The questions are asked verbally and in private according to the interview with the

	<p>person who conducts risk assessments and demonstration of the intake process, as well as confirmed by inmates who were randomly asked.</p> <p>(f) The case manager is tasked with conducting a second assessment within thirty days as she regularly meets with every inmate every thirty days. Inmate interviews supported this frequency of meeting with the case manager. It was confirmed to the auditor that this occurs in person, privately. The inmate will now be asked verbally the questions again. The screening form affords a place to check that it will be the 30-day reassessment. This practice does now meet the expectations clarified in the FAQ that requires that the 30-day review be conducted in person with the inmate.</p> <p>(g) Policy and interview with the random staff assured the auditor that staff are observant and would communicate any information to the case manager that may initiate an updated (when warranted referral, receipt of additional information or request) risk assessment. The PREA Coordinator/PCM assured the auditor in addition to policy that an updated risk assessment would be completed upon conclusion of a sexual abuse investigation. No examples were available to support this as they have not had any sexual abuse or sexual harassment investigations for the previous twelve months. The auditor found this credible after conducting that pre audit and onsite audit. The updated form provides a place to notate that the screen is updated.</p> <p>(h) The interview with the intake staff/staff who conduct risk assessments confirmed to the auditor that they would not require an inmate to answer sensitive questions - (d)(1), (d)(7), (d)(8), or (d)(9) if they did not want to respond. Interviews with the inmates confirmed that they believe they would not be disciplined if they did not respond.</p> <p>(i) Per the interview with the PREA Coordinator/PCM, Warden, case manager and observation of the inmate record storage area, risk assessments are maintained in the computerized management system or in the case manager's office which has appropriate controls on which staff can access the area.</p> <p>Summary of evidence to support findings: Policy, interviews, and review of documents provided the auditor ample evidence that the provisions of the standard</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Observations

- Interviews PREA Coordinator/PCM
- Interview with the Warden
- Interview with staff who conduct the risk screen

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) 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. (b) The agency shall make individualized determinations about how to ensure the safety of each inmate. (c) 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. (d) 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. (e) A transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration. (f) Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. (g) 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.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a)(b) Policy and interviews support that they will use the information from the risk assessment 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. This facility is able to operate by zones so that inmates from one inmate would rarely interact with inmates from the other zones. The auditor observed that there are two separate recreation yards observed that support this management tool. This would afford the facility to make individualized determinations. At the time of the audit, the facility reports there are no inmates designated as potential victims or potential perpetrators. After conducting the onsite activities, the auditor found this credible.

(c) (d)(e) (f) Policy supports the requirements; the facility did not house any transgender/intersex inmates. The auditor found this credible after informally interviewing staff and inmates who have been at this facility for several years. Based on the classification of inmates received by the MDOC, the auditor concludes that the

	<p>facility will not be sent an inmate who identifies as transgender/intersex, especially as their medical and mental health needs could not be met at this operation.</p> <p>(g) The facility does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated units, or wings solely on the basis of such identification or status.</p> <p>Summary of evidence to support findings: Policy, interviews with staff and inmates, and observations provided the auditor with sufficient evidence. The auditor finds the facility compliant with the standard provisions.</p>
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115.43	Protective Custody
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interviews Warden · Observations · PAQ <p>The PAQ states that no inmate has been placed in involuntary protective custody due to their high risk of sexual victimization. Comments in the PAQ indicate that if this need was discovered, this inmate would be returned to the custody of Mississippi DOC. The auditor found no evidence to dispute this during the audit process.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. (b) Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations. (c) The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be</i></p>

arranged, and such an assignment shall not ordinarily exceed a period of 30 days. (d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (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. (e) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a) (b) (c) (d) (e) The interview with the Warden confirmed that he has not returned anyone to MDOC due to involuntary placement related to high risk for sexual victimization. The auditor and Warden discussed the normal operations; if there was a need to return to the MDOC, it would not have to be for placement in restricted housing; this would be determined by the receiving facility. This facility does not have any restrictive housing. Based on observations the auditor found this credible.

