

PREA Facility Audit Report: Final

Name of Facility: Stone County Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/15/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☒
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☒
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☒
Auditor Full Name as Signed: Michele Dauzat	Date of Signature: 11/15/2025

AUDITOR INFORMATION	
Auditor name:	Dauzat, Michele
Email:	michele.dauzat@la.gov
Start Date of On-Site Audit:	09/07/2025
End Date of On-Site Audit:	09/08/2025

FACILITY INFORMATION	
Facility name:	Stone County Correctional Facility
Facility physical address:	1420 Industrial Park Road, Wiggins, Mississippi - 39577
Facility mailing address:	

Primary Contact

Name:	Jarita Bivens
Email Address:	prea@stonecountymys.gov
Telephone Number:	601-928-7042

Warden/Jail Administrator/Sheriff/Director	
Name:	E.S. COMPSTON JR.
Email Address:	escompston@stonecountymys.gov
Telephone Number:	601-928-7042

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

Facility Health Service Administrator On-site	
Name:	Trisch Stafford
Email Address:	tstafford@stonecountymys.gov
Telephone Number:	601-928-7042

Facility Characteristics	
Designed facility capacity:	551
Current population of facility:	417
Average daily population for the past 12 months:	419
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population	Both women/girls and men/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	36
Facility security levels/inmate custody levels:	medium/mnc
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	55
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	5
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	133

AGENCY INFORMATION	
Name of agency:	Stone County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	1420 Industrial Park Rd, Wiggins, Mississippi - 39577
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information		
Name:	Jarita Bivens	Email Address:
		prea@stonecountymtms.gov

Facility AUDIT FINDINGS
Summary of Audit Findings
The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met. Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	
5	• 115.17 - Hiring and promotion decisions • 115.31 - Employee training • 115.34 - Specialized training: Investigations • 115.41 - Screening for risk of victimization and abusiveness • 115.42 - Use of screening information
Number of standards met:	
40	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION	
Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.	
GENERAL AUDIT INFORMATION	
On-site Audit Dates	
1. Start date of the onsite portion of the audit:	2025-09-07
2. End date of the onsite portion of the audit:	2025-09-08
Outreach	
10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	I spoke with Melanie Barton from MSCASA. MSCASA is the advocate organization that services Stone County, along with other regional and state correctional facilities. This partnership has been ongoing via an MOU for several years. Ms. Barton verified services and spoke positively of the coordination of services and work relationship with MDOC and Regional Facilities.
AUDITED FACILITY INFORMATION	
14. Designated facility capacity:	551
15. Average daily population for the past 12 months:	419
16. Number of inmate/resident/detainee housing units:	11

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☐ No ☒ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	428
25. 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
26. 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:	1
27. 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:	2
28. 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

29. 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:	3
30. 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:	2
31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
33. 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:	0
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. 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):	As with other Mississippi Regional facilities, SCRF is a small facility with incarcerated individuals who have been thoroughly screened for placement. Several of the categories for targeted/specialized inmate interviews were not possible due to the nature of the population held at the facility.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. 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:	55
37. 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:	133
38. 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:	5
39. 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:	Staff were helpful, easy to talk to, eager to show all areas of the facility, and clearly committed to keeping operations running well.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	20

41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☒ Age ☐ Race ☒ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☒ Housing assignment ☐ Gender ☐ Other ☐ None
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were randomly selected from each housing area. Auditor ensured a fair and consistent sample represented various ethnicities, ages, etc.
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
44. 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):	There were no issues with selecting or interviewing random inmates. The process went smoothly, and participants were cooperative and readily available, allowing interviews to be completed without any delays or concerns. Inmates were very knowledgeable about the avenues available to report an allegation.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	8

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".

47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	3
48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
49. 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:	2
50. 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:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility was more than accommodating when reviewing cases to be interviewed as a specialized category. Due to the nature of the population housed at Regional Facilities, there were very few inmates who were characterized as "specialized" interview candidates. The facility and I went through each roster and each specialized category to determine the number of inmates that could be interviewed. After the review, the facility identified three limited English inmates, one cognitive impaired inmate, and two inmates with low vision. The auditor was given access to all of the inmates, and each one completed an interview without any issues.
51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	3
52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility is small, and no residents identified as transgender or intersex. This information was verified through the Case Manager and Facility Director.
54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility received a total of 5 allegations from 4 inmates over the last 12 months. Of these 5 allegations, only one involved sexual abuse, and the inmate associated with that allegation was transferred prior to the start of the audit.
55. 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:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility had five allegations within the reporting period. Four allegations were harassment allegations, and one was specific to abuse. The inmates involved were no longer housed in the County portion of the facility. The individual investigations were reviewed, and the investigator was very knowledgeable regarding the investigatory process and how to arrive at a conclusion using the preponderance of evidence.
56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; discussions with staff and other inmates/residents/detainees).	The facility was more than accommodating when reviewing cases to be interviewed as a specialized category. Due to the nature of the population housed at Regional Facilities, there were very few inmates who were characterized as "specialized" interview candidates. The facility and I went through each roster and each specialized category to determine the number of inmates that could be interviewed. After the review, the facility identified three limited English inmates, one cognitive impaired inmate, and two inmates with low vision. The auditor was given access to all of the inmates, and each one completed an interview without any issues.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The facility was more than accommodating when reviewing cases to be interviewed as a specialized category. Due to the nature of the population housed at Regional Facilities, there were very few inmates who were characterized as "specialized" interview candidates. The facility and I went through each roster and each specialized category to determine the number of inmates that could be interviewed. After the review, the facility identified three limited English inmates, one cognitive impaired inmate, and two inmates with low vision. The auditor was given access to all of the inmates, and each one completed an interview without any issues.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☒ Length of tenure in the facility ☒ Shift assignment ☐ Work assignment ☒ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	All staff interviewed were very receptive to the discussion. Each staff member was easily able to articulate the training she/he had received and the first responder actions required in the event of an incident. It was evident that all staff prioritize inmate safety and take pride in their employment at SCRCF.
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.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	12
63. Were you able to interview the Agency Head?	☒ Yes ☐ No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No

65. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
66. Were you able to interview the PREA Compliance Manager?	☐ Yes ☐ No ☒ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	☐ Other
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☒ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☐ Yes ☒ No
70. Provide any additional comments regarding selecting or interviewing specialized staff.	Selecting and interviewing specialized staff was smooth and straightforward. Staff were well-prepared, knowledgeable in their areas of responsibility, and provided clear, helpful information throughout the 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.

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

☒ Yes
☐ No

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

72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes
☐ No

73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes
☐ No

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

☒ Yes
☐ No

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

☒ Yes
☐ No

76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	The facility staff was extremely accommodating, willing to provide unimpeded access to all areas of the grounds. It is evident that SCRF staff take pride in their work and facility. Staff were polite, professional, and willing to accommodate any requests by Auditor.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☒ Yes ☐ No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Any documentation requested by the auditor was easily accessible and provided without question. All staff made every effort possible to comply with any request from auditor and were readily available to assist.
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.	

79. 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	1	0	1	0
Total	1	0	1	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	1	0	1	0
Staff-on-inmate sexual harassment	3	0	2	0
Total	4	0	3	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.

81. 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

82. 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	1	0
Total	0	0	1	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.

83. 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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

1

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	4
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The files were reviewed and noted to be in compliance with the standard. The inmates were no longer housed in the County facility.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
102. 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	
103. 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
a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:	1
AUDITING ARRANGEMENTS AND COMPENSATION	
108. Who paid you to conduct this audit?	☒ The audited facility or its parent agency ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ☐ A third-party auditing entity (e.g., accreditation body, consulting firm) ☐ Other

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. SCRCF Agency Mission on https://www.mdoc.ms.gov/facilities/stone-county-correctional-facility
	B. SCRCF Organizational Structure Chart
	C. SCRCF Inmate Orientation Handbook
	D. Coordinated Response Plan
	E. Inmate Orientation Handbook Spanish
	F. Zero Tolerance Poster for PREA
	G. AJA and PREA audit reports
	H. Daily population report for the last day of the month x 6 months

	I. Staff Training Rosters J. PREA Policy 20-14-01 Interviews A. PREA Coordinator B. Agency Head C. PREA Compliance Manager D. Random Staff Interviews E. Facility Policy and Procedure Sexual Abuse Site Review Findings (By Provision) a) The agency does have a written policy mandating zero tolerance toward all forms of sexual abuse and harassment. Stone County Regional Correctional Facility Sexual Assault Policy, 20-14-01 (PREA), is implemented and also serves as the response plan for sexual abuse and harassment incidents. Policy clearly defines prohibited behaviors regarding sexual abuse and harassment, includes sanctions for those found to have participated in these behaviors, and adequately describes agency strategies to reduce and prevent the sexual abuse and harassment of inmates. b) SCRCF employs a designated facility-wide PREA Coordinator who, according to interviews and documentation review, has adequate time and authority to develop, implement, and oversee all efforts to comply with PREA standards. The PREA Coordinator position is in the upper-level agency hierarchy as reflected in the Organization Chart. There is one PREA Compliance Manager for the facility, in addition to a PREA Compliance team that assists the Compliance Manager. Observations during the site review revealed a culture of zero tolerance for sexual abuse and sexual harassment throughout the facility, with posters hanging in several facility common areas. Additionally, interviews with persons incarcerated and staff verified that there is a strict zero-tolerance policy within the agency. The auditor reviewed policies and other agency/facility documents to determine compliance. Information from facility documents and interviews conducted allows the auditor to conclude that the program meets this PREA standard.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document

	A. PREA Policy B. Inmate Housing Agreement Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator Site Review Findings (by Provision) a) The facility has entered into a contract for the confinement of State SCRCF adult Inmates. b) The facility policy clearly states that all contracts maintained by the facility are required to meet PREA guidelines. The facility currently has one contract for State inmate Housing with the Mississippi Department of Corrections (MDOC), and it is compliant with the standard. c) The SCRCF currently does not have any contracts in place that do not require full compliance with PREA standards. The auditor reviewed policies and other agency/facility documents to determine compliance. Information from facility documents and interviews conducted allows the auditor to conclude that the program complies with this PREA standard.
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. Facility PREA Policy
	B. Organizational Chart
	C. Staffing Budget
	D. Facility Camera layout
	E. Central Control Document
	F. Inmate Roster
	G. Staff Selection

H. Staffing Roster

I. Memo From Agency Head

Interviews

A. PREA Coordinator

B. Agency Head

C. Facility Administrator

D. Intermediate or Higher-Level Staff

E. Random Staff

Site Review Findings (By Provision)

a) The facility has a staffing plan as indicated by PREA facility Inmate Supervision and Staff assignment policies based on the number of Inmates housed at SCRCF. The population on the day of the onsite audit was 417 onsite inmates. The population was made up of 399 males and 18 females. The policy directive ensures the facility will develop, document, and make its best effort to follow a staffing plan that provides for an adequate level of staffing and, when applicable, video monitoring, to protect Inmates against sexual abuse. Deviations to the staffing plan are mitigated by approved overtime and reallocation and documented in the facility budget and staffing records.

b) The staffing plan also includes but is not limited to: number and placement of supervisory staff, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, generally accepted detention and correctional practices, any judicial findings of inadequacy, any finding of inadequacy from Federal Investigative agencies, all components of the facility's physical plant, the composition of the Inmate population, facility programming, any applicable state or local laws, regulations, or standards, any findings of inadequacy from internal or external oversight bodies, and any other relevant factors. In the event the staffing plan is not complied with, the facility will document the deviation.

c) The staffing plan is reviewed annually by the PREA Coordinator. Auditor reviewed the staffing plan and review for the past three years. The facility administration reports that the common reasons for deviation include staff retention, FMLA, Military leave, and unexpected security or hospital transports. The facility supervisors make unannounced rounds in all areas in an effort to deter sexual assault. The rounds are documented utilizing a logbook. The facility has a policy in place mandating the frequency of the rounds, and the log information is readily available for verification. This documentation was reviewed during the on-site review, and interviews with staff indicated rounds were unannounced and documented in a logbook accessible for viewing. The Sexual Abuse policy in place enforces the unannounced protocol per the direct supervision model.

	policies, and other agency/facility documents to determine compliance. Information from facility documents and staff interviews allows the auditor to conclude the program is in compliance with this PREA Standard.
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA policy B. Memo to Auditor Interviews A. PREA Coordinator Site Review Findings (By Provision) The Stone County Regional Correctional Facility does not house juveniles under the age of 18 for any reason. This standard is non applicable.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. Camera Layout C. Inmate Orientation Handbook D. Staff training rosters E. Search Training Curriculum Interviews A. PREA Coordinator B. Agency Head

C. Facility Administrator

D. Random Inmate

E. Random Staff

Site Review Findings (By Provision)

a) Policy covers the procedures for searches and is compliant with the mandates of this standard, as exhibited in the PREA Sexual Assault Policy. The policy also includes procedural instructions for strip searches for both the male and female populations. In the event a body cavity search is required, it will be authorized by the Sheriff with an obtained search warrant from the Judge and conducted by medical staff in a private setting. The facility does not conduct cross-gender pat searches of female inmates by staff; however, SCRCF does offer transgender and intersex inmates the option of selecting which gender staff they prefer to search them.

Policy provides that they do not perform cross gender pat searches on female inmates. While on-site, the auditor reviewed 50 percent of the staff training files to verify that search training was completed. All training records reflected that the training had been successfully completed and included certificates. Random staff interviewed verified content from training and had a clear understanding of the policy and procedure.

b) The policy in place also states that no one will be searched to determine their genital status. The facility does have a policy in place regarding the requirement to document any cross-gender searches of female inmates based on an exigent circumstance. According to policy, staff and inmate interviews, the facility does not restrict access to programming in order to comply with this provision. In the unlikely event this would occur, the information would be documented on a facility Incident Report. Female inmates interviewed reported that there has been no incident of a cross gender or pat-down search or being denied programming due to a lack of female staff available to perform pat searches.

c) There is no cross-gender viewing of Inmates in toilet or shower areas, and there is no cross-gender access to dormitories without announcements and waiting a minimum of 5 seconds for inmates to cover themselves. The majority of the inmates interviewed also reported that there is no time that an inmate is naked in full view of an opposite gender staff member. Currently, the facility has zero transgender inmates; the floor plan allows for privacy to toilet/change clothes separately if the need arises. Informal conversations with staff during the tour verified the privacy of the inmates when showering and undressing. Camera views were observed during the tour, and there is no capability to view individual areas where Inmates shower or change clothes in the designated housing units. Female inmates verified that at no time are females prohibited from activity, programming, or work due to not having female staff to search.

	d) Shower and living areas were observed during the on-site audit, and verified the ability for complete privacy to toilet and undress. All bathrooms have barrier walls and showers with shower curtains. All Inmate living quarters have privacy with the ability to dress privately. e) There have been no documented cross gender strip searches in the past 12 months. This information was verified through staff and inmate interviews. f) All current staff have received the mandatory training on conducting searches. This was verified by auditor through a review of 25 percent of employee training files. A record of all employee training files and search training was clearly documented in each file. All staff were extremely knowledgeable regarding training content. As described above, the auditor reviewed the most recent facility staffing plan, policies, and other agency/facility documents to determine compliance. Information from facility documents and staff interviews allows the auditor to conclude the program is in compliance with this PREA Standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. Inmate Orientation Handbook C. Inmate Orientation Handbook Spanish D. Poster E. Victim Poster Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Case Manager

	E. Random Staff F. Random Inmate Site Review Findings The facility has a policy in place that ensures disabled Inmates have 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. a) The facility provides offender education in formats accessible to all Inmates, including those who are limited English proficient, deaf, visually impaired, intellectually and/or physically disabled, as well as to Inmates who have limited reading skills. The facility utilizes one staff member who is fluent bilingual or the Mississippi Coalition Against Sexual Assault (MSCASA) for any foreign language interpreter needs. b) The facility policy prohibits the use of Inmate interpreters. In the past 12 months, SCRCF has not used an Inmate interpreter to gather information for a PREA allegation. During the interviews with a random sample of staff, no staff member could recall the facility ever using an Inmate for translation purposes as it relates to PREA. Although it is rare for SCRCF to receive disabled Inmates, it is evident that the facility is very accommodating to all special needs of the population. The auditor reviewed the most recent facility staffing plan, policies, and other agency/facility documents to determine compliance. Information from facility documents and staff interviews allows the auditor to conclude the program is in compliance with this PREA Standard.
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115.17	Hiring and promotion decisions Auditor Overall Determination: Exceeds Standard Auditor Discussion Documents A. PREA Policy B. Agency Organizational Chart C. Employee Handbook D. Employee Background Checks NCIC E. New Employee Background Check
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F. Letter of approval to hire from BOP

G. Reviewed 25 percent Employee HR files

Interviews

A. PREA Coordinator

B. Agency Head

C. Facility Administrator

D. Random Staff

E. Human Resource Representative

Site Review Findings (By Provisions)

a) Policy requires that SCRCF shall not hire or promote anyone into a position who may have contact with Inmates who have engaged in sexual abuse of offenders in an institutional setting, has been convicted of engaging in sexual activity in the community facilitated by force, the threat of force, or coercion, or has been civilly or administratively adjudicated to have engaged in such activity. The SCRCF mandates that all new staff and contractors complete a pre-employment polygraph questionnaire as part of the hiring process.

b) According to policy, the facility does consider prior incidents of sexual harassment/sexual abuse when determining whether to promote or hire staff. The HR Director confirmed this practice during the interview, in addition to the Auditor reviewing 25 percent of employee files to verify. The background check was present for all employee files reviewed. Ten (25%) employee examples of the PREA misconduct form signed by the employee have been uploaded to the OAS. The employee files that were reviewed were staff from all areas, direct care staff, supervisors, front-line, etc.

c) The facility is in compliance with the requirement of the standard of conducting background checks on all employees every five years. The facility uses the NCIC database to run checks on all potential and current employees. During the on-site audit review, 25 percent of employee files were reviewed, and all contained a background check in accordance with the standard. In 2022, the facility ran an NCIC on all employees, which was verified through interviews in addition to a documentation review of Employee personnel files.

d/e) According to policy, the facility requires a complete background check before enlisting the services of any contractor who may have contact with inmates. Staff reports that there have been one contract established for the facility during this audit period. All outside services are provided by the Bureau of Prisons and are subject to training provided by the BOP, not the facility. Contract and Vendor are provided with orientation upon arrival to the facility for the first visit.

	shall be grounds for termination. The auditor reviewed the most recent facility staffing plan, policies, and other agency/facility documents to determine compliance. During the record review and interview with the HR manager, it was determined that the facility completes background checks every three years. This practice exceeds not only what the policy requires but also what is required by the PREA standard. Upon assessment, the facility exceeds standard 115.17.
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. Camera Layout Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Random Staff Site Review Findings (By Provisions) a) According to the Agency Head, there have been no modifications or substantial expansions since the last PREA audit in 2022. All cameras were operable, and visibility was excellent. The facility recently upgraded the camera system. The cameras are adjustable to light conditions; ability to be viewed and continue recording during very low light conditions. b) There have been new cameras installed since the previous audit. The Control Center Officer has access and is assigned to monitor the 116 cameras. Staff as well as inmates confirmed during interviews that they felt safe and secure with the camera system. During the site review, it was obvious that almost every area of the facility can be viewed while still enabling the privacy of the inmates while dressing, showering, and toileting.
	Based upon the review and analysis of all the available evidence, the auditor has

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. DOJ Uniform Evidence Protocol for Sexual Assault C. SAFE/SANE agreement D. Consent for Victim Advocate Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Investigative Staff E. Random Staff Site Review Findings (By Provisions) a) The Agency has 1 staff Investigator employed who is responsible for conducting administrative sexual abuse/harassment investigations. However, the facility notifies local law enforcement of any sexual abuse PREA allegations for immediate response. The Stone County CID responds immediately and assumes responsibility for the criminal investigation. The Stone County CID acknowledges and adheres to PREA standards relative to investigations as stated by the Agency Head. During interviews with staff, it was obvious that staff are aware of the procedures on how to contact the appropriate agency and medical staff to respond to the facility in the event of an allegation. The safety of the Inmate is a priority, and preservation of the evidence was required immediately. The facility uses the Mississippi Coalition Against Sexual Assault (MSCASA) for the Victim Advocacy services. This service is set up through a hotline operated by the MSCASA agency. b) SCRCF does not house youthful Inmates, and the Agency utilizes the BOP Office on Violence Against Women's national forensic examination guidelines for adults and adolescents as its selected protocol. c) All immediate medical and mental health needs of inmates are met by staff on-site. There is no cost for medical care to any of the Inmates at SCRCF. All medical expenses are covered by the facility. In the event of an emergency and/or hospital admission, the facility uses Stone County Memorial Hospital for emergent needs.