Summary of evidence to support findings: Policy, PAQ, interview with the Warden and observations provided the auditor with sufficient evidence to support a finding of not applicable - compliance.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Facility Rulebook · MOU with Mississippi Coalition · PREA Tip line, staff and inmates · PREA Intake Information · Interviews random staff · Interviews random inmates · Assessment of grievance process, telephone and mail procedures/access · Test of telephone for reporting

· Observations

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) 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. (b) The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. (c) Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. (d) The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a) (b) (c) (d) The auditor confirmed that inmates can report verbally, in writing, third party, anonymously and through the PREA tip line. This was confirmed by interviews with staff and inmates during the onsite audit. The PREA Tip line poster provides the following information:

MDOC PREA Tip Line poster: English and Spanish

Staff members, general public and inmates can report as a victim or witness to sexual misconduct, sexual assault and sexual harassment. Reports can be made anonymously.

Directions for how to call (6500#). Leave a voice message

The auditor tested the tip and was able to speak with a person. She works for MSCASA. She confirmed that reports can be received anonymously, and they will be forwarded to the MDOC CID. The auditor did not need a pin number to make this call. Additionally, there was no message that the call is recorded, leading the auditor to conclude that it is not (based on informal dialogue with inmates during the interviews). Three telephones were available to the inmates in a housing unit that has fifty-four (54) inmates. A secure mailbox is available for outgoing mail. Staff confirmed it was picked up by the Chief of Security. All inmate interviews confirmed to the auditor that grievances have been processed, mail is sent out and received without issues, and the telephone has been available for use. Staff interviews confirmed they were knowledgeable regarding their obligation to report, who to

	<p>report to (immediately supervisor, Chief of Security, Warden), report immediately and that an EOR would be completed. The auditor called the phone number for reporting and was able to reach the MDOC staff who could transfer me to the person that could take the call. This was during business hours. After hours, a message informs the caller to call back during business hours.</p> <p>Summary of evidence to support findings: Policy, interviews with staff, interviews with inmates, testing of the reporting line on the inmate phone and outside the facility provided the auditor with sufficient evidence to support compliance with all provisions of the standard.</p>
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115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview with Grievance Coordinator/Warden · Interviews with random inmates · Facility Rulebook · Observations - assessment of grievance availability · PAQ <p>The PAQ provided the following information:</p> <p>zero grievances regarding sexual abuse</p> <p>zero emergency grievances</p> <p>zero grievances written in bad faith</p> <p>zero third party grievances</p> <p>zero grievances alleging imminent sexual abuse</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse. (b)(1) The agency shall not impose a time</i></p>

limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired. (c) The agency shall ensure that— (1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and (2) Such grievance is not referred to a staff member who is the subject of the complaint. (d)(1) The agency shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. (2) Computation of the 90-day time period shall not include time consumed by inmates in preparing any administrative appeal. (3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level. (e)(1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. (2) 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.(3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision. (f)(1) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. (g) The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a)(b)(c)(d)(e)(f)(g) Policy supports all aspects of the provisions of the standard. The facility reports that no sexual abuse grievances have been filed; the auditor found

	<p>this credible. The auditor asks inmates if there were any concerns with filing a grievance; all said no. The auditor spoke with staff who handle grievances; they receive approximately thirty (30) nonsexual abuse grievances a year. They would close out any grievance alleging sexual abuse and forward it immediately to the investigators.</p> <p>Summary of evidence to support findings: Policy, observations and interviews provided evidence to support a finding of compliance.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · MOU with Mississippi Coalition Against Sexual Assault · Observations · Interview with trained advocate for the MSCASA · PREA Postings · Interviews random inmates · Review of access to mail and telephones - policy · Testing of the phone line <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. (b) 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. (c) The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community</i></p>

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.

Policy mirrors the requirements of the PREA standards and provisions.

(a)(b)(c)

The MOU with the Mississippi Coalition Against Sexual Assault (MSCASA) indicates that the MSCASA will do the following:

- Respond to requests to provide services to incarcerated survivors of sexual abuse and sexual harassment to include hospital accompaniment, in-hospital investigatory interviews, emotional support services in person and referrals.
- Respond to calls from inmates to the toll-free hot line numbers as well as respond to written correspondence.
- Provide follow up services and crisis intervention to victims (inmates) of sexual assault
- Complete all security clearances and training
- Maintain confidentiality of communication with clients who receive MSCASA advocacy support services.
- Maintain a list of rape crisis center personnel by region who have completed certified volunteer training

When testing the reporting line from the inmate phone, while speaking with the advocate, the auditor was able to confirm the following: the inmate is informed of mandatory reporting rules, privacy, confidentiality under relevant law. Staff who answer the phone have received over 40 hours of training to qualify to be victim advocates. She specifically indicated she works closely with Just Detention International (JDI). MSCASA staff have conducted training with staff at the facility (March 2023). MSCASA has not received any calls from this facility for emotional support. Additionally, the auditor requested the facility to run a query on the phone system about the number of calls made to this number. It indicated there were none.

Interviews with the inmates confirmed to the auditor that they see the poster, some knew that it was how to get help, most however did not know exactly what the organization provided but assured the auditor the posters have been available, and they can get information if they ever felt they needed it from them.

Summary of evidence to support findings: Policy, interviews with the MSCASA staff, inmates, testing of the phone line, review of the MOU provided the auditor evidence, analyzed and triangulated which led to a finding of compliance.

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Prison Rape Elimination Act of 2003 SOP 20-14-01
- Agency website - Prison Rape Elimination Act (PREA) | Mississippi Department of Corrections (ms.gov)
- Interview with the Warden
- Interview with the PREA Coordinator/PCM
- Random staff interviews
- Testing of third-party reporting
- Observations
- FAQ

The following policy excerpts demonstrate compliance with the provisions of the standards.

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.*

Policy mirrors the requirements of the PREA standards and provisions.

The agency website provides the following: To Report Sexual Abuse Contact:
MS. Coalition Against Sexual Assault at:
P.O. Box 4172
Jackson, MS 39296
Or Call:
1-888-987-9011

The auditor tested the reporting number while outside the facility (12/1/2023 1:40m EST) and was able to quickly reach staff from MSCASA who indicated they are able and willing to accept reports and forward them to the appropriate agency staff.

Summary of evidence to support findings: Policy, website, testing of the reporting line all provided sufficient evidence to support a finding of compliance.

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Prison Rape Elimination Act of 2003 SOP 20-14-01
- Interview with the PREA Coordinator/PCM
- Interviews random staff
- Interview with medical staff
- Mandatory reporting laws
- Observations

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) The agency shall require all staff to report immediately and according to Prison Rape Elimination Act of 2003 SOP 20-14-01 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. (b) 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 Prison Rape Elimination Act of 2003 SOP 20-14-01, to make treatment, investigation, and other security and management decisions. (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. (d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person's statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws. (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.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a) All staff interviews assured the auditor that everyone is aware of their obligation to report all allegations of sexual abuse, sexual harassment, staff neglect that may lead to it and/or retaliation for reporting abuse to the shift supervisor, lieutenant and

	<p>Warden. Staff confirmed this would include suspicions of such behavior.</p> <p>(b) All staff immediately confirmed their understanding of maintaining confidentiality of the information and only discussing that which is relevant to security, management decisions and investigations.</p> <p>(c) The interview with medical staff confirmed she understands her obligation to report this information. In the examination room, there is a large font, salient poster informing inmates that medical staff are obligated to report and have limitations on confidentiality.</p> <p>(d) Mississippi Adult Protective Services APS investigates reports of suspected abuse, neglect, and exploitation of vulnerable adults. Guided by the Mississippi Vulnerable Persons Act, APS provides for the protection of at-risk vulnerable persons age 18 and older residing in private home settings through direct delivery or referral to resources within the community. Therefore, this does not apply to inmates confined to a facility. The facility does not house inmates under the age of 18 years old.</p> <p>(e) Policy and interviews with random staff all confirmed to the auditor that they will ensure that all allegations, to include anonymous and third-party will be reported in accordance with the response plan and forwarded to the investigators.</p> <p>Summary of evidence to support findings: As illustrated, the auditor found sufficient evidence through review of the policy, interviews, review of mandatory reporting laws to support a finding of compliance with the standard provisions.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interviews Sheriff · Interview Warden · Interview random staff · Observations · PAQ <p>The PAQ indicates there have been no times the facility determined that an inmate was at risk of imminent sexual abuse. The auditor found no reason to dispute this</p>