Stone County Memorial Hospital has SAFE/SANE staff on call and readily available to

	respond as necessary. This information was verified by the Auditor, reaching out to the Social Service Department of the hospital to verify available resources. There have been zero forensic exams conducted in the past 12 months. d) According to the Agency Head and facility staff, the Mississippi Coalition Against Sexual Assault (MSCASA) agency is the community resource organization that provides victim advocacy services in the event of a sexual assault. The contact number was visible throughout the facility. e) The agency maintains an MOU with MSCASA, and their services are accessible through a phone hotline. All contact information and educational material regarding the MSCASA agency are published and consistently posted in all housing and common areas throughout the facility. f) SCRCF maintains a partnership with the Stone County Sheriff's Office Criminal Investigation Division (CID) to adhere to PREA standards when investigating any sexual abuse/assault case reported from SCRCF. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. Agency Website C. PREA Investigative Referral email D. Coordinated Response Plan Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Investigative Staff Site Review Findings (By Provisions) a) The agency policy requires all administrative and criminal investigations to be

	completed for any allegations of sexual abuse and harassment. This finding was deemed to be compliant through the PREA Prevention and Planning policy review, in addition to staff and Inmate interviews. There have been 5 allegations of sexual abuse and/or harassment received in the past 12 months. There were zero allegations referred for criminal investigation in the past 12 months. b) The agency has a partnership with the Stone County Sheriff's Office Criminal Investigation Division (CID). The CID will investigate any allegations referred by the SCRCF location. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Staff PREA Training Curriculum
	C. Staff Search Training Curriculum
	D. PREA Refresher Training Curriculum
	E. Staff Training Records
	Interviews
	A. PREA Coordinator
	B. Agency Head
	C. Facility Administrator
	D. Intermediate or Higher-Level Staff
	E. Random Staff
	Site Review Findings (By Provisions)
	a) It is the policy of the Agency for all employees, regardless of position, to complete training regarding Sexual Abuse and Harassment and the facility's PREA policy. The PREA training curriculum includes all aspects of PREA standard 115.31. The curriculum was viewed by the Auditor during the pre-audit phase, and subject matter was confirmed through staff interviews. Staff easily articulated the content of

	the training and how it relates to their job duties. b) SCRCF houses both female and male inmates, so the training is presented in a manner that is tailored to meet the needs of both genders. Due to the physical layout and size of the inmate population, staff will routinely interact with both female and male inmates; therefore, the training covers both female and male inmates, ensuring all employees are adequately trained for working with all inmates. Auditor reviewed training rosters in addition to completion certificates for the staff. c) All newly hired staff members are required to undergo the initial staff orientation for PREA. In addition, the facility conducts mandatory annual staff training and also has supplemental online training for staff to educate them on all aspects of PREA. The knowledge the staff has in regards to the PREA policy was impressive, specifically with the few staff members who were fairly new to the organization. The review of training documentation for staff demonstrated this finding. It was evident that officer training is a priority at SCRCF and exceeds the required standard for employee training. Based on the articulation of knowledge from staff regarding the mission of PREA, first responder duties, and recognizing signs and symptoms of abuse, the facility exceeds the requirement for this standard.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. PREA Vendor Training
	C. Vendor Visit Log
	D. Volunteer and Contract Training
	Interviews
	A. PREA Coordinator
	B. Agency Head
	C. Facility Administrator
	D. Volunteer Coordinator

	E. Random Staff Site Review Findings (By Provisions) a) The agency policy states that all contractors and volunteers are required to undergo training before providing services at SCRCF. All vendors that provide a service, such as vending machines, food delivery, etc., are provided a brochure outlining the PREA requirements of the facility and are escorted by staff while on-site. SCRCF currently has 133 volunteers and contractors. b) The facility mandates that all volunteers or contractors who have contact with Inmates receive the same PREA training as the facility staff. The curriculum demonstrated for findings in PREA standard 115.31 is the same one used for contractors/volunteers. Volunteers and contractors are required to read and acknowledge their understanding of the information provided in the policy. c) In the training files for volunteers and contractors, there is a signed training form that indicates the recipient received and understands the training. Auditor viewed the training files of volunteers/contractors to ensure compliance with this subsection of standard 115.32. There are currently 133 volunteers and contractors. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. PREA Inmate Brochure English/Spanish C. Inmate Orientation Handbook D. Intake Records E. Inmate Orientation Handbook Spanish F. Poster G. Victim Poster Interviews A. PREA Coordinator

B. Intake Officer

C. Facility Administrator

D. Intermediate or Higher-Level Staff

E. Random Inmate

Site Review Findings (By Provisions)

f) Upon arrival at SCRCF, Inmates receive written information regarding the facility's zero tolerance for sexual abuse and harassment, how to report such incidents, and the facility's procedure for responding to such incidents. Out of all the random Inmates interviewed, all of them reported they received the initial orientation immediately upon arrival at the facility. In addition, the facility policy requires the facility to provide additional PREA education for the Inmate within the first 30 days of his or her arrival. The inmates can watch a video regarding their right to be free from sexual abuse and sexual harassment during their booking process. Auditor reviewed the education materials provided upon intake, as well as the comprehensive education materials. All materials provide specific information about the zero-tolerance policy and multiple ways to report incidents and/or suspicions of sexual abuse or harassment. The content of the materials also includes contact information for victim advocacy, consequences for PREA violations, and an overall definition of PREA terms.

g) The Inmate then receives training upon intake and a refresher within 30 days of arrival. This information was verified through Inmate interviews. Auditor also reviewed numerous current Inmates' signed forms of Inmate receiving information and cross-referenced it with the transfer order indicating the day the Inmate arrived, all were in compliance with this standard. The auditor used a stratified random sample method and selected every 4th name on the Inmate rosters. If the Inmate was unavailable, the Auditor chose the next name while ensuring the sample included both male and female Inmates.

h) The facility has a Spanish version of the PREA Inmate Orientation handbook in the event the facility receives an Inmate who only speaks Spanish. The facility utilizes a fluent bilingual staff member and the Mississippi Coalition Against Sexual Assault (MSCASA) to ensure that all inmates with disabilities or limited English proficiency can communicate. If the facility receives an Inmate with special needs, the staff works with them one-on-one for a needs assessment. If the facility cannot accommodate the needs of the Inmate, an appropriate placement is found and the Inmate is transferred. Interviews with the Classification Supervisor and Inmates verified the frequent one-on-one meetings and the willingness of the Classification Supervisor to assist with any needs the Inmate may have. This would include any intellectual challenges relative to reading and/or a limited ability to comprehend written materials.

i) The Agency maintains signed documentation that each Inmate received and understood PREA training upon arrival at the facility. Auditor reviewed 25 percent of

	the current Inmate training files, and 100 percent compliance was indicated during review. All files reviewed included the inmate's signature and date of arrival. The forms were then cross-referenced to the intake sheet, which verified the date of intake for the Inmate. j) The auditor interviewed both male and female inmates while on-site at SCRCF, and all stated they were given PREA material upon intake. The PREA Coordinator did provide the auditor with several inmate intake records from this audit year, which included the education and orientation materials and acknowledgement forms, signed by each inmate. k) The agency has posters and information regarding support services and reporting avenues located throughout the facility. During the onsite tour, the auditor noted visibility of PREA information displayed in the following areas: hallways, housing areas, laundry, inmate dining hall, and common areas. The facility had the information appropriately placed where it was easily accessible to be viewed by staff and inmates. The audit notice was appropriately posted in all areas and was posted four weeks prior to audit. The Inmate interviews verified the notice had been up for "several weeks "and reported the PREA signage is a permanent fixture in the facility. The information was not obscured and was free of graffiti, and clearly identified what services were available and for what purposes. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Organizational Chart
	C. Investigative Training
	D. Coordinated Response Plan
	E. Investigator Certificate
	F. DOJ Uniform Evidence Protocol for Sexual Assault
	Interviews
	A. PREA Coordinator

	B. Investigator C. Facility Administrator D. Intermediate or Higher-Level Staff E. Random Staff Site Review Findings (by Provision) a/b) The agency requires all PREA Investigators to complete the required training for Investigating Sexual Abuse cases in a confinement setting. The training provided for the current Investigators was provided through the National Institute of Corrections (NIC), PREA Investigations in a Confinement Setting. a) The facility has one internal investigator. Auditor viewed the training completion certificates for the current Investigator. The investigator's on-site function is to analyze administrative investigations, while the Stone County Sheriff's Office handles all criminal investigations. Although the facility is small, with limited resources, the investigative services are clearly a priority. Due to the Lead Investigator's qualifications, knowledge, and continued desire to seek supplemental investigative training, the facility exceeds the requirements of this standard.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Organizational Chart
	C. Inmate Orientation Handbook
	D. Coordinated Response Plan
	E. Inmate Orientation Handbook Spanish
	Interviews
	A. PREA Coordinator
	B. Agency Head
	C. Facility Administrator