	<p>during the audit process.</p> <p>The following policy excerpts demonstrate compliance with the provisions of the standards.</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>The interview with the Sheriff, Warden, and randomly selected staff all confirmed that an inmate at imminent risk of sexual abuse or any imminent risk of harm shall have immediate action taken to ensure his safety. This can include a transfer to another county regional facility. All staff interviews confirmed to the auditor that they would take immediate action if they believed an inmate was at imminent risk of sexual abuse. Staff confirmed that this request to intervene before something has occurred would be supported, and action would be taken to protect the inmate before the suspected event occurred.</p> <p>Based on information noted above and overall observations during the audit, the auditor found staff credible and that to protect inmate is an integral part of the culture of this facility. The auditor finds the facility compliant with the standard provisions.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview with Sheriff · Interview Warden · Training curriculum · PAQ <p>The PAQ indicates that zero allegations were received that an inmate was abused while confined at another facility, zero allegations of sexual abuse were received from another facility.</p> <p>The following policy excerpts supports compliance with the requirements of this</p>

	<p>standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. (b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. (c) The agency shall document that it has provided such notification. (d) The Warden or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a), (b) (c) (d) Policy addresses the requirements. The training curriculum informs staff of this requirement. The interview with the Warden and Sheriff assured the auditor that if they receive any information about sexual abuse that occurred at another facility, a system is in place for the Warden to report directly to the facility head, within 72 hours, details provided about the alleged incident. The interviews with the Warden and Sheriff provided additional assurances that all allegations received from another facility about sexual abuse that occurred at this facility will be immediately referred to the CID for investigation. The Warden assured the auditor he will remain informed of any investigation being conducted at his facility. The PAQ indicates there have been no occurrences of this happening; the auditor found this credible based on overall observations during the audit.</p> <p>Summary of evidence to support findings: Policy, interviews training curriculum and the PAQ provided the auditor with sufficient evidence to support a finding of compliance. A Notification Form was provided to the facility for use if they receive an allegation that occurred at another facility in the future. It ensures the provisions of the standard are addressed. The auditor finds the facility compliant with the standard provisions.</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Sexual Assault Response and Containment Checklist · Training curriculum

- Random staff interviews
- Observations
- PAQ

The PAQ indicates there were zero allegations of sexual abuse that allowed for time to collect evidence. The auditor found no reason to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (b) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a)(b) The training curriculum reinforces the requirements of the first responder duties. The Sexual Assault and Containment Checklist addresses duties of staff first responders. However, the auditor is requiring the form to be updated to include specifically the following: (3) If the abuse occurred within a time period that still allows for the collection of physical evidence (96 hours), request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Additionally, once updated, ensure a copy is easily accessible in the control room and officer post orders. An updated form was received that addressed the additional information as required. The auditor was informed that this checklist is available in the control room for use if ever needed.

Summary of evidence to support findings: Policy, the updated containment checklist,

	<p>random staff interviews, observations of where they can separate an inmate victim and perpetrator and the training curriculum provided the auditor with sufficient evidence to support a finding of compliance with this standard.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Sexual Abuse Response and Containment Checklist · Random staff interviews · Interview with Shift supervisors · Interview Warden <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>the facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</i></p> <p>Summary of evidence to support findings: Policy supports the requirements of the standard. The Sexual Assault and Containment Checklist addresses safety and separation, escorting to medical area immediately, shift supervisor will assess and notify investigators, secure the scene, medical staff will ensure access to a SANE exam if warranted. The interview with shift supervisors and the Warden confirmed the availability of this response plan. The auditor finds the facility compliant with the standard provisions.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p>