	D. Intermediate or Higher-Level Staff E. Random Staff Site Review Findings (by Provision) a/b/c) Mental Health services are provided through the Mississippi Department of Corrections. Five medical staff are employed at SCRCF. All have received appropriate training on how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, and how to respond effectively and professionally to victims of sexual abuse and harassment. No forensic exams are conducted at SCRCF, but they are provided at Stone County Memorial Hospital. The services for SAFE/SANE needs would also be provided through the local hospital. The local hospital complies with the medical standard of care, which provides for a forensic exam for sexual assault victims. It is noted, as previously mentioned, that inmates who have significant medical and/or mental health needs are not sent to SCRCF for placement. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Screening Assessment/30-day follow-up
	C. Inmate Orientation Handbook
	D. Inmate Arrival Documents
	E. Inmate Orientation Handbook Spanish
	F. Poster
	G. Victim Poster
	Interviews
	A. PREA Coordinator
	B. Agency Head
	C. Facility Administrator

D. Screening Officer

E. Random Staff

F. Inmate Interviews

G. Specialized Inmate

H. Interview with the contracted LPC

Site Review Findings (by Provision)

a) According to staff interviews and policy, the classification staff are responsible for conducting the risk screening for Inmates upon arrival. The screening process takes place in a private room in the booking area, which ensures privacy due to the sensitive nature of the questions during the screening process. If any medical or mental health referrals are submitted, the Classification Supervisor meets with the inmate. The interview with the Classification Supervisor indicated a vast understanding of the sensitive nature of the questions and appeared to be equipped with the communication necessary to foster comfort and elicit responses safely and professionally. The auditor reviewed the screening assessment instrument and verified that it includes specific questions related to the risk of being sexually abused and sexually abusive towards Inmates. A review of 19 Inmate files indicated that all Inmate files selected for the sample by the auditor included a completed vulnerability assessment at intake and when transferred from another facility. The facility indicated that over the past 12 months, there have been zero Inmates whose screening assessment indicated the Inmate was sexually abusive and/or a risk for victimization. In the past 12 months, 100 percent of Inmates received the PREA screening upon intake. This was verified through a facility census report indicating inmates' PREA statuses.

b) The agency policy states that the PREA screening is conducted upon arrival, and according to documents reviewed, this practice is compliant. Auditor reviewed numerous screening forms for current Inmates and cross-referenced the date of arrival to ensure the screening is completed in a timely manner and performed upon arrival. The file revealed that all Inmates are screened for vulnerability within 72 hours and most often, within 24 hours. Every risk screening was evidenced to be completed within 72 hours of intake, and Inmate interviews verified that staff conducted assessment either immediately upon intake or the following day. The auditor also interviewed the staff (Classification Supervisor) who conducts the screening, who also verified that the screening takes place upon arrival unless exigent circumstances occur.

c/d/e) The risk assessment used by SCRCF is an objective screening assessment that was created by the agency and approved by BOP. The screening assessment includes all items required in provisions (d) (e). Examples of scored items are history of past sexual abuse, age, the Inmate's perception of vulnerability, if the Inmate is or perceived to be LGBTQ or gender non-conforming, stature, any developmental disability/mental health, etc. Based on the Inmate's answers, the Inmate is given a

designation to indicate the possible risk of victimization or potential as an abuser. There is an additional screening conducted for overall risk assessment, not specific to PREA, that would be referred to the PREA Coordinator if additional information is relevant to the Inmate's safety. SCRCF provides training for staff who complete the assessment to ensure additional documents are reviewed to confirm the Inmate's answers.

f) The facility classification staff meets with the Inmate one-on-one upon intake and again within 30 days after arrival to determine if the Inmate is having any issues in their assigned housing areas. The purpose of this review is to ensure the Inmate feels safe and that there have been no changes to the original information provided upon intake to the facility. During this meeting, the classification staff updates the information utilizing the vulnerability assessment instrument scores, and if any new concerns are identified. The auditor reviewed multiple files from the current Inmate population's 30-day reassessments and all complied with the standard.

g) Each inmate is reassessed after 30 days of confinement to assess any changes in risk. In the event any information is received prior to the 30-day mark that may indicate the need for an earlier assessment, one will be conducted. Reassessments are also conducted following any incident, receipt of additional info, change in status, etc.

h) In the event an inmate chooses not to respond to questions included in the assessment or refuses, disciplinary action will not be administered. During the interview and upon records review, it was verified that inmates are informed that information obtained will be maintained in a confidential manner.

i) In the interview with the Classification Supervisor, it was confirmed that information from the vulnerability assessment is protected by specific procedures to include confidentiality during the screening process. The specific historical information is not shared with all staff. Information regarding an Inmate's vulnerability level is shared to ensure proper supervision of higher-risk Inmates. Interviews with direct care staff verified that they do not have access to the instrument and are only provided basic information to inform the supervision of Inmates.

The facility exceeds the requirements of this standard. The intake officer demonstrated a strong understanding of PREA and the screening tool, clearly explaining the intake process in detail. She emphasized that if there were any signs or concerns indicating a need for further review, the inmate would remain in booking until that review was completed. Inmates are first assessed by the booking officer upon intake, and then reassessed within two weeks. Additionally, within the first 14 days of arrival, a nurse conducts another evaluation, asking PREA-specific questions to identify any safety concerns.

Auditor Overall Determination: Exceeds Standard	
Auditor Discussion	
Documents	
A. PREA Policy	
B. PREA Screening	
C. Inmate Orientation Handbook	
D. Inmate Arrival Documents	
E. Inmate Orientation Handbook Spanish	
F. Inmate Risk-Based Housing	
G. Reassessment PREA	
Interviews	
A. PREA Coordinator	
B. Agency Head	
C. Facility Administrator	
D. Intake Staff	
E. Random Staff	
F. Random Inmates	
G. Specialized Inmates	
Site Review Findings (by Provision)	
a)	The agency utilizes the information obtained through the screening process to determine housing appropriate to the Inmate's individual needs and PREA designation. In the event the screening indicates vulnerability or high risk for predator or sexual victimization, the Inmate will be housed separately. During interviews with the Classification Supervisor, the auditor verified that the information from the vulnerability instrument does help inform the level of supervision needed while Inmates are in the community, as well as the type of employment inmates seek. According to the Agency Director, the facility is not under any type of consent decree, etc., nor has the facility had a need to transfer an Inmate secondary to the screening results during this audit period.
b)	The Agency makes individualized determinations on how to ensure the safety of each Inmate. Per the PREA Prevention Planning policy, these decisions are made based on the screening assessment, record review, prior behavioral history, etc. The

policy continues to state that the facility will consider, on a case-by-case basis, the best placement for the Inmate to ensure overall safety. The decision will be documented in the Inmate's case file.

c) According to the PREA Prevention and Planning policy, the facility shall make decisions on placement of transgender or intersex Inmates on an individualized basis to ensure the Inmates' health and safety. This process would be completed by the Classification Supervisor and documented in the inmate's case file. To date, the facility reports that they have had zero transgender or intersex inmates during this audit period. These actions may include closer staff supervision (1:1), more check-ins while the Inmate is in the facility, and possible transfer to another facility. The Inmate would have the opportunity to shower, toilet, and change clothes in private.

d) Interviews with the Classification Supervisor verified the knowledge of the PREA requirement that transgender or intersex Inmates must be reassessed at least twice each year to review any threats to safety experienced by the Inmate. As previously mentioned, the program has had zero transgender or intersex inmates to date.

e) During the intake process, all Inmates complete a vulnerability assessment/interview. As mentioned, the SCRCF instrument used has a specific question regarding an Inmate's view of their safety. Specifically, the item asks about past sexual victimization, assesses weight/height, previous history of predatory behavior, perception of gender identity, etc. Interviews with the Classification Supervisor verified that they ask new Inmates all questions on the vulnerability instrument. Review of Inmate files also confirmed that all questions are answered and appropriately scored for assessment of risk.

f) PREA regulations require that all transgender and intersex Inmates have the opportunity to shower separately from other Inmates. All Inmates in the SCRCF program shower individually. The program has one restroom area for each housing unit with multiple single showers and toilets; all provided with privacy barriers. Interviews with Inmates verified that all Inmates shower alone and staff do not enter the shower area when in use.

g) The program layout does not allow for LGBTQI to be housed on a separate wing or floor. Interviews with the Classification Supervisor and Facility Director explained that Inmates are placed in bedrooms based on vulnerability tool information, but not because they are LGBTQI.

SCRCF exceeded the standard by demonstrating a comprehensive and proactive approach to inmate safety during intake and housing decisions. The facility effectively gathers and utilizes information from both intake and initial risk screenings to guide individualized safety plans. High-risk inmates remain in booking until appropriate housing is determined, with options to transfer or separate as needed. While the facility has not housed transgender or intersex inmates, policies and staff training reflect a strong preparedness to ensure their safety and dignity.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. Special Management Units Policy Interviews A. PREA Coordinator B. Agency Head C. Intermediate or High-Level Supervisor Site Review Findings (by Provision) a) Stone County Regional Correctional Facility policy outlines procedures to ensure inmates at risk of sexual victimization are not placed in segregated housing unless an assessment of all available alternatives has been made. b) It was confirmed through documentation and staff interviews that inmates who are housed in PC are allowed the same opportunities for programming, work opportunities, and exercise as the general population inmates. c) There were no inmates housed in involuntary segregated housing for longer than 30 days during this audit period. d) There were no inmates housed in involuntary segregated housing during this audit period. If an inmate voluntarily requests the PC unit, SCRCF requires the inmate to sign a statement form that specifies the inmate's decision on where to be housed. If the inmate needs to be housed in the PC unit but refuses, SCRCF requires the inmate to sign a refusal statement form. e) Stone County Regional Correctional Facility performs a 30-day review of segregation placement. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents

A. PREA Policy

- A. Sexual Abuse Training
- B. Inmate Orientation Handbook
- C. Inmate Brochure
- D. Incident form PREA
- E. Poster for PREA
- F. Victim Poster
- G. Staff Training Rosters
- H. Procedures for a PREA Incident form

Interviews

- A. PREA Coordinator
- B. Agency Head
- C. Facility Administrator
- D. Random Inmate
- E. Random Staff

Site Review Findings (by Provision)

- a) SCRCF has numerous methods for Inmates to report any issues of abuse or harassment, including reporting to a staff member, calling an outside agency or hotline, writing a letter to outside confidential services, and writing the PREA Compliance Manager. The facility also provides the telephone number for a hotline to the Mississippi Coalition Against Sexual Abuse (MACASA) agency.
- b) The inmates have the ability to use the phone lines to report a claim to an outside agency. The hotline number is posted directly below each inmate telephone, and the phone number and address for the advocacy center are on the pamphlets. Auditor interviewed random inmates, and the majority were familiar with the methods available to report any sexual abuse and/or harassment. However, all inmates knew the numbers were posted in the hallway and on all bulletin boards.
- c) The educational brochure distributed to the inmate upon arrival clearly indicates in writing that SCRCF has a zero-tolerance policy for any sexual abuse and/or harassment. The policy reads that any allegation of sexual abuse shall be reported to the Company's PREA Coordinator immediately. The policy states that the staff member receiving the report is responsible for documenting the incident on a PREA

	Incident Report form immediately. d) The Agency includes in policy; all staff are required to report any sexual abuse/ harassment allegation and document it utilizing the Procedure for a PREA Incident Report that is completed. The procedure has the information needed to ensure all parties are contacted and all actions post-allegation are completed in a timely manner. Staff have the ability to confidentially report any harassment and/or abuse allegations directly to the Agency head or the upper management. This notification can be done via email, phone call, or through the use of an Incident Report. During interviews with the Agency Head and Facility Director, it is clear that the Agency fosters an "open door" policy for all staff to have access to upper management. In the policy and in the MOU with the Mississippi Coalition Against Sexual Abuse (MACASA), confidentiality is addressed specifically when addressing reporting allegations. It is apparent, based on interviews and observations, that staff could easily report to any member of upper management, and the concerns would be addressed appropriately. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. Administrative Remedy Procedure C. Inmate Orientation Handbook Interviews A. Facility Director B. PREA Coordinator C. Agency Head D. Random Staff E. Random Inmate Site Review Findings (by Provision) a) The facility has a PREA policy in place that outlines the procedure for filing a

grievance regarding sexual abuse. The interview with staff and inmates verified knowledge of this policy and confirmed that the practice is followed accordingly.

b) The facility policy instructs staff that all PREA grievances will be answered immediately upon receipt. The facility has no restrictions for an inmate to file a PREA grievance at SCRCF. The policy states that all complaints are reviewed and processed in a timely manner. The process includes the inmate filing a formal written grievance and forwarding it to the facility staff. If the grievance is considered to be sensitive in nature or any sexual assault/abuse allegation, there is no time limit when reporting. The facility does not require the inmate to use an informal grievance process to resolve a sexual abuse allegation. The directive also details the process of receiving third-party grievances regarding sexual assault. All sexual assault grievances are processed on an emergent basis.

c) The process outlined in the policy allows the inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. In addition, the grievance filed will not be referred to the staff member who is the subject of the complaint.

d) As stated earlier, all grievances related to sexual abuse allegations are answered immediately, but not to exceed 90 days from the filing of the grievance. In the past 12 months, there have been zero PREA grievances filed. This was verified through an auditor review of all grievances in the past 12 months. In addition, zero of the inmates interviewed had filed a PREA grievance while housed at the facility. There were no instances in which an extension had been requested.

e) The policy permits third parties to assist inmates in filing requests for administrative remedies relating to sexual abuse and to file such requests on behalf of the inmate. In the event an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency will document the inmate's decision to decline. To date, there have been no incidents in which an inmate has declined to have third-party assistance in filing a grievance alleging sexual abuse.

f) The agency policy requires an initial response within 48 hours of the grievance being filed if the grievance alleges a substantial risk of imminent sexual abuse. According to policy, the final agency decision has to be issued within 5 days. All appeals of a grievance decision are forwarded to the Chief Deputy of Corrections. There have been zero grievances filed within the last 12 months that required a response within 5 days.

g) The facility policy has limitations on discipline for inmates who are determined to have filed a grievance in bad faith.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.

Auditor Overall Determination: Meets Standard	
Auditor Discussion	
Documents	
A. PREA Policy	
B. PREA Brochure	
C. Community Organization contact number posted on the bulletin board	
D. Inmate Orientation Handbook Spanish	
E. Poster	
F. Victim Poster	
G. Sexual Abuse Training Curriculum for Inmates	
Interviews	
A. PREA Coordinator	
B. Agency Head	
C. Facility Administrator	
D. Intermediate or Higher-Level Staff	
E. Random Staff	
F. Random Inmate	
Site Review Findings (by Provision)	
a) SCRCF has an MOU with the Mississippi Coalition Against Sexual Abuse (MACASA) agency. While on-site, the auditor verified the partnership with the MACASA through contact with the organization. The organization is available by phone, mail, or in-person visit. All contact information is widely posted for all Inmates to view. It is evident that the facility offers multiple avenues for emotional support relative to sexual abuse. Not all Inmates could articulate specifics regarding every avenue available, but they did verify the feeling of safety and knew the facility would readily provide any available resource in the event a complaint was filed. At no time did any Inmate voice a feeling of being unsafe or afraid to discuss any PREA-related concern with staff.	
b) The facility informs the Inmates of the mandatory reporting rules governing privacy and confidentiality through the orientation documents and the Inmate handbook. The handbook is provided at all intake interviews, and the Inmate signs verifying receipt of the handbook.	

	c) The facility maintains an MOU with the Mississippi Coalition Against Sexual Abuse (MACASA) agency. The auditor reviewed a copy of the agreement between the facility and the community organization. The facility maintains a productive working relationship with the organization, coordinating victim advocacy services through communications with the MACASA. The facility provides services for crisis intervention, hospital accompaniment, criminal justice advocacy, support groups, and long-term individual advocacy. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Inmate Orientation Handbook
	C. PREA Brochure
	D. Inmate Orientation Handbook Spanish
	E. Poster
	F. Victim Poster
	G. Sexual Abuse Training Curriculum for Inmates
	Interviews
	A. PREA Coordinator
	B. Agency Head
	C. Facility Administrator
	D. Random Inmates
	E. Random Staff
	F. Case Manager
	G. Informal conversations with staff and Inmates
	Site Review Findings (by Provision)

	a) The agency provides multiple methods for an Inmate to report sexual abuse and/or harassment. Upon arrival at the facility, each Inmate is provided with written materials for resources pertaining to Sexual Assault. The facility also publicly distributes contact information for the Mississippi Coalition Against Sexual Abuse (MACASA) on the bulletin boards located throughout the facility and on the agency website. The bulletin boards are in areas that all Inmates have access to view. In addition to the written material, the information is also provided in the Inmate handbook provided to each Inmate upon arrival at the facility. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Organizational Chart
	C. Staff PREA Training Curriculum
	D. Coordinated Response Plan
	Interviews
	A. PREA Coordinator
	B. Agency Head
	C. Facility Administrator
	D. Intermediate or Higher-Level Staff
	E. Random Staff
	Site Review Findings (by Provision)
	e) Included in the policy directive, the agency requires all staff to report immediately any knowledge, suspicion, or information received regarding an incident of sexual abuse. This information is covered in annual PREA training and monitored through the review of the Incident Reports submitted at the end of each shift. The policy outlines that all staff are to report any allegations of retaliation against Inmates for submitting a report. In addition, staff are required by policy to report any staff neglect or violation of responsibilities that may have contributed to an incident or

	retaliation. f) In the PREA policy, it states that all allegations shall be treated with discretion and confidentiality. There are specific methods for staff to privately report sexual assault or misconduct of inmates to any staff member. During staff interviews, it was verified that the upper management is perceived to be very approachable, and staff stated there would be no hesitation to privately report an incident or allegation to leadership staff. Staff confirmed that PREA response and reporting are a routine topic at staff meetings and trainings. Documents that pertain to PREA are secured and only viewed by the Classification Supervisor. g) According to the PREA policy, all medical and mental health staff are trained on the requirement of reporting sexual abuse immediately in accordance with policy. h) SCRCF does not house inmates under the age of 18. Per the Policy directive, the facility staff is required to report any allegation regarding a vulnerable adult to the designated State and local law enforcement agency. This includes those inmates who would be considered a vulnerable adult. i) The PREA Compliance Manager receives all allegations which including any allegations of sexual abuse or harassment reported by a third party and/or anonymous reports. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Training Curriculum for Staff
	C. Inmate Orientation Handbook
	D. Coordinated Response Plan
	Interviews
	A. PREA Coordinator
	B. Agency Head
	C. Facility Administrator

	D. Random Staff Site Review Findings (by Provision) a) The facility policy directive outlines the steps the agency requires staff to follow in the event the facility learns the Inmate is subject to a substantial risk of imminent sexual abuse. The facility coordinated action plans instructing staff to immediately respond and separate the abuser from the victim. Furthermore, the policy outlines the procedure to refrain from allowing the victim to shower and to contact assistance from the supervisor immediately. The facility includes the procedure to contact the appropriate persons necessary to ensure medical and mental health services are provided, in addition to investigative services. To date, the facility has not had any incidents in which an Inmate was subject to a substantial risk of imminent sexual abuse. On-site interviews indicated that staff receive formal training, understanding the importance of inmates' safety and procedures for responding to the imminent risk of sexual abuse. The process includes immediate separation of the alleged perpetrator and victim. Interview with the Agency PREA Coordinator and Agency Head confirmed that in the event a staff member was alleged to have sexually abused or sexually harassed an Inmate, the staff member would be removed from the premises and suspended immediately. Staff interviews revealed an understanding of the coordinated response protocol, which includes immediate action and follow-up to ensure long-term safety (private room, transfer if requested by the Inmate, etc.). Interviews verified that SCRCF practice is consistent with agency policy and PREA federal standards. There is sufficient evidence supporting that SCRCF would respond immediately and take appropriate action to any sexual abuse allegation. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.63	Reporting to other confinement facilities Auditor Overall Determination: Meets Standard Auditor Discussion Documents A. PREA Policy B. Statistical Information regarding the number of allegations C. Investigation of reported incidents D. Coordinated Response Plan Interviews
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	A. PREA Coordinator B. Agency Head C. Facility Administrator D. Case Manager E. Random Staff Site Review Findings (by Provision) g) The facility PREA policy states that upon receiving an allegation that an Inmate was sexually abused while confined at another facility, the director or designee of the facility receiving the information shall notify in writing the administrator at the facility the Inmate was transferred. SCRCF has not had an incident in which an Inmate disclosed they were sexually abused while in a prior placement/facility in the past 12 months. Interview with the PREA Coordinator and the Agency Head verified that in the event SCRCF received the information that the Inmate alleged abuse at the previous facility, a notification would be sent to the administrator (at the prior facility) immediately. This notification would be done in writing via email, followed by a phone call. In addition, the facility would report this notification to the assigned facility BOP monitor. h) The policy outlines that the notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation, and documentation shall be placed in the Inmate's master facility record. i) The interviews with the Investigator, Agency Head, and PREA Coordinator confirmed that any allegation, whether at SCRCF or other facilities, will be immediately referred to Investigative Services for initiation of a PREA investigation. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy B. Procedures for PREA Incident C. Inmate Orientation Handbook