	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Interview Sheriff · Interview with the Warden · Observations · PAQ <p>The PAQ indicates that the facility has not entered into a collective bargaining on the agency's behalf.</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) 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. (b) 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 §§ 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.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) There is no union. This conclusion was supported by informal interviews during the onsite audit. The interview with the Warden confirmed that he has no restrictions from removing a potential abuser from assignment pending an investigation.</p> <p>Summary of evidence to support findings: The interview with the Warden, the PAQ and observations provided the auditor with sufficient evidence to support that the facility is not restricted from removing 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. The auditor finds the facility compliant with the standard provisions.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Prison Rape Elimination Act of 2003 SOP 20-14-01
- Interviews Sheriff
- Interview Warden
- Interview with designated staff members who would be conducting monitoring for retaliation
- Retaliation Monitoring Form
- Observations
- PAQ

The PAQ indicates that there were no reported incidents of retaliation occurred. The auditor found no reason to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) 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. (b) The agency shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. (c) For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. (d) In the case of inmates, such monitoring shall also include periodic status checks. (e) 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. (f) An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

	<p>(a)(b)(c)(d)(e)(f) Policy addresses all requirements of the provisions of this standard. The possibility of the necessity was discussed with the Warden, Chief of Security and PCM who acknowledged that if they were tasked with this monitoring (as it may be conducted by the CID investigators, depending on the circumstances) that the provisions would be addressed. The auditor provided a format for use to ensure that the process as required is met and documented. The Sheriff confirmed that retaliation will not be tolerated.</p> <p>Summary of evidence to support findings: As indicated above, the auditor finds the facility compliant with the standard provisions. See comments to 115.43.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interviews Sheriff · Interview with the Warden · Interview with the PCM · PAQ <p>The PAQ indicates there has been no incident where inmates who suffered sexual abuse were held in involuntary segregated housing in the past twelve months. The auditor found no reason to dispute this during the audit process.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Summary of evidence to support findings: Policy supports the requirements of the standard. The PAQ indicates that inmates who require placement in segregated housing units are not housed at this facility. There is no restrictive housing (segregation) at this facility. The auditor found this credible based on all observations during all the audit activities. The auditor finds the facility compliant with the standard provisions.</p>

115.71	Criminal and administrative agency investigations
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 1406 418">The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul data-bbox="256 454 1054 846" style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview with the Warden · Interview with the PREA Coordinator/PCM · Interviews with staff · Observations · PAQ <p data-bbox="256 884 1430 1003">PAQ indicates no substantiated allegations of conduct that appeared criminal were referred for prosecution since the last PREA audit. The auditor found no reason to dispute this during the audit process.</p> <p data-bbox="256 1039 1390 1117">The following policy excerpts supports compliance with the requirements of this standard:</p> <p data-bbox="256 1153 1474 2067"><i>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, (a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. (b) Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34. (c) Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. (d) When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. (e) The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. (f) Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. (g) Criminal investigations shall be documented in a written report</i></p>

that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. (h) Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. (i) The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. (j) The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation. (k) Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements. (l) When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Policy mirrors the requirements of the PREA standards and provisions.

Summary of evidence to support findings: The agency with whom this facility contracts to house their inmates (MDOC) conducts investigations into sexual abuse and sexual harassment. The facility reports that they have not received any allegations of sexual abuse or sexual harassment by the inmate population on which the auditor could assess this. After conducting random interviews and overall observations during the onsite portion of the audit, the auditor found this credible. Therefore, this standard is not applicable - compliant.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Observations · Interviews Investigative staff · Review of investigations using preponderance of evidence (administrative) <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p>

	<p>Summary of evidence to support findings: As indicated, the facility staff do not conduct the investigations; they are conducted by the agency, MDOC. Therefore, the auditor finds the standard not applicable – compliant.</p>
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115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview Warden · PAQ <p>The PAQ indicates the following:</p> <p>zero investigations of alleged sexual abuse completed</p> <p>zero investigations of alleged sexual abuse completed where inmate was notified of the results (verbally or in writing)</p> <p>zero sexual abuse investigations completed by an outside agency</p> <p>zero notifications of the results of an investigation completed by an outside agency</p> <p>zero substantiated cases of staff sexual abuse</p> <p>zero notifications made pursuant to those</p> <p>zero notifications provide to inmates</p> <p>zero those that are documented</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p><i>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, (a) 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. (b) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate. (c) 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</i></p>

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. (e) All such notifications or attempted notifications shall be documented. (f) An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

Policy mirrors the requirements of the PREA standards and provisions.