	D. Coordinated Response Plan E. Staff PREA Training Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Intermediate or Higher-Level Staff E. Random Staff Site Review Findings (by Provision) a) As described in previous standards, the SCRCF agency's PREA policy provides specific response instructions for first responders when an allegation of sexual abuse occurs. These instructions include the separation of the alleged victim and abuser and ensuring the alleged victim and abuser do not take any actions that could destroy physical evidence (i.e., washing, brushing teeth, changing clothes, eating, or using the bathroom). b) Staff PREA training is mandatory, and the content is applicable to all staff, not just security staff. Staff interviews indicated that staff were extremely knowledgeable about the procedure and the responsibilities of a first responder. Both non-security and security staff acknowledged they would notify the security staff supervisor immediately upon ensuring the victim and abuser were separated. Staff were aware of the protocol to preserve evidence and protect the crime scene until appropriate personnel arrive. There have been no allegations in the last twelve months in which a non-security staff member was the first responder. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Case/Investigative Files

	C. Coordinated Response Plan Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Intermediate or Higher-Level Staff E. Random Staff Site Review Findings (by Provision) a) The facility has a written coordinated action plan that includes ensuring the safety of inmates and staff. The plan instructs to separate the victim and abuser, notification of supervisor, and seek immediate medical assistance if necessary. The plan also includes securing the scene and ensuring the victim or abuser does not wash, brush teeth, use the restroom, etc. The action plan also encourages staff to be observant of the Inmate's demeanor. The plan covers the staff responsibilities as first responders as it pertains to coordinating the action of obtaining assistance from medical, mental health, and investigators. The plan directly instructs the first responder to await the response of CID while the scene is being protected. The plan allows for staff to document exact times when the appropriate personnel, law enforcement, and victim services were contacted. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Memo of Non-Applicability
	C. Pre Audit Questionnaire
	Interviews
	A. PREA Coordinator

	B. Agency Head C. Facility Administrator Site Review Findings (by Provision) a) In the SCRCF PREA policy, it states that the Agency does not have an outside agency that is responsible for collective bargaining on the agency's behalf, which would limit the agency's response concerning disciplinary actions against staff members. During the pre-audit review, the facility's response on the PAQ verified the language located in the Agency PREA policy. In the interview with the Facility Director, it was reported that no collective bargaining agreements have been entered into or renewed. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. Memo regarding staff assignment retaliation C. Inmate Orientation Handbook D. Coordinated Response Plan E. Inmate Orientation Handbook Spanish A. Pre Audit Questionnaire Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Intermediate or Higher-Level Staff E. Random Staff Site Review Findings (by Provision)

	a) During the pre-audit phase portion of the audit, the facility provided the SCRCF PREA Policy and Procedure in support of their compliance with this standard in the responses provided in the PAQ responses. The policy states, "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 have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation." The interviews with staff and documentation of previous monitoring for the one case verified that this practice is in place, and the facility takes retaliation of any sort very seriously. b) Per policy, the SCRCF PREA Compliance Manager shall monitor the conduct and treatment of inmates and staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse. The policy defines the purpose of the meetings as ensuring there have been no changes that may suggest possible retaliation by inmates or staff. c) In the event retaliation is reported, the staff is directed to act promptly to remedy any such incidents of retaliation. Documents included in the review to determine if retaliation occurred include, but are not limited to, disciplinary reports, housing/programming changes, and negative evaluation forms from staff. The PREA Compliance Manager shall continue the monitoring beyond 90 days if the initial contact indicates a need. During this monitoring phase, periodic custody level checks are reviewed. All the monitoring contacts and allegations of retaliation are monitored by utilizing the 90-day post-report monitoring form to document all contacts. There have been no incidents in the past 12 months that required monitoring for retaliation. Interviews with the PREA Coordinator, Agency Head, and Classification Supervisor verified knowledge of the practice and familiarity with the specific form that would be utilized in the event of an allegation of retaliation occurring. Out of all of the Inmate interviews, no Inmate reported retaliation of any sort while housed at SCRCF. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy
	B. Special Management Unit Policy
	C. Weekly Review of Inmates Housed in PC

	Interviews A. Random Staff Interviews Site Review Findings (by Provision) a) Stone County Regional Correctional Facility utilizes its protective custody unit for the housing of those inmates who may be in fear for their lives and who SCRCF has no other alternative method of housing. This is detailed in the zero-tolerance policy. If an inmate voluntarily requests the PC unit, SCRCF requires the inmate to sign a statement form that specifies the inmate's decision to be housed in the PC unit. If the inmate needs to be housed in the PC unit but refuses, SCRCF requires the inmate to sign a refusal form. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion Documents A. PREA Policy B. Investigative Case File C. Victim Advocacy Contact Info D. Coordinated Response Plan Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Random Staff Site Review Findings (by Provision) a) During the pre-audit portion of the audit, the facility provided the SCRCF PREA policy and procedure in support of compliance with this standard. All reports of sexual harassment or abuse of Inmates will be investigated by a trained investigator according to relevant PREA standards. The policy requires training specific to

investigating sexual abuse and misconduct. The training includes, but is not limited to: sexual abuse investigations; crime scene management; elimination of contamination; evidence collection protocol; and crisis intervention. In cases potentially involving criminal behavior, the local authorities' Criminal Investigations Division will be notified in order to assist with the investigation and secure evidence. The facility indicated there have been four allegations of staff-on-inmate sexual abuse. Staff and Inmate interviews revealed there has been one incident of allegations regarding sexual abuse, Inmate-on-Inmate.

a) The agency provided proof of the investigator's specialized training by providing a completion certificate. If a criminal act is suspected, the allegations are referred immediately to the CID assigned Detention Investigator at the Stone County Sheriff's Office.

b) As there were only five allegations of sexual abuse, the auditor reviewed the documentation of the incidents. The interview with the Facility Director verified that the investigative process would begin immediately upon receiving the report. The Director further stated that third parties are investigated in the same manner as firsthand reports of allegations. The agency investigator would be responsible for gathering and preserving direct and circumstantial evidence until local law enforcement arrives.

c) The auditor was able to review the investigative documentation process for an investigation, and it included the PREA Incident Form to be used to document specifics of the incident for investigatory procedures. The investigator onsite will handle the basic preservation of evidence, but will only complete interviews with the abuser/victim if the incident was administrative only. The Stone County Sheriff's Office would begin and complete the investigation if there is any suspicion or evidence that the incident would be a prosecutable crime.

d) During the interview with the Investigator, he revealed that the credibility of the victim, suspect or witness would be assessed objectively without a presumption that one person is more credible than the other until evidence of credibility indicates one way or the other. The investigator also verified that under no circumstances would an Inmate who alleges sexual abuse be required to submit to a polygraph examination or truth-telling device as a condition for proceeding with the investigation. During the audit review period, there was one Inmate at the facility classified as having reported sexual abuse. The auditor verified this report by reviewing confidential case files and through the interview process with Inmates and staff. As a result of the Inmate no longer being in custody, the auditor was unable to question the individual who reported sexual abuse in this facility to inquire about the use of a polygraph test as a condition for the facility proceeding with a sexual abuse investigation.

e) During the on-site portion of this audit, this auditor interviewed the Agency's Investigator. The investigator informed this auditor that administrative investigations do include an effort to determine whether staff actions or failures to act contributed to the abuse. The investigator further established that during interviews and evidence gathering looking they actively look for the existence of staff neglect, violation of the

standards of employee conduct, and whether staff maintained fidelity with the agency's policies and procedures. Additionally, the investigator reported that all administrative investigations are documented in written reports that include: a description of all physical and testimonial evidence; all questions asked of these people; a list of and responses of all witnesses, staff, or community-service providers interviews; follow-up with law enforcement as well as notification to the alleged victim; and findings along with evidence used to make the determination of substantiated, unsubstantiated, or unfounded.

f) During the onsite portion of this audit, this auditor interviewed the facility lead investigator. The investigator disclosed that the local law enforcement agency and/or BOP provides the agency with a detailed account of all efforts completed during the investigation. The facility maintains a partnership with the SCSO that ensures the agency complies with the Federal PREA regulations.

g) During the pre-onsite portion of this audit, the agency indicated compliance with this provision and provided SCRCF policy and Procedure as evidence of their compliance. The Policy establishes that all reported incidents will be referred to law enforcement, and all reported incidents will be investigated. During the pre-onsite portion of this audit, the Agency indicated that over the past 12 months, there had been five allegations reported.

h) The investigator informed this auditor that criminal investigations (similar to administrative investigations) are documented and retained pursuant to the Agency's record retention policy. All records have a five-year retention cycle. This information is also located in the Agency PREA Policy.

i) During the on-site portion of this audit, this auditor interviewed the facility lead investigator. The investigator informed this auditor that the departure of the alleged abuser or victim from the employment or control of the facility or agency does not terminate the pending investigation. The investigator informed this auditor that efforts would be continued to complete the investigation. During the pre-onsite portion of this audit, the Agency indicated that over the past 12 months, there had been five allegations resulting in an administrative investigation. This was verified through the Human Resources Director and a file review of HR files.

j) As stated earlier, SCSO has a partnership with SCRCF that indicates an agreement for the SCSO to comply with the Federal PREA Mandates.

k) During the on-site portion of this audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator informed this auditor that SCRCF informs the investigating agency of the PREA standard that requires the facility to remain informed of the progress and outcome of the investigation. Additionally, facility high-level supervisory personnel revealed that in the event the SCRCF does not conduct the investigation, the facility requests relevant information from the investigative agency in order to keep the Inmate and referral source informed.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all applicable provisions of this

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy Directive B. Pre Audit Questionnaire C. Consent for Victim Advocate D. Plan for SAFE/SANE letter E. Victim Advocate Qualification Brochure F. Pre Audit Questionnaire Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Random Staff Site Review Findings (by Provision) a) During the pre-onsite portion of this audit, the SCRCF facility's PREA Policy establishes that SCRCF imposes no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or harassment are substantiated. During the on-site portion of this audit, this auditor interviewed the Agency's investigator. The investigator informed this auditor that the standard of evidence required to substantiate allegations of sexual abuse or sexual harassment was a preponderance of evidence. The Investigator was able to easily articulate an explanation of his interpretation of the preponderance of evidence. His response was consistent with the intent of the PREA standard 115.72. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with this standard

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	Documents
	A. PREA Policy B. Organizational Chart C. Inmate Orientation Handbook D. Coordinated Response Plan E. Inmate Orientation Handbook Spanish F. Poster G. Victim Poster H. Pre-Audit Questionnaire
	Interviews
	A. PREA Coordinator B. Agency Head C. Facility Administrator D. Intermediate or Higher-Level Staff E. Random Staff
	Site Review Findings (by Provision)
	a) The SCRCF Policy establishes, SCRCF will inform Inmates of the outcome of investigations, with the result being one of three outcomes: substantiated, unsubstantiated, or unfounded. b) The policy states that SCRCF conducts its own administrative investigations, but in the event that criminal investigations are handled by the SCSO CID units, SCRCF will request relevant information from the local investigative entity in order to properly inform the Inmate of the investigation outcome. During the interview process, the Director reiterated the positive partnership between the facility and the SCSO. According to the Agency Head, SCSO has always been very easy to work with and maintains frequent contact with the facility to ensure all incidents are handled appropriately and communication is consistent. c) The Inmate is notified by investigative staff upon the completion of the investigation via an incident briefing and a notification document. d) During the pre-onsite portion of this audit, the Facility provided the SCRCF PREA Policy and Procedure in support of their compliance with this standard in its PAQ responses. As indicated in subsection (a) above, if an allegation is substantiated, the results of the investigation will be forwarded for prosecution. The victim will be

	informed of the outcome. The facility reported that no such incidents had occurred during this audit period. e) During the pre-onsite portion of this audit, the Facility provided the SCRCF PREA Policy and Procedure in support of its compliance with this standard in its PAQ responses. The Policy establishes the description of the form in addition to the information that is required per the standard. f) The PREA policy states that the agency's obligation to report under this standard shall terminate if the Inmate is released from custody. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy Directive B. Inmate Orientation Handbook C. Coordinated Response Plan D. Pre Audit Questionnaire E. Employee Handbook Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Investigator E. Random Staff Site Review Findings (by Provision) a/b/c) During the pre-onsite portion of this audit, the Facility provided the SCRCF PREA Policy and Procedure in support of its compliance with this standard in its PAQ responses. The Policy establishes, disciplinary sanctions for staff who violate agency sexual abuse policies relating to sexual abuse and harassment (other than actually

	engaging in sexual abuse) shall be commensurate with the nature and circumstances of the act committed, the staff member's disciplinary history, and the sanction imposed for comparable offenses by other staff with similar histories. At SCRCF programs, staff found to have engaged in sexual harassment, sexual misconduct, or sexual abuse under PREA will be terminated from employment. During the on-site portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that any staff who violated the agency's sexual abuse or sexual harassment policy (as well as the Employee Standards of Conduct) would be subject to disciplinary sanctions up to termination. The facility reported that over the past 12 months, there have been no staff members from the facility who were currently under investigation for violation of the agency's sexual abuse or sexual harassment policies. This auditor corroborated that through a review of allegations reported over the past 12 months. The facility reported that over the past 12 months, there have been no staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse). This auditor corroborated that through a review of allegations reported over the past 12 months. During the on-site portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that any staff who violated the agency's sexual harassment policy (as well as the Employee Standards of Conduct) would be subject to commensurate disciplinary sanctions with input from the agency's contracting bodies. a) During the pre-onsite portion of this audit, the Facility provided the SCRCF PREA Policy and Procedure in support of their compliance with this standard in its PAQ responses. The Policy establishes, all terminations for violations of agency policies relating to 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. The Facility indicated that in the past 12 months, there have been no staff that were reported to law enforcement for violating the agency's sexual abuse or sexual harassment policies. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy Directive
	Interviews

	A. PREA Coordinator B. Agency Head C. C Facility Administrator Site Review Findings (by Provision) a/b) During the pre-onsite portion of this audit, the Facility provided the SCRCF PREA Policy and Procedure in support of their compliance with this standard in their PAQ responses. The Policy establishes, the facility takes appropriate remedial measures and considers whether to prohibit further contact with Inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. The facility indicated that over the past 12 months, there had been no instances where contractors or volunteers had been reported to law enforcement agencies or relevant licensing bodies for engaging in sexual abuse of Inmates. During the on-site portion of the audit, this auditor interviewed the Facility Director. The Facility Director reported that SCRCF has 133 contractors and volunteers. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy Directive
	B. Inmate Orientation Handbook
	C. Inmate Orientation Handbook Spanish
	Interviews
	A. PREA Coordinator
	B. Facility Administrator
	C. Inmate Interviews
	D. Random Staff
	Site Review Findings (by Provision)
	a-c) During the pre-onsite portion of this audit the facility's response on the PAQ

	was compliant with this standard. The SCRCF PREA Policy and Procedure establishes that inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the Inmate engaged in inmate-on-inmate abuse or following a criminal finding of guilt for inmate-on-inmate abuse. The policy continues to state, sanctions will be commensurate with the nature and circumstances of the abuse committed, the disciplinary history of the Inmate, and the sanctions comparable to Inmates with similar offenses. The DB process takes into consideration the mental condition of the Inmate and whether it would have contributed to the behavior. During the on-site audit portion of this audit, this auditor interviewed the Agency Head, and he revealed the agency may discipline an Inmate for sexual contact with staff only upon finding staff did not consent to such contact. The facility also has the authority to discipline an Inmate for a false report; however, policy includes a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. Based on review and analysis of available evidence, the auditor has determined that the agency is compliant with this standard.
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy B. Health Service Management Policy C. Mental Health Services Policy D. Health Appraisals Policy Interviews A. Medical Supervisor B. Mental Health Clinician Site Review Findings (by Provision) a/b/c) Upon record review and interview, it is noted that 100% of offenders who reported a history of prior victimization or perpetration of sexual abuse were offered follow-up review with the Mental Health Department. It was noted that any PREA screening that was found to have a history of any form of prior sexual victimization or

	perpetration, without regard to the location or setting, was followed by a meeting within the required time period. All required forms were present and filed appropriately to ensure verified documentation of offered follow-up care. g) The facility takes appropriate care to safeguard information as it relates to sexual abuse or perpetration to ensure only staff deemed necessary for the purpose of developing treatment plans, making security and management decisions, housing, bed, work, education, and program assignments, or required by law have access to the information. h) Informed consent is obtained from offenders prior to reporting information regarding sexual victimization that did not occur in an institutional setting, with the exception of offenders under the age of 18, if received. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy Directive B. Pre Audit Questionnaire C. Consent for Victim Advocate D. Plan for SAFE/SANE letter E. Victim Advocate Qualification Brochure Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Inmate Interviews E. Random Staff Site Review Findings (by Provision) a-d) The SCRCF Policy establishes, victims of rape or sexual assault will be

	referred to the local hospital for physical assessment and documentation of injuries by a SANE nurse. This referral will occur in a timely manner and will afford the victim unimpeded access to emergency medical treatment and crisis intervention services. Staff will transport the victim to the hospital, or accompany them if they are transported by the police, unless the alleged abuser is a staff member, then staff would only accompany the Inmate if requested, so as not to impede the investigation. The hospital staff will be requested to provide information and access to emergency contraception, testing for and treatment of sexually transmitted infections, including HIV, and prophylaxis at no cost to the Inmate. All necessary services will be provided to the Inmate victim at no cost, regardless of whether the victim names an abuser or cooperates with the investigation. During the on-site portion of this audit, the auditor interviewed the PREA Coordinator. The PREA Coordinator reported that all Inmate victims of sexual abuse would receive immediate and unimpeded access to emergency medical treatment and crisis intervention. The PREA Coordinator reported that any treatment would be at no cost to the Inmate. The PREA Coordinator indicated that the facilities would document the timeliness of the emergency medical treatment and crisis intervention services that were provided, the response by program staff that acted as first responders, and timely information and services concerning contraception and sexually transmitted infection prophylaxis. During the on-site portion of this audit, the auditor interviewed security and non-security staff and first responders. The facility indicated that all staff are the facility's first responders. This auditor interviewed the staff and asked them about the first responder protocol. All staff indicated that in the event they were the first to respond or learn of a sexual assault, they would notify the on-call supervisor, separate the alleged victim and accuser, secure the scene, and arrange for medical care. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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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
	Documents
	A. PREA Policy Directive
	B. Consent for Victim Advocate
	C. Plan for SAFE/SANE letter
	D. Victim Advocate Qualification Brochure
	E. DOJ Uniform Evidence Protocol for Sexual Assault

	Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Inmate Interviews E. Random Staff Site Review Findings (by Provision) a/b/c) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the SCRCF PREA Policy and Procedure. The interview with the PREA Coordinator revealed that medical staff at the local hospital are responsible for examination, documentation, and treatment of victim injuries arising from sexually abusive behaviors, including testing when appropriate for pregnancy and sexually transmitted infections, including HIV. The forensic exam is performed by qualified sexual assault examiners (Sexual Assault Nurse Examiners). The victim is examined at a local hospital equipped to conduct such examinations. The forensic exam will occur as soon as possible, but within 72 hours of staff becoming aware that an Inmate reported involvement in a sexually abusive assault. An inmate's refusal of a forensic examination is documented in the inmate's record. The facility will arrange follow-up care, including screening for infectious disease (HIV, viral hepatitis, or other sexually transmitted infections), pregnancy testing for female victims, and administration of prophylactic medication (if exposure to bloodborne pathogens is suspected) if these services were not already rendered. The facility will also coordinate any referrals to mental health providers in the community for follow-up care after an incident. The services will be of no cost to the victim." During the on-site portion of this audit, the auditor interviewed the PREA Coordinator. The PREA Coordinator reported that all Inmate victims of sexual abuse would receive access to community-based medical and mental health treatment. This auditor also interviewed case management staff at this facility. These staff indicated that all Inmates, including those who have reported prior sexual abuse or victimization, are offered mental health services through community-based providers. d/eff) As indicated in subsections (a-c) above, the policy includes testing when appropriate for pregnancy and sexually transmitted infections, including HIV. g) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the SCRCF PREA Policy and Procedure and the PREA Notice to Inmates. The PREA Notice to Inmates summarizes that treatment services shall be provided to the victim without financial cost and regardless of whether the victim cooperates with any investigation arising from this incident. During the on-site portion of this audit, the auditor interviewed the PREA Coordinator. The PREA Coordinator reported that under no circumstances would SCRCF require an Inmate to pay for treatment services as a result of being a victim of
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	sexual abuse. She further reported that SCRCF would not condition payment of these services on whether the victim names the abuser and/or cooperates with the investigation arising out of the incident. h) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and through the PREA policy. The policy states that the facility 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. During the on-site portion of the audit, various current population intake files were reviewed, none of which indicated inmates being identified as a known abuser. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy Directive B. Incident Review form C. Coordinated Response Plan Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator D. Random Staff Site Review Findings (by Provision) a-e) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the PREA Policy and Procedure. The Policy establishes that the facility shall review the incident to assess the facility's response to the allegations. Executive staff includes the Warden, Chief of Security, PREA Compliance Manager, and Investigator. All factors noted within PREA Standard 115.86(d) are considered. The PREA Compliance Manager will coordinate the meeting, gather documents to review in the review meeting. The review meeting will include recommendations for improvements, if any. According to the interview with the PREA

	Coordinator, if the unsubstantiated allegation involved a staff member, the report under this section must not include the staff member's personally identifiable information. The report is submitted to the appropriate staff, typically the Agency PREA Coordinator, who ensures implementation of the recommendations or documents the reason for not following them. In cases of substantiated sexual abuse, the Agency Director reviews the incident to assess the facility's response. All factors noted with PREA Standard 115.86 (d) are considered. The PREA Compliance Manager documents the review in a report, including recommendations for improvements, if any. A copy of this report is forwarded assigned monitor from FBOP. During the onsite portion of this audit, the auditor was informed there no reports were required to be written. If required, the meeting would be comprised of facility-level management, investigative staff, and the PREA Coordinator, and, if possible, medical and mental health staff. According to the interviews with leadership staff, this team would review the incident within 30 days of the conclusion of the investigation. The Agency Head reported that all incidents of sexual abuse are reviewed by the PREA Compliance Manager. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy Directive
	B. PREA Survey on Sexual Victimization
	C. PREA Annual Report
	D. Coordinated Response Plan
	E. https://www.mdoc.ms.gov/general-public/prea-audit-reports
	Interviews
	A. PREA Coordinator
	B. Agency Head
	C. Facility Administrator

	Site Review Findings (by Provision) a) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the SCRCF PREA Policy and Procedure. This Policy establishes, 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 facility compiles an annual report of the incident-based sexual abuse data for the year. This report is published on the Agency website. Auditor reviewed the annual report, this report includes the aggregated report listing the number of substantiated, unsubstantiated, and unfounded sexual abuse allegations reported in the past 12 months. c/d) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the Facility's Survey of Sexual Victimization Report. The facility collects aggregated data necessary to answer the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. Based on the interview process with the Agency Head and PREA Coordinator, the facility indicated compliance with this provision and provided this auditor with the SCRCF PREA Policy. e) The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. f) During the pre-onsite portion of this audit, the Facility indicated that the Department of Justice has not requested data from the agency. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all applicable provisions of this standard.
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	A. PREA Policy Directive
	B. PREA Incident Tracking
	C. Agency website
	Interviews
	A. PREA Coordinator

B. Agency Head

C. Facility Administrator

Site Review Findings (by Provision)

- a) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the SCRCF PREA Policy and Procedure. The policy establishes, SCRCF reviews data annually as well as during the incident review period to identify problem areas, takes corrective action on an ongoing basis, and prepares an annual report of its findings per 115.88 (a)-1. A report is filed annually and is available on the website. The Facility also provided this auditor a copy of the Facility's PREA Annual Report. The annual report included aggregate information on the various types of incidents. During the on-site portion of this audit, the auditor interviewed the Agency Head and PREA Coordinator. The Agency Head reported that the PREA Coordinator keeps statistics. SCRCF reviews, analyzes, and discusses trends annually. SCRCF also evaluates each reported allegation to determine if the policy and practice are sufficient or could be improved. SCRCF considers training needs as well during that assessment. The PREA Coordinator reported that on an annual basis, she reviews incidents that would qualify as Sexual Abuse/Harassment. This data is then utilized to create the PREA Annual Report. If certain incident(s) become more prevalent, then they would be targeted and analyzed to ensure proper corrective measures are in place and or need strengthening, including protocol assessment.
- b) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision, and the PREA Annual Report indicates corrective actions taken and provides an assessment of the agency's PREA Audit Report. This auditor was able to corroborate this report by reviewing prior years' annual reports. The agency has reported and sufficiently demonstrated that they evaluate key data pursuant to paragraph (a) of this standard, and the 2024 annual report includes a comparison of the current year's data with those from prior years.
- c) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided a link to the Agency's website. A review of this website reveals that it contains a link to Annual PREA Reports, as well as PREA audit reports and pertinent policies and procedures. During the on-site portion of the audit, this auditor interviewed the Agency Head. The Agency Head reported that he approves annual reports pursuant to this provision.
- d) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and reported that nothing was redacted. Comparing the 2024 Annual Report provided as part of this PREA audit to the 2024 Annual Reports available on the Agency's website evidences the same report. During the on-site portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that nothing is redacted from the approved annual report prior to its publication on the Agency's website.

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

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy Directive B. Agency Website Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator Site Review Findings (by Provision) a) During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the SCRCF PREA Policy and Procedure. The Policy establishes that all incident-based and aggregate data regarding PREA events will be stored securely and electronically. Procedures include: • All reported incidents will be entered into a monthly report, which will be updated regularly by the author of the report until such time as a final disposition is made • The PREA Coordinator will maintain an electronic file for each reported incident on the secure agency used database and/or a secure email folder specific to that incident. The file or folder will include all documentation and communication regarding the incident up to and including the final disposition. • Aggregated sexual abuse data from the SCRCF PREA facility is made readily available to the public via the agency website. The information will be updated in January each year. All personal identifiers are to be removed from aggregate data that is provided to the public. • The data will be retained for at least 10 years from the date of initial collection. During the on-site portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator confirmed that all data is securely stored in a locked cabinet located in a restricted-access area. A review of the agency's website reveals that it contains a link to the Agency's Annual PREA Reports, as well as PREA audit reports that contain aggregated sexual abuse data and pertinent policies and procedures. The PREA Coordinator reported that any personal identifying information (PII) is not included and/or redacted from the annual report. A review of the agency's website and the annual reports publicly available, this auditor was able to confirm that personal identifiers have been removed. The PREA Coordinator reported that the data will be retained for at least 10 years from the date of initial collection. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents A. PREA Policy Directive B. Agency website Interviews A. PREA Coordinator B. Agency Head C. Facility Administrator Site Review Findings (by Provision) a/b) A review of the agency's website and prior Final Audit Reports revealed that the agency is compliant with this standard. During the prior three-year audit period, the agency ensured that all facility operated by SCRCF was audited at least once. h) During the on-site portion of this audit, this auditor had access to and the ability to observe all areas of the audited facility. The facility provided this auditor with unfettered access to the facility and its staff and inmates. i) During the pre-audit, on-site, and post-on-site portion of this audit, this auditor was permitted to request and received copies of any relevant documents that this auditor requested, including but not limited to: facility logs, Inmate files, personnel files, policy and procedure manuals, postings, Inmate handbooks, intake and classification documents, etc. m) During the on-site portion of this audit, this auditor was permitted to conduct private interviews with inmates and staff at the facility. n) During the pre-audit portion of this audit, inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. While on-site, this auditor asked all inmates interviewed whether they were made aware of and saw this auditor's notices that were displayed throughout the facility. All inmates interviewed informed this auditor that the postings have been displayed. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.

	Auditor Overall Determination: Meets Standard Auditor Discussion Documents A. Agency Website B. Prior PREA Audit Reports Interviews A. PREA Coordinator f) A review of the Agency's website reveals that all Final Audit Reports were posted to its website within 90 days of their issuance by the auditor. SCRCF has an agency website and has a page dedicated to the posting and PREA-related information. During the onsite portion of this audit, this auditor interviewed the PREA Coordinator informed this auditor that all Final Audit Reports are immediately posted on the SCRCF website. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is fully compliant with this standard. The agency has a dedicated PREA page on its agency website that makes available not only Final Audit Reports to the general public but also its PREA policy and its Annual Report. Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.
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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.)	yes
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	yes

	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	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.)	yes
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	na
	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).)	
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.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell	yes

	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)?	yes
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		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 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

	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.)	yes
115.18 (b)	Upgrades to facilities and technologies		

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	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.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentially 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).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

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

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

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

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

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

	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	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	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	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	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

	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

	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.)	yes	
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	yes

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

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

	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	

	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	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	yes
	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.)	
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

	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	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	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).	yes
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

	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.)	yes
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.)	yes
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	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.)	na
115.88 (a)	Data review for corrective action		
		Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
		Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes

	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	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

(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
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