Summary of evidence to support findings:

(a) (b)(c)(d) (e) (f) Policy addresses the elements of the standard provisions. It was reported to the auditor that the CID conducts the investigation and would be responsible for providing the notification. There have been no sexual abuse or sexual harassment allegations reported; therefore, the auditor could not evaluate evidence of this. The interview with the Warden supported this to be true. The auditor finds the standard not applicable – compliant.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interviews Warden · Interviews with staff · PAQ <p>The PAQ notes that no staff has been disciplined for violation of agency sexual abuse or sexual harassment policies. No staff have been reported to law enforcement or licensing bodies following termination or resignation for violating agency sexual abuse or sexual harassment policies. The auditor found no evidence to dispute this statement during the audit process.</p>

	<p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. (b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. (c) 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. (d) 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.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>(a) (b) (c)(d) Based on review of policy, interview with the Warden, formal and informal conversations with staff, the auditor found it credible that there have been no staff disciplined for violation of the agency sexual abuse and sexual harassment policies.</p> <p>Summary of evidence to support findings: As indicted, the auditor finds the facility compliant with the standard provisions.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interviews Warden · PAQ <p>The PAQ notes that no contractor or volunteer has been involved in an investigation regarding sexual abuse or sexual harassment towards an incarcerated individual; no contractors or volunteers who have been reported to law enforcement and/or relevant licensing bodies. The auditor found no evidence to dispute this statement during the audit process.</p> <p>The following policy excerpts supports compliance with the requirements of this</p>

	<p>standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. (b) The facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) This facility does not use volunteers. There is one contractual staff person employed at this facility. As indicated in 115.32, the contractual staff attends regular PREA training provided to staff. Policy, and the Warden confirmed that he can prohibit entry into the facility by the contractor if allegations of violation of the sexual abuse or sexual harassment are received. Return to the facility would be evaluated at the conclusion of the investigation.</p> <p>Summary of evidence: Policy interview with the Warden provided the auditor with evidence to support a finding of compliance.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview Warden · Interview with disciplinary officer · Interview with the nurse · Facility Rulebook · PAQ <p>The PAQ indicates there have been no administrative findings or criminal findings of inmate-on-inmate sexual abuse. The auditor found no reason to dispute this during the audit process.</p>

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. (b) 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. (c) 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. (d) 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. (e) 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. (f) 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. (g) 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.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a) (b) Policy and the Inmate Handbook provide information about the disciplinary process.

(c) Policy and the interview with the Warden, disciplinary staff and the nurse confirmed that mental disability would be considered and was also supported that this would result in a transfer back to the MDOC for evaluation as the mental disability would preclude the inmate from being housed at this facility in addition to the sexual abuse behavior.

(d) The facility does not offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. Sexual abuse conduct would result in a transfer back to the MDOC.

(e) Policy and the interview with the Warden confirmed that an inmate will not be disciplined for sexual contact that was consensual by staff.

(f) This is supported in policy.

(g) Not applicable, the facility prohibits all sexual activity between inmates. There is a separate rule violation for consensual sexual conduct.

	Summary of evidence to support findings: Review of policy, interviews and review of the inmate handbook provided the auditor with sufficient evidence to support a finding of compliance.
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview staff responsible for risk screening (nurse/case manager) · Review of intake risk assessments · Review of agreement with River Ridge for mental health services. · PAQ <p>The PAQ indicates that 100% of inmates who disclosed prior victimization during screening who were offered a follow up meeting with medical/mental health practitioner, 100% of inmates who have previously perpetrated sexual abuse as indicated during the screening were offered a follow up meeting with a mental health practitioner. They indicated there has been no inmate who disclosed sexual victimization or upon screening indicated previously perpetrated sexual abuse.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. (b) If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, 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 § 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</i></p>

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.

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a)(b) The interview with the nurse confirmed that she would be aware of whether an inmate reported prior sexual abuse or was deemed a potential perpetrator. She arranges referrals for mental health for occurrences that would not warrant a return to the MDOC. They have an agreement with River Ridge Behavior Health for such referrals. A copy of the referral was provided to the auditor.

(c) This is not applicable to this facility as it is considered a prison.

(d) The interview with the nurse confirmed that 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, As they have not received any inmates who have disclosed information relating to sexual victimization or abusiveness that occurred in an institutional setting.

(e) The interview with the nurse confirmed that she would obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.

Summary of evidence to support findings: Policy, interview with the nurse and case manager, review of the contract for mental health services and review of risk assessments provided evidence for the auditor to support a finding of compliance.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Sexual Abuse Response and Containment Plan

	<ul style="list-style-type: none"> · Interview with the Warden · Interview with medical staff <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p><i>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, (a) 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. (b) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. (c) 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. (d) 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.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b)(c)(d) Policy, review of the response plan, interview with the Warden and the nurse all assured the auditor that immediate emergency medical treatment and crisis intervention services would be implemented for victims of sexual abuse. There have been no occurrences for the auditor to assess this. The nurse is on call and will be contacted, arrangements for transport will be made. This treatment is free, prophylactic medication would be provided at the hospital. As inmates at this facility cannot be on medications, this would then warrant a return transfer to MDOC who would have to provide follow up services.</p> <p>Summary of evidence to support findings: Policy, interviews and overall observations of how the facility operates, all provided the auditor with sufficient to support a finding of compliance.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence

related to this standard:

- Prison Rape Elimination Act of 2003 SOP 20-14-01
- Interview with medical staff
- Observations made during the tour

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) 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. (b) 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. (c) The facility shall provide such victims with medical and mental health services consistent with the community level of care. (d) Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. (e) 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. (f) Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. (g) 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. (h) 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.*

Policy mirrors the requirements of the PREA standards and provisions.

Evidence reviewed/analyzed by provision:

(a) (b) (c)(d) Policy supports the requirements that ongoing medical and mental care would be provided however, as indicated throughout the report, they would not likely remain at this facility as they are not equipped to handle those needs. Therefore, the inmate would be transferred back to the MDOC for this.

(e)(f) This is not applicable to this facility as they do not house female inmates.

(g) Policy supports there will be no cost for treatment even if the victim does not name the abuser.

(h) Inmates who commit sexual abuse would not remain at this facility as confirmed by the interview with the Warden and observations of facility operations

Summary of evidence to support findings: Analysis of the operation, dialogue with the staff and policy led the auditor to conclude that the provisions will be addressed, not at this facility. The auditor finds the facility compliant with the standard provisions.

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Prison Rape Elimination Act of 2003 SOP 20-14-01
- Interview with members of the Sexual Abuse Incident Review Team
- Interview with the Warden
- Sexual Abuse Incident Review form
- Interview with the PREA Coordinator/PCM
- PAQ

The PAQ indicates that there were no criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act of 2003 SOP 20-14-01 states, *(a) The standard requires that 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 made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the Warden and PREA compliance manager. (e) The facility shall implement recommendations for improvement or shall document its reasons for not doing so.*

Policy mirrors the requirements of the PREA standards and provisions.

	<p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) (c) (d)(e) Policy supports all aspects of the standard provisions. A Sexual Abuse Incident Review form was provided to the facility to additionally ensure all provision requirements are addressed and documented, if ever needed. The auditor discussed the process with the Warden, Chief of Security, PREA Coordinator/PCM, nurse, case manager, all of whom would participate on the review team.</p> <p>Summary of evidence to support findings: Policy, PAQ, interviews and the sexual abuse incident form provided, gave the auditor with sufficient evidence to support a finding of compliance.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview PREA Coordinator/PCM · Annual Report - agency · Observations <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) 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; (b) The agency shall aggregate the incident-based sexual abuse data at least annually; (c) 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; (d) The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews;(e) The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates; and (f) Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p>

	<p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) (c) (d) Definitions used for collecting data are addressed in the PREA policy. The interview with the PREA Coordinator/PCM confirmed that she gathers and submits data as requested. The agency maintains this data as it is included in the Annual Report. (e) The PREA Annual Report, 2021 was completed by the Mississippi Department of Corrections demonstrated that data from facilities in which they have contractual relation are included in the report. (f)The facility has not received a request for an SSV. It was reported it will be addressed by the agency, MDOC.</p> <p>Summary of evidence to support findings: Policy supports the requirements of the standard. The agency completes the Annual Report. Interviews with the PREA Coordinator/PCM support that data is collected and reported to the agency. Therefore, this standard is not applicable - compliant.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interview PREA Coordinator/PCM · Link to website PREA Audit Reports Mississippi Department of Corrections (ms.gov) · Annual Report on the Prison Rape Elimination Act <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, <i>(a) 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: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. (b) Such report shall include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of the agency’s progress in addressing sexual abuse. (c) 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. (d) The agency may redact specific material from the reports when publication would present a clear and specific threat to the</i></p>

	<p><i>safety and security of a facility but must indicate the nature of the material redacted.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Summary of evidence to support findings:(a) (b)(c)(d) The agency is responsible for the completion of the Annual Report. No redactions were required on the Corrective Action Plan. This standard is not applicable to this facility. The auditor finds the facility compliant with the standard provisions.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act of 2003 SOP 20-14-01 · Interviews PREA Coordinator/PCM · Documentation that it is on the website <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p><i>Prison Rape Elimination Act of 2003 SOP 20-14-01 states, (a) The agency shall ensure that data collected pursuant to § 115.87 are securely retained. (b) The agency shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means. (c) Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers. (d) The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</i></p> <p>Policy mirrors the requirements of the PREA standards and provisions.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a)(b)(c)(d) Policy supports the requirements of the standard. The auditor assessed where data is stored and determined that it is securely retained (computerized and/or hard copy maintained in the inmates' files in the case manager's office. Access to this office is controlled (Warden and case manager). Interviews and review of the agency's annual report provide evidence that the data is aggregated and noted specifically by facility. No information required redaction. It is reported that this data is maintained at least ten years in accordance with policy.</p>

	Summary of evidence to support findings: Policy, interview with the PCM and observations of the website provide sufficient evidence that the facility is compliant with the standard provisions.
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115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor was able to access all areas of the facility. Posters announcing the audit were observed stating the following:</p> <p>The Yazoo County Sheriff’s Office will be undergoing an audit for compliance with the United States Department of Justice’s National Standards to Prevent, Detect, and Respond to Prison Rape under the Prison Rape Elimination Act (PREA) for the Jail on November 28-29, 2023.</p> <p>Any person with information relevant to this compliance audit may confidentially* correspond with the auditor via the following address:</p> <p>Amy Fairbanks 3105 S. Martin Luther King, Jr. Blvd. #236 Lansing, MI 48910</p> <p>*CONFIDENTIALITY – All correspondence and disclosures during interviews with the designated auditor are confidential and will not be disclosed unless required by law. There are exceptions when confidentiality must be legally broken. Exceptions include, but are not limited to the following:</p> <ul style="list-style-type: none"> · if the person is an immediate danger to her/himself or others (e.g. suicide or homicide); · allegations of suspected of child abuse, neglect or maltreatment; · in legal proceedings where information has been subpoenaed by a court of appropriate jurisdiction. <p>See comments supporting compliance throughout the report.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	The previous PREA Audit report from 2020 is located on the agency website at PREA Audit Reports Mississippi Department of Corrections (ms.gov).

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

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

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

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

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

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

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

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

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

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	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.)	na
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.)	na
	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.)	na
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.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	no
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

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

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

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

	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).)	na
	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).)	na
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).)	na
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

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

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

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

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

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

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

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

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

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

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

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

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

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

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

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

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	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

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

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

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

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

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

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

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

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

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

(f)		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes