PREA Facility Audit Report: Final

Name of Facility: Baltimore Pre-Trial Complex Facility Type: Prison / Jail Date Interim Report Submitted: NA Date Final Report Submitted: 06/09/2017

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: Jeff Kovar Date of Signature: 06/0		

AUDITOR INFORMAT	AUDITOR INFORMATION		
Auditor name:	Kovar, Jeff		
Address:			
Email:	jeff@preaauditing.com		
Telephone number:			
Start Date of On-Site Audit:	2016-10-31		
End Date of On-Site Audit:	2016-11-01		

FACILITY INFORMATION		
Facility name:	Baltimore Pre-Trial Complex	
Facility physical address:	531 E.Madison Street, Baltimore, Maryland - 21202	
Facility Phone		
Facility mailing address:		
The facility is:	 County Federal Municipal State Military Private for profit Private not for profit 	
Facility Type:	PrisonJail	

Primary Contact			
Name:	Renee Alexander	Title:	Assistant Warden
Email Address:	Renee.Alexander@Maryland.gov	Telephone Number:	410-230-1405

Warden/Superintendent			
Name:	Kathleen	Title:	Landerkin
Email Address:	Kathleen.Landerkin @Maryland.gov	Telephone Number:	410-230-1402

Facility PREA Compliance Manager			
Name:		Email Address:	

Facility Health Service Administrator			
Name:	Kathryn Humbertson	Title:	Associate Director of Operations
Email Address:	KHumbertson@Wexfordhealth.com	Telephone Number:	443-878-1280

Facility Characteristics		
Designed facility capacity:	616	
Current population of facility:	387	
Age Range	Adults: 18-65	Youthful Residents: 15- 17
Facility security level/inmate custody levels:	Maximum-Low	
Number of staff currently employed at the facility who may have contact with inmates:		

AGENCY INFORMATI	AGENCY INFORMATION		
Name of agency:	MD Department of Public Safety and Correctional Services		
Governing authority or parent agency (if applicable):	N/A		
Physical Address:	300 E. Joppa Rd, Towson, Maryland - 21286		
Mailing Address:			
Telephone number:	410.339.5000		

Agency Chief Executive Officer Information:			
Name:	Stephen T. Moyer	Title:	Secretary
Email Address:	Stephen.Moyer@maryland.gov	Telephone Number:	410.339.5005

Agency-Wide PREA Coordinator Information			
Name:	David Wolinski	Email Address:	david.wolinski@maryland.gov

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

A Prison Rape Elimination Act Audit of Baltimore Pre-Trial Complex Correctional Facility was conducted from October 31, 2016 through November 1, 2016. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012. Certified PREA Auditor William Boehnemann assisted with the agency-level interviews.

The auditor wishes to extend his appreciation to Warden Landerkin and her staff for the professionalism they demonstrated throughout the audit and their willingness to comply with all requests and recommendations made by the auditor.

The auditor would also like to recognize PREA Coordinator David Wolinski and PREA Compliance Manager Renee Alexander for their hard work and dedication to ensure the facility is compliant with all PREA standards.

The auditor provided the facility with a Notification of Audit on September 19, 2016. The notification contained information on the upcoming audit and stated that any inmate with pertinent information should send a letter containing this information to the auditor at least 10 days prior to the onsite audit date, October 31, 2016. The auditor instructed the facility to post this notification in all housing units and throughout the facility at least six weeks prior to the onsite audit.

Approximately six weeks prior to the onsite audit, the Agency received access to the PREA Resource Center Online Audit System (OAS) and began completing the pre-audit questionnaire, and uploaded all relevant documentation. Once the pre-audit questionnaire was completed, the auditor was given access to the OAS system and began reviewing all of the information, including: the pre-audit questionnaire, policies, procedures, MOUS, and training documents.

An entrance meeting was held the morning of the onsite audit with the following persons: Warden Kathleen Landerkin, Assistant Warden/PREA Compliance Manager Renee Alexander, Assistant Warden Dion Randolph, Facility Administrator Monyetta Montgomery, and Major Cleveland Friday.

After the entrance meeting, the auditor was given a tour of all areas of the facility, including: JI Building Administrative Floor, JI Dorm 500, JI Dorm 600, JI Dorm 700, JI Dorm 800, JI Dorm 900, Annex Building, Wyatt Building, Annex Medical Trailer, Youthful Inmate Classroom, Gymnasium, Medical Treatment Area, Pharmacy Area, Psychology Area, and Dietary.

A total of 37 staff interviews were conducted, with at least one staff member interviewed from each interview category applicable to the facility.

Staff interviews were conducted with staff from all three shifts.

A total of 15 inmate interviews were conducted with at least one inmate interviewed from each interview category applicable to the facility.

On the morning of the onsite audit, the auditor was provided with shift assignment sheets for staff, as well as housing unit rosters for inmates. The auditor randomly selected staff and inmates to be interviewed from the information provided. All interviews were conducted one at a time in a private and confidential manner.

The auditor reviewed a sample of Human Resources files, training records for staff, contractors, and volunteers, inmate education documentation, risk screenings, and mental health referrals. The auditor also observed PREA informational posters posted in the housing units and throughout the facility.

The count on the first day of the audit was 407. The count on the final day of the audit was 422.

Throughout the pre-audit and onsite audit, open and positive communication was established between the auditor and facility staff. During this time, the auditor discussed his concerns with PREA Compliance Manager Renee Alexander.

When the audit was completed, the auditor conducted an exit briefing on November 1, 2016. The auditor gave an overview of the audit and thanked the staff for all their hard work and commitment to the Prison Rape Elimination Act.

After the onsite audit, the auditor utilized the Auditor Compliance Tool for Adult Prisons and Jails as a guide in determining compliance with each standard, and created a Final Report documenting the facility's compliance. In order to determine compliance, the auditor used the information and documentation provided during the pre-audit, information obtained through inmate and staff interviews, as well as visual observations during the facility tour.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the type of the facility, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation.

The Baltimore City Detention Center (BCDC) was originally constructed in 1806 at the present site. Significant additions and renovations were completed in 1859, 1909, 1961, 1974, 1980, 1981, 1988, 1991, 1994, 1996 and 1999. The urban complex, primarily of concrete masonry construction, consists of several multi-story buildings; The Men's Detention Center (MDC), Women's Detention Center (WDC), and Jail Industries Building (JI). The Staff/Visitor Processing Center (Control Center) monitors and controls entrance to the Men's (MDC) and Women's (WDC) Detention Centers. The Control Center is equipped with electronic detection and communication equipment which monitors the entry/departure of pedestrian traffic. A vehicular sally port is located at the front of the facility and there is a fence surrounding the front yard. Contiguous and adjoining the facility is the Maryland Transitional Center, which shares some common walls. A high concrete wall, topped with a barbed wire fence and a security tower enhance perimeter security.

Inside, the MDC visiting area is divided into non-contact general, secure, and attorney visiting areas. General visiting has stations for eighteen detainees separated from visitors by a partition. Entrance into the visitor's waiting room is operated by a secure satellite control center, which also restricts access to the corridor leading to the former main control center. The roll call room and other administrative and operational areas are located on either side of this corridor.

The Shift Commander and Operations Captains offices are located on the second floor (old control center) of the main structure. The adjacent key post is the main corridor that connects access to the North and South wings of the facility. The Mental Health Unit is also located on this level and contains a four-dorm, twenty-eight bed unit including two seclusion rooms. The adjacent Clinic area contains several examination rooms, an x-ray room, dental office, and a medication distribution room.

The Men's Detention Center (MDC) is a linear designed facility. Both MDC North and South wings contain three floors with wide corridors and two housing units on one side of each floor. On the south-side lower level is the (former) intake/processing area, which consists of three large and four small holding cells. The Traffic office, Compliance office, Public Defender, and Population Management departments are all located on this level, along with miscellaneous administrative and storage space. Each housing unit consists of two cellblocks with two tiers, each containing forty-eight cells. Depending on the location, these cellblocks contain from twelve to fifteen cells on each of the two tiers. Phones are located on the bottom tiers of the housing units. Each bar front cell facing exterior windows contains two beds attached to the wall and a stainless steel combination toilet-wash basin-fountain unit. Each unit also contains small dayrooms with televisions, and common shower areas. Several specialized housing units include a total of three hundred forty-six beds. These sections house protective custody, segregation, and mental health residents/detainees. There are also two dormitory-style housing units on split levels with approximately one-hundred eight to one hundred nineteen bunked beds per level. These dormitories contain common stainless steel toilets, washbasins and shower facilities. The main building also contains several operational and programming sections of the facility. On the upper level, situated between the north and south buildings is a large gymnasium and the library.

The kitchen is located opposite the main building and consists of two levels: a staff dining area; cooking and food preparation areas; a bakeshop and several cold and dry storage areas. The kitchen was completely closed down in September 2010 after a massive flood and is currently under repair. Detainee meals are prepared and transported from MTC during this renovation. The kitchen, main structure and two housing unit wings enclose an outdoor recreation area with basketball and volleyball courts.

Several smaller buildings are located east of the main facility near the rear vehicle sally port. Two structures house the power plant (which is closed) and the maintenance shop. A four-story building designated as the Annex houses general population detainees who are dietary workers. A total of three hundred fourteen beds are arranged in dormitories on the four levels. Each dormitory has access to common lavatories with steel toilets, urinals, washbasins, and showers. A common area in each dormitory contains benches, tables, televisions, and phones. An enclosed security station monitors movement and activities on each floor. Four portable trailers with eight classrooms are located across from the Annex and are utilized as school program space for juvenile detainees/residents. The Wyatt Building is located next to the Annex. This building contains fifty beds with a dormitory on each side of a security station. Each dormitory has access to a lavatory containing stainless steel combination toiletwash basin-fountain units and showers. A common area in each dormitory contains benches, tables, televisions, and phones. Detainees assigned to the Substance Abuse Program are housed in the Wyatt Building. Across from the Wyatt Building are two trailers that are utilized for substance abuse treatment. A security tower controls entrance into the rear yard from the street through the aforementioned vehicular sally port. The Administration Building, adjacent to the MDC, serves as administrative offices for the Commissioner and other executive staff.

The Jail Industries Building (JI) is directly across from the facility property and is connected via a skybridge. The building (formerly owned and utilized by the Baltimore Gas and Electric Company), houses administrative offices and serves as living space for approximately five hundred sixty-six detainees in dormitory style housing. The first level incorporates the laundry office, the commissary, storage areas, staff parking, loading dock platform, and the boiler room. Attached, but external, is a garage/storage building. The first level is accessed through the locked gate at the vehicular sally port, which is located on the Monument Street side of the building. The second floor, with its main (front) entrance on Madison Street, contains a security post, which is adjacent to a corridor containing numerous administrative offices. This area includes an employee break room, mailroom, a storeroom for supplies and materials, the training department, IIU office, Detainee Finance Office and Detainee Property Room. This level also contains a secure control center and an adjacent visiting room with seventeen non-contact stations, three attorney booths, and a waiting room and satellite duty station. In addition, the transportation unit is located on this level, which accommodates movement of all detainees/residents to court. To that end, there are twenty-nine assigned vehicles; (1) 12-passenger security vehicle, (1) 44-passenger bus, (1) 28passenger bus, (1) 13-passenger van; (22) 12-passenger vans (2) wheelchair vans, and (1) 5-passenger van. The third floor contains three dormitory-style housing areas, which are entered through a safety vestibule. Each housing area is divided and surrounded by security fencing. There is a security catwalk around the units and their adjacent dayrooms, which contain a television, several telephones and chairs. The dormitory areas can be monitored from the central officer's station. The lavatories have five stainless steel shower stalls, seven toilets, seven washbasins, and a utility sink on each side. A dining area adjacent to the housing area is furnished with picnic style tables and meals are transported from the main facility. The third level also contains the security office, meal preparation areas, the release/discharge area, and miscellaneous storage space. There is also a gymnasium for inmate use and a small weight room area. The fourth floor is basically devoted to housing. There are two large dormitory-style housing

sections, which are similar to the previously described units. There are two open dayroom areas, which include televisions, and several telephones. There is a lavatory with seven stainless steel toilets, five washbasins, and five showers. There are two dining and serving rooms adjacent to the day room and dormitories, as well as small staff offices and some miscellaneous storage rooms. The housing areas on the third and fourth floors are well lit by numerous windows on the outer perimeter. There are fire safety features such as smoke detectors, extinguishers, sprinklers, marked exits, fire retardant mattresses, etc. Dietary supplies are also stored on the fourth floor.

The Women's Detention Center was constructed in 1971 adjacent to the Men's Detention Center and is in close proximity to the Maryland Transitional Center. Having undergone many renovations and programmatic modifications in the past, it now serves as a correctional facility housing female detainees.

The lower level is comprised of four dormitories, two with eighteen double bunked beds, one with seventeen double bunked beds and one with sixteen double bunked beds. The dormitories each have three stainless steel washbasins, toilets and showers. Telephones are accessible in each of the dormitories, plus a television and four picnic style tables with attached benches. This area serves as the dining and dayroom. Also included on this level are the boiler room, the dietary tunnel, and Sanitation Officer's Office. The lower level is currently closed to detainee housing. The second floor level has a receiving area where (female) detainees are brought for intake and court processing, and video bail review hearings. The WDC control center, visiting room and segregation areas with sixteen single cells (each containing a stainless steel toilet and washbasin) are also on this level. There is a protective custody section containing four single cells for adult females. Dormitories "E" and "F" have thirty-six and twenty-eight beds. Dormitory "F" is used to house females who are assigned to the Stress Management Program. Dormitory "F" houses detainees who are on the methadone program. Dormitory "G" has nineteen beds and is used to house general population detainees. Currently, only detainee worker are housed in "G" dormitory. Dormitory "H" is a thirty-two - bed area used to house females who are assigned to the Substance Abuse Program. Each dorm has a common lavatory area with toilets, washbasins and showers, and common dayroom areas with phones, televisions and picnic style tables and benches for resident/detainee use. The third level consist of three dormitories "J", "K", "L" (similar in design as the aforementioned dormitories), juvenile segregation/protective, the medical unit, dietary department, several support staff offices. Dormitory "J" is currently vacant. Dormitory "K" is where the general population juvenile detainees are housed and the bed count is 32. Next to the juvenile general population dormitory is the four juvenile segregation/protective custody cells. Dormitory "L" is where the dietary workers are housed and that bed count is 34. Down the corridor are rooms used for programs, meetings, etc. There is a Public Defenders Office, Inmate Activities Coordinator Office and a Case Management Supervisor's Office. Adjacent is the medical department with a dispensary, waiting room, two examination rooms, medical records room (across the hall from the dispensary) and additional staff offices. The Infirmary consists of a medical dormitory with eight beds, a maternity dormitory with seven beds and a psychiatric dormitory with eight beds. These dorms all have stainless steel fixtures and toilets, along with showers. In addition, there are six single isolation cells with combination stainless steel washbasins/ toilets. A shower room is located across from the isolation cells. At the end of the corridor is the entrance to the tunnel that leads to the Men's Detention Center. All of the dormitories on the first, second, and third floors have electronic doors.

Both the fourth and fifth floors have five dormitories, each having a similar configuration of beds and accommodations. Across from the fourth and fifth floor dormitories are twenty-four single rooms with swinging doors that have view windows with the personal accommodations enclosed. Eight of these rooms on the fourth floor are utilized as a part of the Medical Intake process – they include an X-ray

room, detainee bathroom, PA examining room, Psychiatrist Office, Doctor's Office, Triage Office, Copier/Fax Room, and storage room. At the end of the hall on the fourth and fifth floors are ten single cells with an adjacent shower room. Doors on the fourth and fifth floors are operated manually. Also located on the fifth floor is the newly established dental clinic. Due to a lower female population count, the fifth floor of WDC is currently (temporarily) closed to detainee housing. The roof level consists of a large multipurpose room with basketball, volleyball and indoor recreational equipment. This level also has two enclosed rooftop exercise areas. A duty office is adjacent to the elevator and is manned when residents/detainees are in the area.

The only buildings in use at the time of the audit were the JI Building, Wyatt Building, Annex Building, Annex Medical Trailer, and Youthful Inmate Classroom. All other areas were closed down and are no longer in use.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed,

recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Number of standards exceeded:	0
Number of standards met:	40
Number of standards not met:	0
Number of Standards Not Applicable: (The total number of standards that were audited at the agency level)	5

After reviewing all information provided during the pre-audit and onsite audit, staff and inmate interviews, visual observations made by the auditor during the facility tour, and information provided during the Corrective Action Period, the auditor has determined the following:

Number of Standards Exceeded: 0

Number of Standards Met: 40

(115.11, 115.13, 115.14, 1115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.401)

Number of Standards Not Met: 0

As noted in the Interim Report, the auditor determined 115.15 did not meet standards due to the fact that the design of the shower/restroom areas in the JI Building, and lack of doors/curtains, enabled crossgender viewing in these areas. The auditor determined 115.33 did not meet standards due to the fact that the staff have not been documenting Inmate PREA education sessions. The auditor determined 115.41 did not meet standards due to the fact documentation related to the risk screenings was inconsistent with the time frames required under 115.41. Inmate interviews confirmed that not all inmates were being screened within the required time frames. The auditor determined 115.42 did not meet standards due to the fact that staff acknowledged they were not tracking inmates who screened to be an "At Risk for Victimization" and those who screened to be "At Risk for Abusiveness." The auditor was advised it was possible these two groups of inmates may be housed in the same housing unit.

As part of the corrective action plan, the auditor required the facility to hang a curtain, or half-door in the entrance to the shower/restroom areas in the JI Building. The auditor will require the facility document Inmate PREA Education Sessions. In addition, the auditor required the facility to conduct the 72 hour risk screenings within 72 hours, and the 30 day screenings within 30 days, as required by 115.41. In addition, the auditor required to be an "At Risk for Victimization" and

those who screened to be "At Risk for Abusiveness," and house them in separate housing units. The auditor is requiring the facility provide documentation of all new intakes names, the date of intake, date of 72 hour screening, and date of 30 day screening. The auditor will request a documentation from a random sample of new intakes who arrived at the facility after the Corrective Action Period began. The auditor will randomly select inmates from this documentation and request their risk screenings to verify they are being completed within the required time period. The auditor is also requiring documentation of all inmates identified as "At Risk for Victimization" and those "At Risk of Abusiveness," as well as their housing locations. The auditor requested the facility provide this information monthly until the auditor has determined the facility meets the standard.

Upon conclusion of the Corrective Action Period, the auditor was provided with all the required information to and made a final assessment of the facility's PREA Compliance. After reviewing all information during the corrective action period, the auditor has determined, the facility now meets standards 115.15, 115.33, 115.41, and 115.42.

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
	 DPSCS.020.0026 PREA Compliance states: A. The Department does not tolerate sexual abuse or sexual harassment of an inmate. B. The Department requires that an employee with knowledge of an incident of inmate sexual abuse or sexual harassment shall report that knowledge according to Department procedures for reporting employee misconduct or inmate rule violations. C. The Department shall investigate the background of all prospective employees, promotes, and contractual service providers who have direct contact with inmates to determine suitability for hire or promotion under the standards established by the Prison Rape Elimination Act.
	OSPS.050.0030 Sexual Misconduct states:
	 A. The Department does not: 1) Tolerate sexual misconduct by an employee, by either omission or commission; and 2) Consider alleged or actual consent as a defense to an allegation of sexual misconduct. B. The Department shall ensure that existing efforts and new strategies to prevent, detect, and respond to acts of sexual misconduct comply with applicable federal standards established under the authority of the Prison Rape Elimination Act (PREA) of 2003.
	OSPS.200.0004 Inmate Sexual Conduct states:
	 A. The Department does not : 1) Tolerate inmate on inmate sexual conduct; and 2) Consider alleged or actual consent as a defense to an allegation of inmate on inmate
	 sexual conduct. B. The Department shall ensure that existing efforts and new strategies to prevent, detect, and respond to acts of inmate on inmate sexual conduct comply with applicable federal standards established under the authority of the Prison Rape Elimination Act (PREA) of 2003. In addition to these policies, zero tolerance policies are also located in the Dental Policy, MHM Policy, Pharmacy Policy, and Wexford Policy.
	BPC.020.0026 is the facility policy that outlines how the facility will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. This policy (BPC.020.0026) includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment, and includes sanctions for those found to have participated in prohibited behaviors. This policy also includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.
	The agency has a designated PREA Coordinator to manage PREA implementation in all state Department of Corrections Facilities. In addition, each facility, including Baltimore Pre-Trial Complex, has designated a PREA Compliance Manager. Both the PREA Coordinator and PREA Compliance Manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. This was confirmed through interviews with the PREA Coordinator and PREA Coordinator and PREA Coordinator and PREA Compliance Manager. The PREA Compliance Manager holds the position of the Assistant Warden and reports directly to the Warden.

The zero tolerance stance was clearly observed during the auditor's site visit. PREA education posters were in the housing units and throughout the facility. In addition, the facility used a stencil to paint the PREA Hotline telephone number on the walls throughout the facility. Both Administrative and First Line Staff were knowledgeable and supportive of the zero tolerance policies.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	The Agency has one contract for the confinement of inmates. This contract is with Threshold, Inc. for Pre-Release Services. The auditor was provided with a copy of this contract which has a performance period from October 1, 2016 through September 30, 2018. The auditor was advised they had only one contract for the confinement of its inmates. The auditor was provided with a copy of this contract and it states "the Contractor shall operate the Center in conformance with all laws, Standards, regulations, and IDs. Standards include all state correctional system requirements for the operation of a community adult rehabilitation center pursuant to Md. Code." The contract also states the contractor "shall comply with the standards set forth in the Prison Rape Elimination Act of 2003, and with all applicable regulations issued by the U.S. Department of Justice." The auditor verified Threshold, Inc. went through a PREA audit on July 13, 2015 and successfully passed the audit.
	The auditor reviewed the contract and discovered it contains an inspection clause.
	The PREA Coordinator advised there is a state employee assigned as the PREA Compliance Manager for the contracted facility who oversees the facility's PREA Compliance. The PREA Coordinator affirmed the contracted facility went through, and successfully passed their PREA audit in 2015.
	Since the Agency has designated their own state employee as the PREA Compliance Manager of their sole contract facility, the auditor has determined the facility is exceeding this standard.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse.
	OPS.115.0001 Staffing Analysis and Overtime Management states: The Executive Director-Field Support Services, or a designee, is responsible for developing, distributing, and maintaining a detailed operations manual for use at each Department correctional and detention facility to document, report, analyze, and maintain information and data related to employee hours of work and leave, overtime, and compensatory time." The auditor was provided with and reviewed the staffing plan for 2015.
	Recently, the facility closed down part of it's facility, and now it's staffing plan is based on a capacity of 1,210 inmates. The average number of inmates since the partial closure of it's facility is 950.
	The auditor viewed staffing the staffing plan for 2015. The auditor was advised that National Institute of Corrections is currently conducting a staffing analysis and has not finalized their report. This report will serve as their 2016 staffing plan.
	At least once every year the facility/agency, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.
	OSPS.050.0030 Sexual Misconduct states:
	 A supervisor, manager, or shift commander shall: 1) Take reasonable actions to eliminate circumstances that may result in or contribute to an incident of sexual misconduct that include conducting and documenting security rounds to identify and deter staff sexual abuse and harassment that are performed: a) Randomly on all shifts;
	 b) Except when necessary to prevent prohibited cross gender viewing of an inmate or as part of a legitimate facility operation, unannounced in order to prohibit staff from alerting other staf that the rounds are being conducted; and c) At a frequency established by the managing official"
	During the pre-audit, the auditor was provided with, and reviewed a sample of documented unannounced rounds. A review of the documented rounds indicate unannounced rounds occur on all shifts.
	Interviews conducted with the Warden, PREA Compliance Manager, PREA Coordinator, as well as interviews with intermediate and higher-level facility staff supported compliance with this standard. Interviews confirmed the facility has a documented staffing plan, which considers; adequate staffing levels to protect inmates against sexual abuse and the use of 16

video monitoring technology. The auditor was advised the facility considers the nature of the facility, lines of sight in certain areas, the facility configuration, the classification of inmates, as well as video technology. The auditor was advised the facility currently did not have any cameras installed inside the facility; however, there was a documented camera plan in place and the facility was in the process of installing cameras that were used in other state facilities that were recently closed down. The staffing plan is documented in the Warden's Office and on the Post Assignment Work Sheet. The auditor was advised by staff that when assessing adequate staffing levels and the need for video monitoring, the facility staffing plan considers:

a. Generally accepted detention and correctional practices;

b. Any judicial findings of inadequacy;

c. Any findings of inadequacy from federal investigative agencies;

d. Any findings of inadequacy from internal or external oversight bodies;

e. All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated);

f. The composition of the inmate population;

g. The number and placement of supervisory staff;

h. Institution programs occurring on a particular shift;

i. Any applicable state or local laws, regulations, or standards;

j. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and

k. Any other relevant factors.

The auditor was advised the facility/agency recently partnered with the National Institute of Corrections to have them conduct a staffing analysis. The Warden reviews the Post Assignment Worksheet (PAWS) every single day to ensure the staffing plan is met and justify the use of overtime.

Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. The auditor was advised the facility has mandatory positions and other positions that are collapsible. The auditor was advised there have not been any instances in the past 12 months where the mandatory positions were not staffed. The auditor was advised the facility would collapse non-mandatory positions and reassign them to the mandatory positions and/or use overtime to fill mandatory positions, when necessary.

Staff interviews confirmed the facility staffing plan is reviewed annually.

Intermediate and higher-level facility staff interviews indicate unannounced supervisor rounds occur daily on all three shifts. These rounds are documented in red ink in the post log book. The supervisors interviewed indicated they make their rounds in an irregular manner so that staff are unaware of where they are going. During roll call, staff have been made aware they are prohibiting of alerting other staff of these unannounced rounds. Supervisors monitor radio traffic to ensure staff do not advise other staff that these rounds are occurring.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	DPDS.100.0003 Separation of Adult and Juvenile Detainees states: If a waived juvenile is remanded to the custody of the Division, the individual shall be housed in a separate unit designated for juveniles which affords no more than incidental sight or sound contact with adult detainees from outside the unit of living, program, dining, or other common areas. Any other sight or sound contact is minimized, brief, and in conformance with applicable legal requirements.
	Baltimore Pre-Trial Complex has a housing unit to which youthful inmates are assigned that provides sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters. This housing unit consists of two dorms in the Wyatt Building. No adult offenders are housed in, or have access to this building. In addition, the youthful inmates go to school in the Youthful Inmate Classroom, which is just outside their housing unit. This area provides site and sound separation from adult offenders. In the event a youthful inmate needed medical attention, they would receive these services in the Annex Medical Trailer. No adult offenders would be allowed in this area while the youthful inmates may have incidental contact with adult offenders is when they are being escorted to the JI Building for recreation; however, the auditor was advised the youthful inmates would be under direct staff supervision while in this area. Staff from the youthful inmate housing unit call ahead and notify staff at the JI Building that the youthful inmates are in route. This practice was observed while the auditor was onsite. Youthful inmates receive recreation by themselves and not with adult offenders.
	In the past 12 months, there have not been any youthful inmates placed in SAME HOUSING UNIT as adults at this facility.
	The facility documents the exigent circumstances for each instance in which youthful inmates' access to large-muscle exercise, legally required education services, and other programs and work opportunities was denied. The auditor was provided with sample documentation showing the limited circumstances in which activities for youthful inmates are denied. This information was documented in the post log book.
	In the past 12 months, there have not been any youthful inmates who have been placed in isolation in order to separate them from adult inmates.
	Youthful inmate interviews confirm the only time youthful inmates have site or sound contact with adult offenders is when they go to recreation in the JI Building. The auditor was advised youthful inmates may pass adult offenders in the hallway in this area; however, staff are present and escort the youthful inmates to and from recreation.

Staff interviews confirm staff use the Wyatt Building to house Youthful Inmate separate from adult offenders. Staff stated they contact the staff in the JI Building and let them know whenever they are escorting the youthful inmates to recreation. Staff in the JI Building secure

the walks in the area, prior to the youthful inmates coming through. Youthful inmates have their own Youthful Inmate Classroom, as well as their own area for medical services. This ensures site and sound separation. Staff indicated that in August 2016, the facility stopped using the Annex Building for permanent housing and now only uses the building to house weekenders, on the weekends. The auditor was advised that since they stopped permanently housing adult offenders in the Annex Building, there have not been any issues maintaining site and sound separation between youthful and adult offenders. Staff further acknowledged that involuntary segregated housing has never been used to achieve site and sound separation.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	OPS.110.0047 Inmate Personal Searches states: An inmate strip search shall be conducted:
	 a) By a single correctional officer of the same gender as that of the inmate being searched; b) In a location and in a manner that ensures maximum privacy for the inmate being strip searched; and
	c) In the presence of an additional correctional officer.
	Body Cavity Search
	A body cavity search of an inmate requires:
	a) Reasonable suspicion that the inmate possesses contraband; and
	b) Prior written authorization from the managing official, or a designee.
	2) Only a certified medical professional may perform a body cavity search of an inmate.
	Except under provisions of section .05E(3)(c) of this directive, a frisk search of a female
	inmate shall be conducted by a female correctional officer.
	A frisk search of a male inmate may be conducted by either a male or female correctional
	officer provided that a female officer does not touch the genital area of the inmate being searched.
	A strip search of a transgender or intersex inmate may not be conducted for the sole purpose of determining the inmate's genital status. If an inmate's genital status is unknown, it is to be determined through:
	I) Conversation with the inmate;
	ii) A review of available medical records; or
	iii) Part of a broader medical examination conducted in private by a licensed medical professional.
	BPC.020.0026 states:
	The facility does not permit cross-gender pat-down searches of female inmates/detainees,
	except in emergency circumstances. The facility does not restrict female inmates/detainees
	access to programs or other out-of-cell opportunities based on this restriction.
	The auditor was advised that no such searches have occurred in the past 12 months.
	OPS.110.0047 states:
	Searches are documented in compliance with established reporting requirements.
	OSPS.050.0030 Sexual Misconduct and BPC.020.0026.1 outline procedures that enable
	inmates to shower, perform bodily functions, and change clothing without non-medical staff of
	the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent
1	size under some sy utden sy ster visuring is insidented to youting call sheets. These two policies

circumstances or when such viewing is incidental to routine cell checks. These two policies specifically require staff of the opposite gender to announce their presence when entering an

inmate housing unit.

In the past 12 months, there have not been any cross-gender strip or cross-gender body cavity searches of inmates.

The facility houses only male offenders; therefore, 115.15 (b)-3 is not applicable.

The auditor was advised that 100 percent of all security staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

During staff interviews, some staff were unaware female staff were required to announce their presence whenever they entered a male housing unit. Inmate interviews confirm sometimes this announcement is not made. In addition to this, some staff were unfamiliar with which gender staff are responsible for conducting searches of transgender/intersex inmates (no transgender/intersex inmates were housed at the facility at the time of the audit). The auditor required the facility to provide refresher training in these areas. Prior to the completion of the final report, the auditor was provided with a memo addressing these areas of concerns. This memo was disseminated to all staff and was discussed in roll calls. The auditor was provided with documentation of signed acknowledgement sheets from staff, documenting their receipt and understanding of this information. These minor issues were corrected immediately after the onsite audit, thus satisfying any concerns the auditor had in these areas.

During the onsite audit, the auditor discovered multiple showers that did not have a shower curtain. Prior to the completion of the Final Report, the auditor was provided with pictures documenting that shower curtains have been installed on all shower stalls. Since this issue was addressed prior to the completion of the Final Report, the auditor did not list this issue as needing corrective action.

Areas that Required Corrective Action:

During the onsite audit, the auditor noted that the entrance leading into the shower/restroom areas in the JI Building were open and enabled cross-gender viewing by any female staff making a security round in the housing unit.

Corrective Action Plan:

As part of the Corrective Action Plan, the auditor is requiring the to facility install a curtain, or a half-door, in the entrance to all restroom/shower areas in the JI Building. This will enable the inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. The auditor is requiring a memo from the PREA Compliance Manager ensuring this task has been completed in all shower/restroom areas. In addition, the auditor is requiring pictures, documenting compliance.

Final Determination:

Prior to the completion of the Corrective Action Period, the auditor was provided with photos of shower curtains that were recently installed in all shower/restroom areas of the JI Building. The auditor reviewed the photos and determined the shower curtains enable inmates to

shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. In addition, the auditor was provided with a memo from the PREA Compliance Manager stating shower curtains have been installed in all shower/restroom areas in the JI Building. Based on this information, the auditor has determined the facility is now in compliance with standard 115.15.

.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed several policies related to providing disabled, and limited English speaking, inmates equal opportunity to participate in or benefit fro all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. These policies are listed below:
	* DPDS.180.005 Detainee Orientation * DPDS.200.0002 Accommodations for Persons with Disabilities * Interpreter Services Presedure
	* Interpreter Services Procedure * OEO.020.0032 LEP Policy * OSPS.050.0030 Sexual Misconduct
	* OSPS.200.0004 Inmate Sexual Conduct * Official PREA Brochure Spanish
	OSPS.200.0004 states: Except under limited circumstances where a delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first responder duties, or the investigation of an inmate's allegation, inmate interpreters, inmate readers, or other types of inmate assistance are not used to communicate information required under this directive to other inmates.
	The agency or facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used; however, there were no such instances which occurred within the past 12 months.
	Staff interviews indicate the agency/facility uses language interpreter services for limited English speaking inmates and has access to TTY for hearing impaired inmates.
	During staff interviews, some staff were unaware of the agency policy prohibiting staff from using an inmate interpreter to assist with interpreting for an inmate who was sexually abused. The auditor required the facility to provide refresher training in this area. Prior to the completion of the final report, the auditor was provided with a memo addressing this area of concern. This memo was disseminated to all staff and was discussed in roll calls. The auditor was provided with documentation of signed acknowledgement sheets from staff, documenting their receipt and understanding of this information. Due to the fact that this minor issue was addressed and corrected immediately after the onsite audit, the auditor has determined the facility meets this standard.
	During the onsite audit, there were no inmates who were identified to be limited English proficient and/or have other disabilities or impairments; however, the auditor verified the facility has access to a language hotline to communicate with limited English speaking inmates.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	AMD.050.0041 Background Checks states: The Department shall conduct a criminal history records check on all new employees in accordance with federal and State statue and regulation to detect criminal convictions that may be related specifically to job performance. "Employee" means an individual assigned to or employed by the Department in a full-time, part-time, temporary, or contractual position regardless of job title or classification.
	COMAR 12.10.01.05 Correctional Training Commission states: This regulation does not prevent an agency head from setting higher criminal history standards than specified in this regulation.
	DPCS 020.0026 PREA Compliance states: The Human Resources Services Division (HRSD) shall adopt hiring policy consistent with federal PREA standards prohibiting the hiring or promotion of anyone who may have contact with inmates, and prohibiting the enlisting of the services of any contractor, who may have contact with inmates, who:
	 a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. b) Was convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or c) Was civilly or administratively adjudicated to have engaged in the activity described in section .04B(3) of this directive.
	COMAR 12.15.01.19 State Rap Back Program states: If an employer or regulatory authority is authorized by State statue to receive a revised printed statement, the Central Repository, shall:
	 Enroll the employer or regulatory authority in the State Rap Back Program; Maintain a record of each previously processed individual who works for, or is regulated by an authorized employer or regulatory authority; Issue a revised printed statement for each previously processed individual when new information is added to the individual's CHRI indicating:
	 a) An arrest b) The issuance of an arrest warrant c) The filing of a charging document d) A disposition of conviction e) A verdict of not criminally responsible; or f) A disposition of probation before judgement; and

4) Send the revised printed statement to the employer, the regulatory authority, and the

covered individual who is the subject of the printed statement.

COMAR 17.04.03.10 Employment Background Checks states:

The appointing authority shall determine the necessity of investigating the background of an eligible individual for purposes of verification of suitability for employment. When appropriate and job-related, areas of investigation may include but are not limited to employment history, academic credentials, military records, criminal conviction records, and personal references.

DPSCS.020.0026 Employment Background Checks states:

The HRSD shall consider incidents of sexual harassment when determining to hire or promote an employee or contract with a service provider if the individual may have contact with an inmate.

Hiring Guidelines for the Position of Correctional Officer include:

1) PREA (Prison Rape Elimination Act)- Any applicant who has engaged in sexual abuse in a prison, jail, lock up, community confinement facility, juvenile facility, or other institution shall be permanently disqualified from DPSCS employment.

2) Any applicant who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victim did not consent or was unable to consent or refuse shall be permanently disqualified from DPSCS employment.
3) Any applicant who has been civilly or administratively adjudicated to have engaged in sexual abuse in a prison, jail, lock up, community confinement facility, juvenile facility, or institution, or has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victim did not consent or was unable to consent or refuse, shall be permanently disqualified from DPSCS employment.

4) Any applicant who has been terminated from previous employment or resigned in lieu of termination after having found to have engaged in sexual harassment shall be permanently disqualified from DPSCS employment.

DPSCS 020.0026 PREA Compliance states:

Before hiring a new employee to perform duties involving contact with an inmate, the Human Resources Division shall:

(a) Conduct a criminal background records check; and

(b) Consistent with federal, state, and local law, make a best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or a resignation during a pending investigation of an allegation of sexual abuse."

COMAR 12.15.01.19 State Rap Back Program states:

If an employer or regulatory authority is authorized by State statute to receive a revised printed statement, the Central Repository shall:

1) Enroll the employer or regulatory authority in the State Rap Back Program;

2) Maintain a record of each previously processed individual who works for, or is regulated by an authorized employer or regulatory authority;

3) Issue a revised printed statement for each previously processed individual when new information is added to the individual's CHRI indicating:

a) An Arrest;

b) The issuance of an arrest warrant;

c) The filing of a charging document;

d) A disposition of conviction;

e) A verdict of not criminally responsible; or

f) A disposition of probation before judgment; and

4) Send the revised printed statement to the employer, the regulator authority, and the covered individual who is the subject of the printed statement.

DPSCS 020.0026 PREA Compliance states:

The HRSD shall conduct criminal records background checks every five years on employees or a contractor's services provider who may have contact with an inmate.

PREA DBM DPSCS JOBAPS Application Form is a form that all applicants are required to sign. The form contains an affirmation which states, "I hereby affirm that this application contains no willful misrepresentation or falsifications and that this information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any misrepresentation or falsification, I shall be subject to immediate termination and/or my application will be disapproved, my name removed from the eligibility list, and that I will not be certified for employment in any position under the jurisdiction of the Department of Budget & Management. I am aware that a false statement is punishable under law by fine or imprisonment or both."

The auditor was provided with a Reference/Employment Verification Form that is used when contacting agencies where an applicant was previously employed.

The auditor was provided with a copy of mandated polygraph questions the DPSCS asks applicants. These questions are specifically about prior sexual abuse and sexual harassment.

The auditor viewed the employment application form and confirmed the required questions pertaining to sexual abuse and sexual harassment are asked as a part of the application.

The auditor was provided with a copy of a Wexford New Hire Offer letter, which states hiring is contingent upon passing a background investigation including criminal history check.

The auditor confirmed 100% of all contractors/volunteers (who have contact with inmates) have gone through a criminal background records check.

The auditor requested to see a random sample of personnel files, including, the employees' application and criminal background records checks. The auditor was advised there were no files available from employees who were hired prior to 2000, due to the agency purging files. The auditor discovered during his review that all employees sampled, who were hired after 2000, had documentation of criminal background records check. The auditor was advised that effective May 1, 2014, the agency added questions in their application that were specific to PREA and sexual misconduct. The auditor discovered during his review that all employees sampled, who were hired after May 1, 2014, had an application questionnaire completed in their file. This questionnaire included questions specific to 115.17 (a)-1.

Interviews with Human Resources staff indicate the hiring application asks the applicant questions specifically about prior sexual harassment. If the applicant were to answer yes to any of the four questions in the application pertaining to sexual misconduct, the applicant would be disqualified for employment. The auditor was advised that all employees, including contractors, have gone through a criminal background records check. All background investigations go through the Central Hiring Unit. Employees who go up for a promotion go through a vetting process which include a fingerprint and criminal history check. All new employees are required to go through a polygraph examination. The auditor was advised that when an employee is hired, their information is entered into a database. If an employee is ever arrested, an alert would automatically be sent to IID for their review and investigation. This is done instantaneously and exceeds the standard requirement of criminal background records checks once every five years.

During the application process, the employee answers questions pertaining to sexual misconduct in the application. During the interview, the applicant is asked these same questions again verbally. The responses are documented on the PREA interview form. In addition, during orientation, the employee signs a PREA acknowledgement form (responding to the same four questions). Staff going up for a promotion, are required to respond to these questions on the promotional application and also during the promotional interview. There is an affirmation clause employees are required to sign, on the application, the orientation acknowledgement form, and the promotional application form.

Human Resources staff acknowledged upon receipt of receiving a release of information, any previous sexual misconduct information would be provided to the new employer by IID.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor was advised the agency has not acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012.
	The auditor was advised the facility has not installed or updated a video monitoring system since August 20, 2012. The auditor was advised the facility recently developed a plan for video upgrades and is in the process of installing the technology.
	Staff interviews indicate that when designing, acquiring, or planning substantial modifications to facilities, the agency would review the floor plan and try to identify any blind spots, hidden areas, or other others that could present a potential problem area. Staff confirmed the facility has not undergone any expansions or modifications since August 20, 2012. Staff identify potential blind spot areas and used the strategic placement of cameras to maximize coverage. The auditor was advised the facility recently created a plan for camera technology and is in the process of installing these cameras.

115.01	
115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The agency is responsible for conducting both administrative and criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). Internal Investigations Division (IID) has responsibility for conducting these investigations. IID is a part of the agency (DPSCS).
	When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol. The uniform evidence protocol can be found in the following procedures and guidelines:
	 IIU.110.0011 Investigating Sex Related Offenses IIU.220.0002 Evidence Collection
	 3) PREA Event Guidelines 4) PREA Lesson Plan-Investigations 5) Sexual Assault Procedure-Medical
	The protocol is developmentally appropriate for youth.
	The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly protocols developed after 2011.
	OSPS.200.0004 Inmate Sexual Conduct states: If the alleged inmate on inmate sexual conduct involves sexual abuse, the assigned investigator shall:
	 a) If evidentiary or medically appropriate, offer the victim access to a medical forensics examination at no cost to the victim that is performed by a: I) A Sexual Assault Forensic Examiner (SAFE);
	 ii) Sexual Assault Nurse Examiner (SANE); or iii) If after documented attempts to provide a SANE or SAFE are unsuccessful, a medical professional who has been specifically trained to conduct medical forensics examinations.
	Code of Maryland (COMAR) outlines the care and services for victims of sexual abuse. Since these guidelines are established under COMAR, no formal MOU is needed. The auditor was provided with a list of hospital facilities that provide forensic examinations for victims of sexual abuse.
	There has been one forensic medical examination conducted within the past 12 months. This examination was conducted by a SAFE/SANE at Mercy Hospital.
	Initial victim advocate services would be provided by a victim advocate provided by the hospital.

The auditor was provided with documentation of efforts to enter into an agreement with Maryland Coalition Against Assault (MCASA) for follow-up victim advocate services. This

documentation included email correspondence as well as a draft agreement. The agreement has not been finalized; however, the auditor spoke with a representative from MCASA and was advised victim advocate services would be provided regardless of any formal MOU. The auditor was advised by the representative that MCASA would serve as a liaison between the DOC and local rape crisis centers. If an inmate were sexually abused, the DOC would contact MCASA and MCASA would contact a victim advocate from a local rape crisis center. This victim advocate would provide follow-up services to the victim.

The victim advocate would accompany and support the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.

Staff interviews indicate staff were knowledgeable of the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abused, as well as who was responsible for conducting sexual abuse investigations (IID). Staff interviews confirm that initial victim advocate services would be provided by a victim advocate, provided by the hospital. Staff advised follow-up services would be coordinated through Maryland Coalition Against Sexual Assault (MCASA). If the facility is unsuccessful in locating an outside victim advocate, the facility would use one of it's social workers to provide victim advocate services.

Interviews with one of the SAFE/SANE staff at Mercy Hospital and confirmed the hospital's SAFE/SANE staff would conduct forensic examinations for any inmate who was sexually abused. The auditor was advised there are approximately 30 SAFE/SANE examiners who work for Mercy Hospital and there was always at least one available. SAFE/SANE staff work a regular schedule at the hospital and also have an on-call rotation as a back-up in the event that additional staff are ever needed at any given time.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct).
	In the past 12 months, there have been five allegations of sexual abuse and sexual harassment that were received. All of these investigations were investigated criminally. At the time of the audit, there were three investigations still ongoing.
	IIU.110.0011 Investigating Sex Related Offenses states: An employee who observes or has knowledge of an incident, regardless of the source of the information, involving a sex related offense that occurs on Department property or in a Department vehicle shall notify the Internal Investigative Unit (IIU) of the incident as soon as possible after the occurrence or the employee first becomes aware of the incident.
	The auditor confirmed IIU investigators have arrest powers and the authority to conduct criminal investigations.
	The auditor verified the investigative policy, IIU.110.0011-Investigating Sex Related Offenses, is posted on the agency's website.
	The agency documents all referrals of sexual abuse or sexual harassment for criminal investigation.
	Agency Staff interviews indicate allegations of sexual abuse are conducted by IID and allegations of sexual harassment are conducted by facility investigators.
	Investigative staff interviews indicate all detectives at IID have the authority to conduct criminal investigations and have police powers.

5.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The agency trains all employees who may have contact with inmates on the agency's zero tolerance policy for sexual abuse and sexual harassment. The agency trains 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. The agency trains all employees who may have contact with inmates on the right of inmates to be free from sexual abuse and sexual harassment. The agency trains all employees who may have contact with inmates on the right of inmates to be free from sexual abuse and sexual harassment. The agency trains 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. The agency trains all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement. The agency trains all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims. The agency trains all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse. The agency trains 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. The agency trains all employees who may have contact with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
	The auditor was provided with copies of PREA lesson plans and a curriculum outline confirming all of the above mentioned topics are a part of the training.
	Training is tailored to the gender of the inmates at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training. The agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification.
	The auditor was advised all 584 staff employed at the facility have received PREA training.
	The auditor reviewed a random sample of employee training records and confirmed the agency is providing and documenting staff PREA training.
	Interviews with staff confirm staff receive PREA training during the academy and annually during in-service training.

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

The auditor was advised there were 143 volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates.

All volunteers and contractors who have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment are informed how to report such incidents.

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

The auditor reviewed a random sample of contractor/volunteer PREA training files and confirmed PREA training is provided to contractors and volunteers. This training is documented in the contractor/volunteer's file.

Contractor/Volunteer interviews indicate contractors and volunteers are trained on their responsibilities regarding sexual abuse/harassment prevention, detection, and response policies and procedures. Interviews indicate the Director of Compliance provides this training to all contractors and volunteers. Training includes an overview of the agency policy, including guidelines on how and to whom to report sexual abuse.

115.33 Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

Inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment.

In the past 12 months, there were 5,298 inmates who were given this information at intake. This is 100% of all new intakes that were booked into the facility within the past 12 months.

In the past 12 months, there were 4,174 inmates (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. This was 94.4% of all inmates admitted within the past 12 months.

Of those who were NOT educated within 30 days of intake, all inmates have been educated. In July 2016, the agency conducted a mock PREA audit and discovered some of the inmates missed their PREA education. In August 2016, the inmates that missed their PREA education were provided such education. In August 2016, a meeting was held with supervisory and administrative staff in order to review the PREA education timelines for inmates.

OSPS.200.0004 Inmate Sexual Conduct states:

The head of a unit, or a designee, responsible for the custody and security of an inmate, in addition to responsibilities under.05B of this directive, shall ensure that:

Department and unit policy prohibiting inmate on inmate sexual conduct, procedures for filing a complaint, and inmate rights related to inmate on inmate sexual conduct are effectively communicated to each inmate:

- a) As part of inmate orientation;
- b) By inclusion in the facility's inmate orientation paperwork; and
- c) If applicable, the facility's inmate handbook

Inmate PREA education is available in formats accessible to all inmates, including those who are limited English proficient. PREA Brochures and posters are written in Spanish as well as English. The agency utilizes an interpreter language line to communicate with limited English speaking inmates.

Inmate PREA education is available in formats accessible to all inmates, including those who are deaf. If the detainee is deaf or hard of hearing the facility would provide a reasonable accommodation by requesting a qualified interpreter. The facility would follow guidelines in OPS.200.0004, Policy Statement – Inmates with a Hearing Disability. The facility has Video Remote Interpreting Equipment at MTC. If a detainee needs this accommodation they would have him transported to MTC.

Inmate PREA education is available in formats accessible to all inmates, including those who are visually impaired. If the detainee is visually impaired the facility would provide a reasonable accommodation as outlined in DPDS.200.002, Accommodations for Persons with

Disabilities, i.e. Braille Services, large print information. The blind individual would listen to the PREA video.

Inmate PREA education is available in formats accessible to all inmates, including those who are otherwise disabled. If the detainee has another disability that substantially limits a major life activity and this disability requires some type of reasonable accommodation to understand the PREA education information the facility would consider each case on a case by case basis. They would follow procedures as outlines in DPDS.200.0002, Accommodations for Persons with Disabilities.

Inmate PREA education is available in formats accessible to all inmates, including those who are limited in their reading skills. The facility has a lot of detainees with limited reading skills. If they let staff know that their reading skills are limited, staff would assist by reading the information on various forms to the detainee. The PREA education video helps for those who have limited reading skills. They would be handled per DPDS.200.0002, Accommodations for Persons with Disabilities.

The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats. The auditor observed this information readily available through posters that were posted throughout the facility.

Intake staff interviews confirm inmates are provided with information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment. The auditor was advised the facility has been providing PREA education to inmates for approximately a year and a half, and all inmates currently housed at the facility have received PREA education. Intake staff show all new intakes the Just Detention International PREA video. During the video, the intake staff walk around the room and observe the inmates to ensure they are paying attention. At the conclusion of the video, inmates are asked if they have any questions and staff answer any questions they may have. Intake staff acknowledged inmates typically receive this information the same day they arrive at the facility.

Inmate interviews confirmed new intakes receive PREA handouts and watch a PREA educational video during intake (typically the same day the inmate arrives at the facility). Inmates acknowledged they were made aware of their right not to be sexually abused or sexually harassed, how to report sexual abuse or sexual harassment, as well as their right not to be punished for reporting sexual abuse or sexual harassment. Many inmates also stated that PREA information is readily available to them through PREA posters that are posted throughout the facility.

Areas that Required Corrective Action:

During the audit, the auditor discovered Inmate PREA Education sessions were not being documented as required under 115.33.

Corrective Action Plan:

The facility shall have inmates sign an acknowledgement of receipt of the PREA education sessions. The auditor will request a random sample of such documentation once per month, until the auditor has determined the facility meets this standard.

Final Determination:

Prior to the completion of the Corrective Action Period, the auditor was provided with a monthly spreadsheet which tracked all new intakes. The auditor randomly selected inmates from this spreadsheet and requested documentation of their PREA education sessions. The auditor was provided with consistent documentation over a three month period. Based on this information, the auditor has determined the facility is now in compliance with standard 115.33.

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

The agency maintains documentation showing that investigators have completed their required training. The auditor was provided with DPSCS Employee Training Report showing 42 IID investigators have received the required PREA training.

Investigative staff interviews confirm all investigators received basic training in conducting sexual abuse investigations during the police academy. In addition to this training, all investigators received a formal block of training specifically for PREA investigations. The auditor was advised this was an all day class and include topics, such as:

*Techniques for interviewing sexual abuse victims

*Proper use of Miranda and Garrity warnings

*Sexual abuse evidence collection in confinement settings

*The criteria and evidence required to substantiate a case for administrative or prosecution referral

Investigators also confirmed that agency policy requires allegations of sexual abuse or sexual harassment are referred to IID, unless the allegation does not involve potentially criminal behavior. IID investigators have police powers and the legal authority to conduct criminal investigations.

115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

Auditor Discussion

DPSCS 020.0026 PREA Compliance is the policy related to the training of medical and mental health practitioners who work regularly in its facilities. In addition, the auditor viewed the Medical Contractor's Policy and training guidelines for medical and mental health staff.

The auditor was advised that 107 medical and mental health care practitioners who work regularly at this facility who received the training required by the agency. This is 100% of all medical and mental health staff who work regularly at this facility.

The auditor reviewed documentation of a random sample of PREA training files for medical/mental health staff and determined medical/mental health staff are receiving PREA training and are documenting the training sessions.

Medical/mental health staff interviews confirmed forensic medical examinations would be conducted at an outside hospital (Mercy Hospital). Medical/mental health staff confirmed training is provided at orientation, as well as during semi-annual training. Training consists of both classroom and online training. Training topics include:

*How to detect and assess signs of sexual abuse and sexual harassment; (Medial staff would look for inmates who are withdrawn, changes in eating patterns, changes in sleeping patterns, inmates making requests to see medical for unrelated incidents, inmates being very sexually withdrawn or being very sexually promiscuous).

*How to preserve physical evidence of sexual abuse; (Medical staff would tell the inmate not to brush teeth, not to shower, not to change clothes, not to defecate, not to urinate).

*How to respond effectively and professionally to victims of sexual abuse and sexual harassment; (Medical staff would treat the inmate with dignity and respect, while being attentive to the inmate, and providing privacy).

*How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. (Medical staff would report to their immediate supervisor, PREA Compliance Manager, mental health, and the Infectious Disease Department).

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.200.0005 Assessment for Risk of Sexual Victimization and Abusiveness states:

The PREA Coordinator shall ensure that a screening instrument is used to objectively assess an inmate's risk of:

- 1) Sexual victimization that, at a minimum, considers:
- a) The presence of a mental, physical, or developmental disability;
- b) The age of the inmate;
- c) The physical build of the inmate;
- d) Previous incarceration;
- e) If the inmate's criminal history was exclusively nonviolent;
- f) Prior convictions for sex offenses against an adult or child;

g) If the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

- h) History of sexual victimization;
- i) The inmate's own perception of vulnerability; and
- j) If the inmate is detained solely for civil immigration purposes; and
- 2) Being sexually abusive that, at a minimum, considers:
- a) Previous acts of sexual abuse;
- b) Prior convictions for violence or sexual abuse; and
- c) History of institutional violence or sexual abuse.

OSPS.200.0005 Assessment for Risk of Sexual Victimization and Abusiveness states: The PREA Coordinator shall ensure that procedures for using the approved screening instrument protocol at a minimum, require:

That each managing official designate sufficient intake, custody, or case management staff to assess each inmate for risk of sexual victimization or potential for abusiveness within 72 hours of arrival at a facility."

The auditor was advised there were 4,420 inmates entering the facility (either through intake of transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility.

The risk assessment is conducted using an objective screening instrument. A review of the instrument indicates four or more affirmative responses of the questions pertaining to victimization, would classify the inmate as "At Risk of Victimization." Three or more affirmative responses of the questions pertaining to abusiveness, would classify the inmate as "At Risk of Abusiveness."

OSPS.200.0005 Assessment for Risk of Sexual Victimization and Abusiveness states: The PREA Coordinator shall ensure that procedures for using the approved screening instrument protocol at a minimum, require:

Case Management staff re-assess each inmate within 30 days of the inmate's arrival at the facility for risk of victimization or potential for abusiveness based upon additional, relevant

information received by the facility since the initial screening.

The auditor was advised there were 4,174 inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake. The auditor was advised this is 94.4% of all intakes within the past 12 months.

OSPS.200.0005 Assessment for Risk of Sexual Victimization and Abusiveness states: The PREA Coordinator shall ensure that procedures for using the approved screening instrument protocol at a minimum, require:

An inmate's risk level to be re-assessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or potential for abusiveness.

OSPS.200.0005 Assessment for Risk of Sexual Victimization and Abusiveness states: The PREA Coordinator shall ensure that procedures for using the approved screening instrument protocol shall at a minimum, require:

That an inmate is not disciplined for refusing to answer or not disclosing complete information in response to screening questions related to:

a) The presence of a mental, physical, or developmental disability;

b) The inmate being or perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

c) Previous sexual victimization; or

d) The inmate's own perception of vulnerability

Screening staff advised inmates are screened upon admission their facility or transfer from another facility for risk of sexual abuse victimization or sexual abusiveness toward other inmates. Screening staff advised inmates are screened within 72 hours of intake (typically, the same day the inmate arrives at the facility). Screening staff advised the screening instrument consists of approximately 18-20 "yes" or "no" questions that are used to assess each inmates risk level of victimization, as well as their risk level of abusiveness. Screening staff advised inmates are reassessed within 30 days of intake, and are also reassessed as needed, due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The auditor was advised intake staff conduct the initial screening and case management conducts the 30 day screenings. Only Case Management, intake screening staff, and the PREA Compliance Manager have access to the information related to the risk screenings.

During interviews with screening staff, some staff indicated inmates who refused to answer questions pertaining to the risk screening, would receive an infraction. The auditor confirmed the policy prohibits disciplining inmates for refusing to answer questions during the risk screening. The auditor required the facility provide refresher training to screening staff on this topic. Immediately after the onsite audit, the auditor was provided with a refresher training memo that was distributed and discussed with all staff responsible for risk screening. In addition, the auditor was provided with staff acknowledgement sheets, documenting their receipt and understanding of the information. Since this minor issue was immediately

addressed, the auditor has determined the facility meets this part of the standard.

Area(s) that Required Corrective Action:

Random inmate interviews indicate many inmates have received their 72 hour screening; however, a large number of inmates are have not received their 30 day rescreening. The auditor reviewed a sample of screenings and confirmed the facility is not consistently conducing 72 hour and 30 day screenings. The auditor has determined the facility does not currently meet this standard and will require corrective action to become compliant.

Corrective Action Plan:

As part of the Corrective Action Plan, the auditor is requiring the facility to screen all new intakes within 72 hours of intake, and rescreen them within 30 days of intake. The auditor is requiring the facility track all new intakes received after the Interim Report, until the completion of the Corrective Action Period. The auditor will require the inmate's name, date of intake, date of 72 hour screening, and date of 30 day screening. This information can be tracked in a spreadsheet or similar method. The auditor is requiring the facility provide this information to him every 30 days. After the auditor receives this information, the auditor will randomly select a sample of inmates, as well as their risk screening documentation, and review this information to determine compliance with the standard.

Final Determination:

Prior to the completion of the Corrective Action Period, the auditor was provided with a monthly spreadsheet that tracked new intakes. The auditor randomly selected inmates from this spreadsheet and requested documentation of their 72 hour and 30 day risk screenings. The auditor sampled documentation over a three month period. The officer reviewed this documentation, and determined the risk screenings are being conducted within the required timelines on a consistent basis. Based on this information, the auditor has determined the facility is now in compliance with 115.41.

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.200.0005 Assessment for Risk of Sexual Victimization and Abusiveness states: The PREA Coordinator shall ensure that the following issues are appropriately addressed in procedures for using information obtained during screening required under this directive: Screening information shall be considered:

a) When making decisions related to housing, bed, work, education, and program assignments with the goal of separating inmates who are determined to be at high risk of being sexually victimized from inmates who are determined to be at high risk of being sexually abusive.

b) When making individualized determinations as how to ensure the safety of each inmate.c) When deciding to assign a transgender or intersex inmate to a facility for male or female inmates and in other housing and programming assignments and, on a case by case basis, determining if the placement or assignment:

- I) Ensures the inmate's health and safety; and
- ii) Presents management or security problems

Staff interviews indicate transgender/intersex inmates are rarely housed at the facility; however, if a transgender inmate was accepted at the facility, they would be asked where they felt more comfortable being housed. If the transgender/intersex inmate felt comfortable housed in general population, they would be housed in the front of the dorm, near the officer's station. These inmates would receive the same privileges as all other inmates. Staff acknowledged they would consider:

a. Whether the placement will ensure the inmate's health and safety.

b. Whether the placement would present management or security problems.

Staff acknowledged placement and programming assignments for each transgender or intersex inmate are reassessed twice a year, and a transgender or intersex inmates' views with respect to his or her own safety are given serious consideration in placement and programming assignments. Upon request, transgender and intersex inmates would be given the opportunity to shower separately. Staff advised the housing unit officer would clear out the shower area and would allow them to shower alone.

Interviews with staff responsible for risk screening indicate staff were unfamiliar with the agency policy prohibiting the placement of inmates at risk of victimization in involuntary segregated housing. Staff also indicated transgender inmates would be housed in involuntary segregated housing (staff indicated they rarely have transgender inmates at the facility). Immediately after the onsite audit, screening staff received refresher training on this topic. The auditor was provided with a memo that was distributed and reviewed with screening staff. In addition, the auditor was provided with signed staff acknowledgment sheets, documenting receipt and understanding of this information. Since this minor issue was immediately addressed, the auditor has determined the facility meets this section of the standard.

At the time of the onsite audit, there were no transgender or intersex inmates housed at the facility.

Area that Required Corrective Action:

Staff interviews indicate staff were not keeping track of, and separating, inmates identified as "At Risk for Victimization" from those inmates identified as "At Risk for Abusiveness."

Corrective Action Plan:

The auditor is requiring the facility identify and track all inmates identified as "At Risk for Victimization," and those inmates identified as "At Risk for Abusiveness." The auditor is requiring the facility designate certain housing units for inmates identified as "At Risk for Victimization," and other housing units for inmates identified as "At Risk for Abusiveness." The auditor is requiring the facility provide a monthly report of all such identified inmates, as well as their housing units. The report shall be provided monthly until the auditor has determined the facility is compliant with the standard.

Final Determination:

Prior to the completion of the Corrective Action Period, the auditor was provided with a list of all inmates identified as "At Risk for Victimization," and those inmates identified as "At Risk for Abusiveness. In addition, the auditor was provided with the housing locations for these inmates, as well as a memo outlining which housing units are designated for such inmates. The auditor reviewed the information provided and determined all inmates identified as "At Risk for Abusiveness. Based on this information, the auditor has determined the facility is now in compliance with standard 115.42.

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.200.0005 Assessment for Risk of Sexual Victimization and Abusiveness states: Placement of an inmate in special confinement housing shall be in accord with provisions for special confinement housing established in the Case Management Manual.

The auditor was advised that no inmates who were at risk of sexual victimization were held in involuntary segregated housing.

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

Administrative staff interviews indicated agency policy prohibits placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are no available alternative means of separation from potential abusers. If an inmate was placed in involuntary segregated housing for this reason, they would only be housed in involuntary segregated housing until alternative means of separation from likely abusers can be arranged. This would be a minimal amount of time (no more than 30 days).

115.51 Inmate reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

DPSDS Detainee Handbook states:

A detainee/inmate should report any incidents of sexual abuse to a staff member or the medical/mental healthcare providers immediately. A sexual assault PREA hotline, 410-585-3177, is also available to assist inmates who wish to report incidents of sexual abuse. The PREA hotline is available 24 hours a day, 7 days a week. The PREA hotline is operated by a victim advocacy organization that provides services to sexual assault victims. Any member of the general public may also report any incidents of alleged sexual assault by calling the PREA Hotline 410-585-3177. In addition to these reporting methods, contact information is listed in the Detainee Handbook for:

- 1) Rape Abuse and Incest National Network (RAINN).
- 2) National Sexual Abuse Hotline.
- 3) Maryland Coalition Against Sexual Assault (MCASA).

DPSCS does not hold inmates/detainees solely for civil immigration purposes, therefore, 115.51 (b)-2 is not applicable.

OSPS.050.0030 Sexual Misconduct, mandates that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.

BPC.020.0026 PREA Compliance states:

Staff can privately report sexual abuse and sexual harassment of inmates/detainees by calling the Employee Hotline (410-585-3288) which is posted throughout the facility. Bulletin Boards and the information are disseminated intermittently during roll call and in-service training.

Staff and inmate interviews confirm both staff and inmates were knowledgeable that they could report sexual abuse anonymously through the PREA hotline. Both staff and inmates confirmed inmates are allowed to report verbally, in writing, anonymously, or through a third-party. Staff confirmed they would document verbal reports immediately.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

The agency has does not have an administrative procedure for dealing with inmate grievances regarding sexual abuse; therefore, they are exempt from this standard.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse.

DPSCS Detainee Handbook provides mailing addresses to the following organizations:

- 1) Rape Abuse and Incest National Network (RAINN).
- 2) National Sexual Abuse Hotline.
- 3) Maryland Coalition Against Sexual Assault.

Contact Information to Foreign Consulates/Embassies is also listed in the Detainee Handbook.

Inmates may report confidentially by calling the hotline or by writing one of the agencies in the Detainee Handbook.

The agency has attempted to enter into a formal MOU with Maryland Coalition Against Sexual Assault (MCASA) for victim advocate services. The auditor was provided with email correspondence as well as a draft MOU. The auditor spoke with a representative with MCASA and discovered MCASA would work as a liaison between the agency and local rape crisis centers. The representative stated if an inmate were sexually abused, the agency would contact MCASA, and they would assist in finding a victim advocate from a local rape crisis center. The representative advised these services would be provided even without a signed MOU.

Inmates are notified to the extent to which such communications are monitored. This information is provided in the DPDS Detainee Handbook.

The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

During the onsite audit, the auditor tested the PREA hotline and discovered that when inmates report using the hotline, inmates are informed on the limits of confidentiality and are informed on what information to provide in a recorded message.

Inmate interviews confirmed inmates are provided with mailing addresses and phone numbers to outside victim advocate services.

115.54 Third-party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

Third-party reports can be made via the PREA Hotline and/or the IID Complaint Number. The auditor found the IID Complaint Number listed on the agency website. The auditor also observed the PREA Hotline number posted throughout the facility.

The agency website states:

The Department's Internal Investigative Division is in charge of all PREA related investigations and will accept complaints from any concerned individual.

Policy also indicates third party reports would be accepted and investigated.

Both staff and inmate interviews confirm inmates are allowed to report through a third-party.

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency.

BPC.020.0026 PREA Compliance states:

Any staff member who fails to report or take immediate action regarding such incidents, or intentionally inflicts humiliation or retaliation toward the victim or informant or trivializes a report of alleged sexual crimes, sexual harassment, or sexual misconduct shall be subject to the appropriate level or discipline, up to and including termination.

OSPS.050.0030 Sexual Misconduct states:

An employee is subject to disciplinary action, up to and including termination of employment with the Department if it is determined that the employee:

a) Except under exigent circumstances, did not perform responsibilities established under this directive; or

b) Neglected or violated other duties or responsibilities that contributed to an incident of sexual misconduct.

OSPS.050.0030 Sexual Misconduct states:

Information concerning a complaint of alleged sexual misconduct is confidential and may only be available to individuals who have an established role in the reporting, processing, investigating, and resolving the alleged sexual misconduct and immediate and continued care of the victim.

Staff interviews confirm staff were well aware that the agency requires all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Medical and Mental Health staff interviews confirm that at the initiation of services to an inmate, medical and mental health staff disclose the limitations of confidentiality and their duty to report. Medical and mental health staff confirmed they are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official, immediately upon learning of it.

115.62 Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

BPC.020.0026 PREA Compliance states:

Once staff have been made aware that an inmate/detainee is at risk of imminent sexual abuse or if an incident of sexual assault, sexual abuse, or staff sexual misconduct has occurred, the following shall take place:

a) Immediate action shall take place to ensure the safety of the victim and/or reporter and the first responder must separate the alleged victim and abuser. Should the first responder be non-security staff, he/she shall request that the alleged victim not take any action that could destroy physical evidence and immediately notify security staff.

b) Staff shall ensure the preservation of any such evidence by securing the scene, the clothing and/or linen of the victim and perpetrator which may be pertinent to an investigation.

c) The perpetrator suspected of committing a sexual crime shall be managed in accordance with established policy and procedures pending a complete investigation and disciplinary process, inclusive of criminal charges, if applicable.

d) In the case of rape or sexual offenses where evidence may be available, the victim and perpetrator (if known) shall not be allowed to shower or wash in any manner, brush teeth, urinate, defecate, drink, or eat until seen by medical/forensic examination staff.

e) No attempt shall be made to clean or treat the victim unless the injuries are such that not treating them would cause deterioration of the victim's medical condition.

f) Medical staff will ensure all written documentation is completed accurately and maintained in the inmate's/detainees' medical file.

g) Medical staff shall make a mental health referral for immediate evaluation and counseling.

h) The facility shall offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for abuse.

I) The facility shall consider whether to require the offending inmate/detainee to participate in such interventions as a condition of access to programming or other benefits.

In the past 12 months, there have not been any instances were the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.

Interviews with the PREA Coordinator, Warden, and Random Staff confirm that if staff determined that an inmate was subject to a substantial risk of imminent sexual abuse, staff would immediately remove the alleged victim from that housing unit. Staff would house the alleged victim in the least restrictive housing unit as possible, while ensuring the inmate's safety. Staff would communicate with the alleged victim and ensure they are not at risk of sexual abuse in their new housing unit.

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

BPC.020.0026 PREA Compliance states:

If an inmate/detainee alleges sexual abuse occurred while confined at another facility, the Jail Administrator or Designee must notify the head of the facility or designee where the sexual abuse is alleged to have occurred no later than 72 hours after receiving the allegation.

- a) The facility will document that it provided such notification within 72 hours; and,
- b) The facility will initiate an investigation of the allegation.
- c) Allegations received from other facilities are investigated.

In the past 12 months, there have not been any allegations received that an inmate was abused while confined at another facility.

In the past 12 months, there have not been any allegations of sexual abuse the facility received from other facilities.

Interviews with the Agency Head and Warden indicate if the facility receives allegations of sexual abuse that alleged occurred at another facility, the PREA Compliance Manager would notify IID and the Agency Head of the facility where the abuse alleged occurred. The auditor was advised that if the facility received allegations from an outside facility, the allegation would be immediately referred to IID for investigation.

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

First responder policies can be found in the following procedures:

- 1) OSPS.050.0030 Sexual Misconduct
- 2) OSPS.200.0004 Inmate Sexual Misconduct
- 3) Sex Assault Treatment Policy
- 4) Sexual Assault Procedure-Medical

OSPS.050.0030 Sexual Misconduct states:

A supervisor, manager, shift commander, or head of the unit receiving a complaint under section .05E or 05F(2) of this directive shall immediately:

a) If sexual misconduct is actively taking place, dispatch staff:

- I) To stop the alleged incident;
- ii) Safeguard the victim from further harm;
- iii) If applicable, arrange for emergency medical services;
- iv) Detain the alleged perpetrator; and
- v) Preserve evidence and the scene of the alleged incident;

b) If the sexual conduct is not actively occurring, but the timeframe is such that there may be physical evidence at the scene or available from the victim or alleged perpetrator, dispatch staff to:

- I) Preserve evidence at the scene;
- ii) Detain the alleged perpetrator and prevent destruction of physical evidence;

iii) Contact the victim and instruct the victim on the need to protect against the destruction of physical evidence; and refer the victim for appropriate medical and mental health follow up services.

BPC.020.0026 PREA Compliance states:

In the case or sexual offenses where evidence may be available, the victim and perpetrator (if known) shall not be allowed to shower or wash in any manner, brush teeth, urinate, defecate, drink, or eat until seen by medical/forensic examination staff.

In the past 12 months, there were five allegations of sexual abuse received.

Of these allegations of sexual abuse in the past 12 months, the first security staff member to respond to the report separated the alleged victim and abuser on all five occasions.

In the past 12 months, there was one allegation where staff were notified within a time period that still allowed for the collection of physical evidence. On this occasion, the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence.

Of the allegations that an inmate was sexually abused made in the past 12 months, there have not been any instances where a non-security staff member was the first responder.

Staff interviews indicate staff were aware to immediately separate the alleged victim from the

alleged abuser and ensure the safety of the alleged victim. Staff were knowledgeable on how to preserve physical evidence on the alleged victim and the abuser. The auditor was advised staff would ensure both inmates do not do take any actions that could destroy evidence, such as: washing, brushing teeth, changing clothes, or using the restroom.

115.65 Coordinated response

Auditor Overall Determination: Meets Standard

Auditor Discussion

During the interview with the Warden, the auditor confirmed the facility has its own coordinated response plan that coordinates actions among first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse.

BPC.020.0026 PREA Compliance outlines the coordinated response actions to an incident of sexual abuse. A review of this facility policy indicates responsibilities are clearly outlined.

115.66 Preservation of ability to protect inmates from contact with abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

AFSCME and Teamsters Union MOU- The Agency is apart of a collective bargaining agreement through the AFSCME and Teamsters Union. The auditor was provided with an MOU which states:

The employer retains the sole and exclusive authority for the management of its operations and may exercise all rights, powers, duties, authority and responsibilities conferred upon and invested to it by all laws including, but not limited to, the Collective Bargaining Law (Title 3, State Personnel and Pensions Article). It is agreed by the parties that any section of this MOU that conflicts with current law, in particular the Collective Bargaining Law (title 3, State Personnel and Pensions Article), can be changed by management after negotiations with the Union, to the extent required by Article 32 (Mid Contract Negotiations). It is understood and agreed by the parties that the Employer possesses all other power, duty and right to operate and manage its departments, agencies and programs and carry out constitutional, statutory and administrative policy mandates and goals.

Md. State Personnel and Pensions Code 9-302 Management Rights states:

The State, through its appropriate officers and employees, has the right to:

(1) (I) determine the mission, budget, organization, numbers, types and grades of employees assigned, the work projects, tours of duty, methods, means, and personnel by which its operations are to be conducted, technology needed, internal security practices, and relocation of its facilities; and

(ii) maintain and improve the efficiency and effectiveness of governmental operations;

(2) determine the:

(I) services to be rendered, operations to be performed, and technology to be utilized; and(ii) overall methods, processes, means, and classes of work or personnel by whichgovernmental operations are to be conducted;

(3) hire, direct, supervise, and assign employees;

(4) (I) promote, demote, discipline, discharge, retain, and law off employees; and

(ii) terminate employment because of lack of funds, lack of work, under conditions where the employer determines continued work would be inefficient or nonproductive, or for other legitimate reasons;

(5) set the qualifications of employees for appointment and promotion, and set standards of conduct;

(6) promulgate State or Department rules, regulations, or procedures;

(7) provide a system of merit employment according to the standard of business efficiency; and

(8) take actions, not otherwise specified in this section to carry out the mission of the employer.

A review of the Agency's collective bargaining agreement as well as Md. Code, indicates the Agency would be 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. Such an agreement would be a direct conflict with Md. Code.

During interviews with the Agency Head, the auditor was confirmed the agency has entered into or renewed collective bargaining since August 20, 2012. The auditor was advised that the agreement permits the agency to remove alleged staff sexual abusers from contact with any inmate pending an investigation or a determination of whether and to what extent discipline is warranted.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.050.0030 Sexual Misconduct states:

An individual (staff or inmate) reporting, participating in the investigation or resolution of, or who is a victim of alleged sexual misconduct is monitored for a minimum of 90 days from the date the incident was reported to detect actual, or feared, retaliation and if retaliation is identified or feared take action to stop the actual or feared retaliation that may include:

- a) Application of available medical or mental health services or counseling;
- b) Changes to inmate housing assignments and staff work assignments; and
- c) Continued monitoring as deemed appropriate.

The PREA Compliance Manager is the designated staff member charged with monitoring retaliation.

In the past 12 months, there have been no instances or retaliation reported.

Staff interviews confirm the PREA Compliance Manager is the designated staff member charged with monitoring retaliation. The PREA Compliance Manager ensures both inmates and staff who report sexual abuse, or are a witness to sexual abuse. are aware of the policy pertaining to retaliation. The PREA Compliance Manager monitors inmates and staff who report sexual abuse or sexual harassment. She would initiate contact with the inmate and/or staff involved and let them know to report any retaliation they encounter. The PREA Compliance Manager would monitor many things, including; disciplinary reports, housing changes, program changes, negative performance reviews, and reassignments of staff. The PREA Compliance Manager would conduct periodic status checks and would look to see if staff have been denied leave requests or have been assigned a less desirable post. If an inmate reported the abuse, the PREA Compliance Manager would speak with the inmate and ensure they were not being intimidated. She would also monitor to ensure the inmate is not being denied access to programs, visitation privileges, and/or being subjected to unnecessary searches. Interviews confirmed the PREA Compliance Manager would monitor for up to 90 days. If there was a concern that potential retaliation might occur, the PREA Compliance Manager would monitor as long as there was a need, and would monitor indefinitely, if necessary.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

BPC.020.0026 PREA Compliance states:

Information received from the intake screening will impact housing, job and programming assignments on a case-by-case basis. Individualized determinations will be made to ensure the safety of each inmate/detainee; including placing an inmate/detainee in special housing (protective custody and/or, administrative segregation) if no other means of separation from likely abusers is possible. However, at no time will a detainee be placed on involuntary segregation status because the inmate/detainee is at high risk of victimization.

Information received from the intake screening will impact housing, job and programming assignments on a case-by-case basis. Individualized determinations will be made to ensure the safety of each inmate/detainee; including placing an inmate/detainee in special housing (protective custody and/or, administrative segregation) if no other means of separation from likely abusers is possible. However, at no time will a detainee be placed in involuntary segregation status because the inmate/detainee is at high risk of victimization.

If involuntary housing is made, a review every 30 days is to be conducted to determine continuing need for separation from the general population.

In the past 12 months, there have not been any inmates who were held in involuntary segregated housing for risk of victimization or who have suffered from sexual abuse.

The Warden confirmed the agency has a policy prohibiting inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other areas, unless an assessment has determined there are no available alternative means of separation from potential abusers. The auditor was advised that if an inmate were housed in involuntary segregated housing for this reason, they would only be housed here for a minimal amount of time (no longer than 30 days). The auditor was advised the inmate would be moved out as soon as safe, lesser restrictive housing could be arranged. The Warden confirmed there have not been any inmates held in involuntary segregated housing within the past 12 months, for this reason.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The agency has the following policies related to criminal and administrative agency investigations:

- 1) IIU.110.0011 Investigating Sex Related Offenses.
- 2) OSPS.050.0030 Sexual Misconduct
- 3) OSPS.200.0040 Inmate Sexual Misconduct

Interviews with investigators confirmed that allegations of sexual abuse would be investigated immediately after receiving the allegation. Investigators confirmed anonymous and third-party reports would be investigated the same as all other reports. Investigators confirmed they received basic investigation training during the policy academy, as well as specialized training specific for PREA investigations provided by the agency. Training topics include; techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity Warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative or prosecution referral. Investigators were knowledgeable of the investigation process and stated they would collect clothing, photos, video footage, reports, witness statements, victim statements, suspect statements, as well as the SAFE kit. Credibility of the alleged victim, suspect, or witness would all be judged the same. Under no circumstance, would the investigator require the inmate to submit to a polygraph examination or truth-telling device as a condition for proceeding with the investigation. The entire investigation process is documented in the report, including a summary of the investigation, recommendations for charges, notifications, and evidence used to determine the conclusion of the investigation. Cases are referred for prosecution when the totality of the evidence shows beyond a reasonable doubt that a crime has been committed.

The auditor spent a half day at the agency's IID and reviewed all investigations for the facility's that were scheduled to be audited. A review of the investigation files indicates detailed reports are being written. The reports include the supporting evidence used to determine the conclusion of the investigation. The reports also document the date the notification was provided to the inmate. All investigations were prompt, thorough, and objective. Investigation records are electronically stored on a secured hard drive which only the Director of IID and one designee have access. These records are stored indefinitely.

115.72 Evidentiary standard for administrative investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

IIU.100.0011 Investigating Sex Related Offenses states:

Upon concluding an investigation involving an inmate as a victim of a sex related offense and based on a preponderance of evidence, the investigator shall advise the victim inmate if the investigation resulted in the incident being determined to be:

a) Substantiated meaning an allegation that was investigated and determined to have occurred;

b) Unsubstantiated meaning an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred; or

c) Unfounded meaning an allegation was investigated and determined to not have occurred.

Interviews with investigative staff indicate investigators would use a preponderance of the evidence when determining whether or not an allegation of sexual abuse or sexual harassment is substantiated.

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

IIU.110.0011 Investigating Sex Related Offenses states:

Upon concluding an investigation involving an inmate as a victim of a sex related offense and based on a preponderance of evidence, the investigator shall advise the victim inmate if the investigation resulted in the incident being determined to be:

a) Substantiated meaning an allegation that was investigated and determined to have occurred;

b) Unsubstantiated meaning an allegation that was investigated and the investigation produced insufficient evidence to make a final determinations as to whether or not the event occurred; or

c) Unfounded meaning an allegation was investigated and determined to not have occurred. The investigator shall document victim notification under .05H(2) of this directive in the:

a) The name of the individual who notified the victim;

b) The date, time, and location that the victim was notified; and

c) How the victim was notified.

There has been one criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months.

Of the alleged sexual abuse investigations that were completed in the past 12 months, the inmate involved in the investigation mentioned above was notified, verbally or in writing, of the results of the investigation.

The auditor was advised there have not been any investigations completed by an outside agency within the past 12 months.

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

Following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. There have been no such notifications provided, due to the fact there have not been any substantiated or unsubstantiated allegations.

Interviews with the Warden and Investigative Staff confirmed IID staff are responsible for providing notifications for documenting the notification in the investigative report. A copy of this notification is also provided to the PREA Compliance Manager.

IIU.110.0011 Investigating Sex Related Offenses states:

If the incident involved an employee committing a sex related offense on an inmate and the incident was substantiated or unsubstantiated arrange for the inmate to be advised of the

following conditions involving the employee:

I) The employee is not assigned to the inmate's housing unit;

ii) The employee is no longer employed at the inmate's facility;

iii) If known, that the employee was indicted on a charged with sex related offense occurring at the facility;

iv) If known, that the employee is convicted of a charge related to a sex related offense occurring at the facility.

Following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

Staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

The disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.

In the past 12 months, there have not been any staff from the facility who have violated agency sexual abuse or sexual harassment policies.

115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.050.0030 Sexual Misconduct states:

An employee determined to have committed sexual misconduct is in violation of Department Standards of Conduct and is subject to:

a) A penalty under the Standards of Conduct, up to and including termination or employment with the Department;

- b) Criminal prosecution; and
- c) If applicable, notification of a relevant licensing authority.
- A contractor determined to have committed sexual misconduct is:
- a) Considered to be in violation of terms or conditions of a contract or other agreement establishing the relationship between the contractor and the Department or agency:
- b) Subject to sanctions according to provisions of the contract or agreement;
- c) Is subject to criminal prosecution; and
- d) If applicable, notification of a relevant licensing authority.

IIU.110.0011 Investigating Sex Related Offenses states:

If the incident involved an employee (including contractors and volunteers) committing a sex related offense on an inmate and the incident was substantiated or unsubstantiated arrange for the inmate to be advised of the following conditions involving the employee:

I) The employee is not assigned to the inmate's housing unit;

ii) The employee is no longer employed at the inmate's facility'

iii) If known, that the employee was indicted on a charge with a sex related offense occurring at the facility.

In the past 12 months, there have not been any contractors or volunteers who have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse or inmates.

During the interview with the Warden, the auditor was advised any volunteer or contractor who violated any of the agency's sexual abuse or sexual harassment policies would be terminated. The auditor was advised the facility has not encountered any examples of this within the past 12 months.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse.

Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.

In the past 12 months, there have not been any administrative and/or criminal findings of inmate-on-inmate sexual abuse that have occurred at the facility.

During an interview with the Warden, the auditor was advised following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse, the inmate would be subject to disciplinary sanctions, including disciplinary segregation, loss of privileges, and loss of good time credits. In addition, the inmate may face criminal prosecution. Sanctions are proportionate to the nature and circumstances of the abuses committed, the inmates' disciplinary histories, and the sanctions imposed for similar offenses by other inmates with similar histories. The disciplinary committee would follow a disciplinary matrix to determine sanctions. If an inmate has a mental disability or mental illness, this would also be considered when determining sanctions.

Interviews with mental health staff indicate psychology staff would provide therapy, counseling, or other intervention in order to address and correct the underlying reasons or motivations for sexual abuse. When these services are provided, staff would gauge an inmate's participation as a condition of access to programming or other benefits.

OSPS.200.0004 Inmate Sexual Misconduct states:

The Department does not:

1) Tolerate inmate on inmate sexual conduct; and

2) Consider alleged or actual consent as a defense to an allegation of inmate on inmate sexual conduct.

The agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to 115.41 are offered a follow-up meeting with a medical or mental health practitioner. The follow-up meeting is offered within 14 days of the intake screening.

In the past 12 months, 100 percent of the inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Medical and mental health staff maintain secondary materials documenting compliance with the above required services.

All prison inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to 115.41, are offered a follow-up meeting with a mental health practitioner. The follow-up meeting is offered within 14 days of the intake screening.

In the past 12 months, 100 percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner. Mental health staff maintain secondary materials documenting compliance with the above required services.

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

Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

During the onsite audit, the auditor reviewed a random sample of "PREA Follow-Up" forms used to document referrals for mental health evaluations. The auditor discovered these services are offered to all inmates that score to be "At Risk for Victimization" and "At Risk for Abusiveness."

Interviews with screening staff and mental health staff confirm inmates that score to be "At Risk for Victimization" and "At Risk for Abusiveness" are offered follow-up services with mental health staff. These services are offered the same day the risk screening is conducted, and are typically provided within one to two weeks. Medical and mental health staff confirmed they obtain informed consent prior to reporting about prior sexual victimization that did not occur in an institutional setting.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

The auditor was provided with referral logs during the pre-audit. These logs document the information listed above.

Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Interviews with medical and mental health staff confirm inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. This typically occurs immediately upon receiving the report. The auditor was advised the nature and score of these services are determined according to the professional judgement of the medical and mental health staff. Victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis. This information is provided by the Emergency Room nurse. If this information to the inmate within 24 hours of return to the facility.

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

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

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

Interviews with medical and mental health staff confirm medical and mental health staff provide follow-up services to inmate victims of sexual abuse. Once an allegation is reported, the inmate would be provided with stabilization treatment for injuries and would be sent out to the hospital for a forensic examination. Upon return to the facility, the facility medical staff would review the Emergency Room notes and the facility physician would evaluate the inmate. The inmate would be evaluated by facility medical staff again at 7, 14, and 30 days. Medical and mental health staff both confirmed that services they provide are consistent with community level care.

The facility does not house female offenders; therefore, the standards pertaining to female inmates are not applicable.

At the time of the audit, there were not any inmates housed who reported sexual abuse.

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

The facility attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. Interviews with mental health staff confirmed this practice.

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

In the past 12 months, there have not been any criminal and/or administrative investigations of alleged sexual abuse completed at the facility; therefore, there was no documentation of completed sexual abuse incident reviews.

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

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

The facility implements the recommendations for improvement or documents its reasons for not doing so.

Interviews with staff confirm the facility has an incident review team which includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. The review team considers whether or not the incident or allegation was motivated by race, ethnicity, gender identity, or gang affiliation. The review team also examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. Adequacy of staffing levels in that are during different shifts are reviewed along with video monitoring technology. The review team reviews the incident and determines whether or not there is a need to change policies and/or procedures. The auditor was advised these reviews would take place during the monthly Reduction in Violence Meetings.

115.87 Data collection

Auditor Overall Determination: Audited at Agency Level

Auditor Discussion

115.88 Data review for corrective action

Auditor Overall Determination: Audited at Agency Level

Auditor Discussion

115.89 Data storage, publication, and destruction

Auditor Overall Determination: Audited at Agency Level

Auditor Discussion

115.401 Frequency and scope of audits

Auditor Overall Determination: Meets Standard

Auditor Discussion

During the onsite audit the auditor was provided with access to, and toured, all areas of the facility inmates have access to. The auditor was provided with documentation related to the pre-audit questionnaire, and was provided with additional information while onsite. The auditor retained this documentation and has taken appropriate actions to ensure it is securely retained.

The auditor was provided with a office to conduct private, one-on-one interviews with both inmates and staff.

Six weeks prior to the onsite audit, the auditor provided the facility with an audit notification, containing the auditor's name and address. This notification was posted in all housing units and throughout the facility. The notification advised any inmate with relevant information to mail the auditor a detailed letter at least 10 days prior to the onsite audit. The auditor did not receive any correspondence before, or after, the onsite audit.

115.403 Audit contents and findings

Auditor Overall Determination: Audited at Agency Level

Auditor Discussion

115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Does the agency have a written policy mandating zero tolerance toward yes all forms of sexual abuse and sexual harassment?

Does the written policy outline the agency's approach to preventing, yes detecting, and responding to sexual abuse and sexual harassment?

115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility	yes
designated a PREA compliance manager? (N/A if agency operates only	
one facility.)	

Does the PREA compliance manager have sufficient time and authority yes to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)

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 yes 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.)

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, yes 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)

115.13 (a) Supervision and monitoring

Does the agency ensure that each facility has developed a staffing plan yes that provides for adequate levels of staffing and, where applicable, video

monitoring, to protect inmates against sexual abuse?

Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?	yes

Does the agency ensure that each facility's staffing plan takes into yes consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? Does the agency ensure that each facility's staffing plan takes into yes consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ?

115.13 (b) Supervision and monitoring

In circumstances where the staffing plan is not complied with, does the yes facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)

115.13 (c) Supervision and monitoring

In the past 12 months, has the facility, in consultation with the agency yes PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?

In the past 12 months, has the facility, in consultation with the agency yes PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?

In the past 12 months, has the facility, in consultation with the agency yes 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?

115.13 (d) Supervision and monitoring

Has the facility/agency implemented a policy and practice of having yes intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?

Is this policy and practice implemented for night shifts as well as day yes shifts?

Does the facility/agency have a policy prohibiting staff from alerting other yes staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?

115.14 (a) Youthful inmates

Does the facility place all youthful inmates in housing units that separate yes 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 yes sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)

In areas outside of housing units does the agency provide direct staff yes 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).)

115.14 (c) Youthful inmates

Does the agency make its best efforts to avoid placing youthful inmates yes in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)

Does the agency, while complying with this provision, allow youthful yes 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).)

Do youthful inmates have access to other programs and work yes opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)

115.15 (a) Limits to cross-gender viewing and searches

Does the facility always refrain from conducting any cross-gender strip or yes cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?

115.15 (b) Limits to cross-gender viewing and searches

Does the facility always refrain from conducting cross-gender pat-down na searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)

Does the facility always refrain from restricting female inmates' access to na regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.)

115.15 (c) Limits to cross-gender viewing and searches

Does the facility document all cross-gender strip searches and crossgender visual body cavity searches?

Does the facility document all cross-gender pat-down searches of female yes inmates?

115.15 (d) Limits to cross-gender viewing and searches

Does the facility implement a policy and practice that enables inmates to no 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?

Does the facility require staff of the opposite gender to announce their yes presence when entering an inmate housing unit?

115.15 (e) Limits to cross-gender viewing and searches

Does the facility always refrain from searching or physically examining yes transgender or intersex inmates for the sole purpose of determining the inmate's genital status?

If an inmate's genital status is unknown, does the facility determine yes 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?

115.15 (f) Limits to cross-gender viewing and searches

Does the facility/agency train security staff in how to conduct crossgender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?

Does the facility/agency train security staff in how to conduct searches of yes transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?

115.16 (a) Inmates with disabilities and inmates who are limited English proficient

Does the agency take appropriate steps to ensure that inmates with yes 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?

Does the agency take appropriate steps to ensure that inmates with yes 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?

Does the agency take appropriate steps to ensure that inmates with yes 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?

Does the agency take appropriate steps to ensure that inmates with yes 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?

Does the agency take appropriate steps to ensure that inmates with yes 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?

Does the agency take appropriate steps to ensure that inmates with yes 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.)

Do such steps include, when necessary, ensuring effective yes communication with inmates who are deaf or hard of hearing?

Do such steps include, when necessary, providing access to interpreters yes who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?

Does the agency ensure that written materials are provided in formats or yes through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?

Does the agency ensure that written materials are provided in formats or yes through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?

Does the agency ensure that written materials are provided in formats or yes through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?

115.16 (b) Inmates with disabilities and inmates who are limited English proficient

Does the agency take reasonable steps to ensure meaningful access to yes 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?

Do these steps include providing interpreters who can interpret yes effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?

115.16 (c) Inmates with disabilities and inmates who are limited English proficient

Does the agency always refrain from relying on inmate interpreters, yes 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?

115.17 (a) Hiring and promotion decisions

Does the agency prohibit the hiring or promotion of anyone who may yes have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?

Does the agency prohibit the hiring or promotion of anyone who may yes 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?

Does the agency prohibit the hiring or promotion of anyone who may yes 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 yes who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?

Does the agency prohibit the enlistment of services of any contractor yes 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?

Does the agency prohibit the enlistment of services of any contractor yes 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?

115.17 (b) Hiring and promotion decisions

Does the agency consider any incidents of sexual harassment in yes determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?

115.17 (c) Hiring and promotion decisions

Before hiring new employees who may have contact with inmates, does yes the agency: perform a criminal background records check?

Before hiring new employees who may have contact with inmates, does yes 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?

115.17 (d) Hiring and promotion decisions

Does the agency perform a criminal background records check before yes enlisting the services of any contractor who may have contact with inmates?

115.17 (e) Hiring and promotion decisions

Does the agency either conduct criminal background records checks at yes 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?

115.17 (f) Hiring and promotion decisions

Does the agency ask all applicants and employees who may have yes contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?

Does the agency ask all applicants and employees who may have yes 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?

Does the agency impose upon employees a continuing affirmative duty yes to disclose any such misconduct?

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 yes 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.)

115.18 (a) Upgrades to facilities and technologies

If the agency designed or acquired any new facility or planned any yes 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.)

115.18 (b) Upgrades to facilities and technologies

If the agency installed or updated a video monitoring system, electronic yes 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.)

115.21 (a) Evidence protocol and forensic medical examinations

If the agency is responsible for investigating allegations of sexual abuse, yes 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.)

115.21 (b) Evidence protocol and forensic medical examinations

Is this protocol developmentally appropriate for youth where applicable? yes (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)

Is this protocol, as appropriate, adapted from or otherwise based on the yes 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.)

115.21 (c) Evidence protocol and forensic medical examinations

Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d) Evidence protocol and forensic medical examinations

Does the agency attempt to make available to the victim a victim yes advocate from a rape crisis center?

If a rape crisis center is not available to provide victim advocate services, yes does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?

Has the agency documented its efforts to secure services from rape yes crisis centers?

115.21 (e) Evidence protocol and forensic medical examinations

As requested by the victim, does the victim advocate, qualified agency yes staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?

As requested by the victim, does this person provide emotional support, yes crisis intervention, information, and referrals?

115.21 (f) Evidence protocol and forensic medical examinations

If the agency itself is not responsible for investigating allegations of na sexual abuse, has the agency requested that the investigating entity 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.)

115.21 (h) Evidence protocol and forensic medical examinations

If the agency uses a qualified agency staff member or a qualified na 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.)

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, na does such publication 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).)

115.31 (a) Employee training

Does the agency train all employees who may have contact with inmates yes on its zero-tolerance policy for sexual abuse and sexual harassment?

Does the agency train all employees who may have contact with inmates yes on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?

Does the agency train all employees who may have contact with inmates yes on inmates' right to be free from sexual abuse and sexual harassment

Does the agency train all employees who may have contact with inmates yes on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?

Does the agency train all employees who may have contact with inmates yes on the dynamics of sexual abuse and sexual harassment in confinement?

Does the agency train all employees who may have contact with inmates yes on the common reactions of sexual abuse and sexual harassment victims?

Does the agency train all employees who may have contact with inmates yes on how to detect and respond to signs of threatened and actual sexual abuse?

Does the agency train all employees who may have contact with inmates yes on how to avoid inappropriate relationships with inmates?

Does the agency train all employees who may have contact with inmates yes on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?

Does the agency train all employees who may have contact with inmates yes on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?

115.31 (b) Employee training

Is such training tailored to the gender of the inmates at the employee's yes facility?

Have employees received additional training if reassigned from a facility yes that houses only male inmates to a facility that houses only female inmates, or vice versa?

115.31 (c) Employee training

Have all current employees who may have contact with inmates received yes such training?

Does the agency provide each employee with refresher training every yes two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?

In years in which an employee does not receive refresher training, does yes the agency provide refresher information on current sexual abuse and sexual harassment policies?

115.31 (d) Employee training

Does the agency document, through employee signature or electronic yes verification, that employees understand the training they have received?

115.32 (a) Volunteer and contractor training

Has the agency ensured that all volunteers and contractors who have yes 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?

115.32 (b) Volunteer and contractor training

Have all volunteers and contractors who have contact with inmates been yes 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)?

115.32 (c) Volunteer and contractor training

Does the agency maintain documentation confirming that volunteers and yes contractors understand the training they have received?

115.33 (a) Inmate education

During intake, do inmates receive information explaining the agency's yes zero-tolerance policy regarding sexual abuse and sexual harassment?

During intake, do inmates receive information explaining how to report yes incidents or suspicions of sexual abuse or sexual harassment?

115.33 (b) Inmate education

Within 30 days of intake, does the agency provide comprehensiveyeseducation to inmates either in person or through video regarding: Theirrights to be free from sexual abuse and sexual harassment?

Within 30 days of intake, does the agency provide comprehensive yes education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?

Within 30 days of intake, does the agency provide comprehensiveyeseducation to inmates either in person or through video regarding:Agency policies and procedures for responding to such incidents?

115.33 (c) Inmate education

Have all inmates received such education?	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	yes
from those of the previous facility?	

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 yes inmates including those who are otherwise disabled?

Does the agency provide inmate education in formats accessible to all yes inmates including those who have limited reading skills?

115.33 (e) Inmate education

Does the agency maintain documentation of inmate participation in these no education sessions?

115.33 (f) Inmate education

In addition to providing such education, does the agency ensure that key yes information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?

115.34 (a) Specialized training: Investigations

In addition to the general training provided to all employees pursuant to yes §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)

115.34 (b) Specialized training: Investigations

Does this specialized training include techniques for interviewing sexual yes abuse victims? (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 proper use of Miranda and Garrity yes 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 yes confinement settings? (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 the criteria and evidence required yes 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).)

115.34 (c) Specialized training: Investigations

Does the agency maintain documentation that agency investigators have yes 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).)

115.35 (a) Specialized training: Medical and mental health care

Does the agency ensure that all full- and part-time medical and mental yes 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?

Does the agency ensure that all full- and part-time medical and mental yes health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?

Does the agency ensure that all full- and part-time medical and mental yes 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?

Does the agency ensure that all full- and part-time medical and mental yes health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?

115.35 (b) Specialized training: Medical and mental health care

If medical staff employed by the agency conduct forensic examinations, na 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.)

115.35 (c) Specialized training: Medical and mental health care

Does the agency maintain documentation that medical and mental	yes
health practitioners have received the training referenced in this	
standard either from the agency or elsewhere?	

115.35 (d) Specialized training: Medical and mental health care

Do medical and mental health care practitioners employed by the	yes
agency also receive training mandated for employees by §115.31?	

Do medical and mental health care practitioners contracted by and	yes
volunteering for the agency also receive training mandated for	
contractors and volunteers by §115.32?	

115.41 (a) Screening for risk of victimization and abusiveness

Are all inmates assessed during an intake screening for their risk of	yes
being sexually abused by other inmates or sexually abusive toward other	
inmates?	

Are all inmates assessed upon transfer to another facility for their risk of yes being sexually abused by other inmates or sexually abusive toward other inmates?

115.41 (b) Screening for risk of victimization and abusiveness

Do intake screenings ordinarily take place within 72 hours of arrival at yes the facility?

115.41 (c) Screening for risk of victimization and abusiveness

Are all PREA screening assessments conducted using an objective yes screening instrument?

115.41 (d) Screening for risk of victimization and abusiveness

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (2) The age of the inmate?

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?

Does the intake screening consider, at a minimum, the following criteria yes 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)?

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?

Does the intake screening consider, at a minimum, the following criteria yes to assess inmates for risk of sexual victimization: (10) 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 yes PREA risk screening consider, when known to the agency: prior acts of sexual abuse?

In assessing inmates for risk of being sexually abusive, does the initial yes PREA risk screening consider, when known to the agency: prior convictions for violent offenses?

In assessing inmates for risk of being sexually abusive, does the initial yes PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?

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 no 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?

115.41 (g) Screening for risk of victimization and abusiveness

Does the facility reassess an inmate's risk level when warranted due to yes a: Referral?

Does the facility reassess an inmate's risk level when warranted due to yes a: Request?

Does the facility reassess an inmate's risk level when warranted due to yes a: Incident of sexual abuse?

Does the facility reassess an inmate's risk level when warranted due to yes a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?

115.41 (h) Screening for risk of victimization and abusiveness

Is it the case that inmates are not ever disciplined for refusing to answer, yes 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?

115.41 (i) Screening for risk of victimization and abusiveness

Has the agency implemented appropriate controls on the dissemination yes within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?

115.42 (a) Use of screening information

Does the agency use information from the risk screening required by § no 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?

Does the agency use information from the risk screening required by § no 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?

Does the agency use information from the risk screening required by § no 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?

Does the agency use information from the risk screening required by § no 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?

Does the agency use information from the risk screening required by § no 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?

115.42 (b) Use of screening information

Does the agency make individualized determinations about how to no ensure the safety of each inmate?

115.42 (c) Use of screening information

When deciding whether to assign a transgender or intersex inmate to a yes facility for male or female inmates, does the agency consider on a caseby-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)?

When making housing or other program assignments for transgender or yes intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?

115.42 (d) Use of screening information

Are placement and programming assignments for each transgender or yes intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?

115.42 (e) Use of screening information

Are each transgender or intersex inmate's own views with respect to his yes or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?

115.42 (f) Use of screening information

Are transgender and intersex inmates given the opportunity to shower yes separately from other inmates?

115.42 (g) Use of screening information

Unless placement is in a dedicated facility, unit, or wing established in yes 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?

Unless placement is in a dedicated facility, unit, or wing established in yes 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?

Unless placement is in a dedicated facility, unit, or wing established in yes connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?

115.43 (a) Protective Custody

Does the facility always refrain from placing inmates at high risk for yes sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?

If a facility cannot conduct such an assessment immediately, does the yes facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?

115.43 (b) Protective Custody

Do inmates who are placed in segregated housing because they are at yes high risk of sexual victimization have access to: Programs to the extent possible?

Do inmates who are placed in segregated housing because they are at yes high risk of sexual victimization have access to: Privileges to the extent possible?

Do inmates who are placed in segregated housing because they are at yes high risk of sexual victimization have access to: Education to the extent possible?

Do inmates who are placed in segregated housing because they are at yes high risk of sexual victimization have access to: Work opportunities to the extent possible?

If the facility restricts access to programs, privileges, education, or work yes opportunities, does the facility document: The opportunities that have been limited?

If the facility restricts access to programs, privileges, education, or work yes opportunities, does the facility document: The duration of the limitation?

If the facility restricts access to programs, privileges, education, or work yes opportunities, does the facility document: The reasons for such limitations?

115.43 (c) Protective Custody

Does the facility assign inmates at high risk of sexual victimization to yes involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?

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 yes paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?

If an involuntary segregated housing assignment is made pursuant to yes paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?

115.43 (e) Protective Custody

In the case of each inmate who is placed in involuntary segregation yes 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?

115.51 (a) Inmate reporting

Does the agency provide multiple internal ways for inmates to privately yes report: Sexual abuse and sexual harassment?

Does the agency provide multiple internal ways for inmates to privately yes report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?

Does the agency provide multiple internal ways for inmates to privately yes report: Staff neglect or violation of responsibilities that may have contributed to such incidents?

115.51 (b) Inmate reporting

Does the agency also provide at least one way for inmates to report yes sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?

Is that private entity or office able to receive and immediately forward yes inmate reports of sexual abuse and sexual harassment to agency officials?

Does that private entity or office allow the inmate to remain anonymous yes upon request?

Are inmates detained solely for civil immigration purposes provided yes information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?

115.51 (c) Inmate reporting

Does staff accept reports of sexual abuse and sexual harassment made yes verbally, in writing, anonymously, and from third parties?

Does staff promptly document any verbal reports of sexual abuse and yes sexual harassment?

115.51 (d) Inmate reporting

Does the agency provide a method for staff to privately report sexual yes abuse and sexual harassment of inmates?

115.52 (a) Exhaustion of administrative remedies

Is the agency exempt from this standard? NOTE: The agency is exempt yes 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.

115.52 (b) Exhaustion of administrative remedies

Does the agency permit inmates to submit a grievance regarding an na 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.)

Does the agency always refrain from requiring an inmate to use any na 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.)

115.52 (c) Exhaustion of administrative remedies

Does the agency ensure that: An inmate who alleges sexual abuse may na submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)

Does the agency ensure that: Such grievance is not referred to a staff na member who is the subject of the complaint? (N/A if agency is exempt from this standard.)

115.52 (d) Exhaustion of administrative remedies

Does the agency issue a final agency decision on the merits of any na 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.)

If the agency claims the maximum allowable extension of time to na 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.)

At any level of the administrative process, including the final level, if the na 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.)

115.52 (e) Exhaustion of administrative remedies

Are third parties, including fellow inmates, staff members, family na 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.)

Are those third parties also permitted to file such requests on behalf of na 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.)

If the inmate declines to have the request processed on his or her na behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)

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.)	na
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.).	na
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.)	na
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.)	na
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.)	na
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.)	na
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.)	na

115.52 (g) Exhaustion of administrative remedies

If the agency disciplines an inmate for filing a grievance related to na 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.)

115.53 (a) Inmate access to outside confidential support services

Does the facility provide inmates with access to outside victim advocates yes 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?

Does the facility provide persons detained solely for civil immigration yes purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?

Does the facility enable reasonable communication between inmates yes and these organizations and agencies, in as confidential a manner as possible?

115.53 (b) Inmate access to outside confidential support services

Does the facility inform inmates, prior to giving them access, of the yes 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?

115.53 (c) Inmate access to outside confidential support services

Does the agency maintain or attempt to enter into memoranda of yes understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?

Does the agency maintain copies of agreements or documentation yes showing attempts to enter into such agreements?

115.54 (a) Third-party reporting

Has the agency established a method to receive third-party reports of yes sexual abuse and sexual harassment?

Has the agency distributed publicly information on how to report sexual yes abuse and sexual harassment on behalf of an inmate?

115.61 (a) Staff and agency reporting duties

Does the agency require all staff to report immediately and according to yes 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?

Does the agency require all staff to report immediately and according to yes agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?

Does the agency require all staff to report immediately and according to yes agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?

115.61 (b) Staff and agency reporting duties

Apart from reporting to designated supervisors or officials, does staff yes 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?

115.61 (c) Staff and agency reporting duties

Unless otherwise precluded by Federal, State, or local law, are medical yes and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?

Are medical and mental health practitioners required to inform inmates yes of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?

115.61 (d) Staff and agency reporting duties

If the alleged victim is under the age of 18 or considered a vulnerable yes 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?

115.61 (e) Staff and agency reporting duties

Does the facility report all allegations of sexual abuse and sexual yes harassment, including third-party and anonymous reports, to the facility's designated investigators?

115.62 (a) Agency protection duties

When the agency learns that an inmate is subject to a substantial risk of yes imminent sexual abuse, does it take immediate action to protect the inmate?

115.63 (a) Reporting to other confinement facilities

Upon receiving an allegation that an inmate was sexually abused while yes 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?

115.63 (b) Reporting to other confinement facilities

Is such notification provided as soon as possible, but no later than 72 yes hours after receiving the allegation?

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 yes ensure that the allegation is investigated in accordance with these standards?

115.64 (a) Staff first responder duties

Upon learning of an allegation that an inmate was sexually abused, is yes the first security staff member to respond to the report required to: Separate the alleged victim and abuser?

Upon learning of an allegation that an inmate was sexually abused, is yes 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?

Upon learning of an allegation that an inmate was sexually abused, is yes 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?

Upon learning of an allegation that an inmate was sexually abused, is yes 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?

115.64 (b) Staff first responder duties

If the first staff responder is not a security staff member, is the responder yes required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?

115.65 (a) Coordinated response

Has the facility developed a written institutional plan to coordinate yes actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in 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 yes 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?

115.67 (a) Agency protection against retaliation

Has the agency established a policy to protect all inmates and staff who yes report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?

Has the agency designated which staff members or departments are yes charged with monitoring retaliation?

115.67 (b) Agency protection against retaliation

Does the agency employ multiple protection measures, such as housing yes 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?

115.67 (c) Agency protection against retaliation

Except in instances where the agency determines that a report of sexual yes abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?

Except in instances where the agency determines that a report of sexual yes 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?

Except in instances where the agency determines that a report of sexual yes 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 yes abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?

Except in instances where the agency determines that a report of sexual yes abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?

Except in instances where the agency determines that a report of sexual yes abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?

Except in instances where the agency determines that a report of sexual yes abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?

Except in instances where the agency determines that a report of sexual yes abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?

Does the agency continue such monitoring beyond 90 days if the initial yes monitoring indicates a continuing need?

115.67 (d) Agency protection against retaliation

In the case of inmates, does such monitoring also include periodic status yes checks?

115.67 (e) Agency protection against retaliation

If any other individual who cooperates with an investigation expresses a yes fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?

115.68 (a) Post-allegation protective custody

Is any and all use of segregated housing to protect an inmate who is yes alleged to have suffered sexual abuse subject to the requirements of § 115.43?

115.71 (a) Criminal and administrative agency investigations

When the agency conducts its own investigations into allegations of yes 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 yes 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).)

115.71 (b) Criminal and administrative agency investigations

Where sexual abuse is alleged, does the agency use investigators who yes have received specialized training in sexual abuse investigations as required by 115.34?

115.71 (c) Criminal and administrative agency investigations

Do investigators gather and preserve direct and circumstantial evidence, yes including any available physical and DNA evidence and any available electronic monitoring data?

Do investigators interview alleged victims, suspected perpetrators, and yes witnesses?

Do investigators review prior reports and complaints of sexual abuse yes involving the suspected perpetrator?

115.71 (d) Criminal and administrative agency investigations

When the quality of evidence appears to support criminal prosecution, yes does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?

115.71 (e) Criminal and administrative agency investigations

Do agency investigators assess the credibility of an alleged victim, yes suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?

Does the agency investigate allegations of sexual abuse without yes requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?

115.71 (f) Criminal and administrative agency investigations

Do administrative investigations include an effort to determine whether yes staff actions or failures to act contributed to the abuse?

Are administrative investigations documented in written reports that yes include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?

115.71 (g) Criminal and administrative agency investigations

Are criminal investigations documented in a written report that contains a yes thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?

115.71 (h) Criminal and administrative agency investigations

Are all substantiated allegations of conduct that appears to be criminal yes referred for prosecution?

115.71 (i) Criminal and administrative agency investigations

Does the agency retain all written reports referenced in 115.71(f) and (g) yes for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?

115.71 (j) Criminal and administrative agency investigations

Does the agency ensure that the departure of an alleged abuser or yes victim from the employment or control of the agency does not provide a basis for terminating an investigation?

115.71 (I) Criminal and administrative agency investigations

When an outside entity investigates sexual abuse, does the facility yes 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).)

115.72 (a) Evidentiary standard for administrative investigations

Is it true that the agency does not impose a standard higher than a yes preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?

115.73 (a) Reporting to inmates

Following an investigation into an inmate's allegation that he or she yes 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?

115.73 (b) Reporting to inmates

If the agency did not conduct the investigation into an inmate's allegation na 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 a inmate's allegation that a staff member has committed yes 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 posted within the inmate's unit?

Following a inmate's allegation that a staff member has committed yes 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?

Following a inmate's allegation that a staff member has committed yes 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?

Following a inmate's allegation that a staff member has committed yes 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?

115.73 (d) Reporting to inmates

Following an inmate's allegation that he or she has been sexually yes abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?

Following an inmate's allegation that he or she has been sexually yes abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?

115.73 (e) Reporting to inmates

Does the agency document all such notifications or attempted yes notifications?

115.76 (a) Disciplinary sanctions for staff

Are staff subject to disciplinary sanctions up to and including termination yes for violating agency sexual abuse or sexual harassment policies?

115.76 (b) Disciplinary sanctions for staff

Is termination the presumptive disciplinary sanction for staff who have yes engaged in sexual abuse?

115.76 (c) Disciplinary sanctions for staff

Are disciplinary sanctions for violations of agency policies relating to yes 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?

115.76 (d) Disciplinary sanctions for staff

Are all terminations for violations of agency sexual abuse or sexual yes 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)?

Are all terminations for violations of agency sexual abuse or sexual yes harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?

115.77 (a) Corrective action for contractors and volunteers

Is any contractor or volunteer who engages in sexual abuse prohibited yes from contact with inmates?

Is any contractor or volunteer who engages in sexual abuse reported to: yes Law enforcement agencies (unless the activity was clearly not criminal)?

Is any contractor or volunteer who engages in sexual abuse reported to: yes Relevant licensing bodies?

115.77 (b) Corrective action for contractors and volunteers

In the case of any other violation of agency sexual abuse or sexual yes harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?

115.78 (a) Disciplinary sanctions for inmates

Following an administrative finding that an inmate engaged in inmate-on-yes inmate sexual abuse, or following a criminal finding of guilt for inmateon-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?

115.78 (b) Disciplinary sanctions for inmates

Are sanctions commensurate with the nature and circumstances of the yes abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?

115.78 (c) Disciplinary sanctions for inmates

When determining what types of sanction, if any, should be imposed, yes does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?

115.78 (d) Disciplinary sanctions for inmates

If the facility offers therapy, counseling, or other interventions designed yes 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?

115.78 (e) Disciplinary sanctions for inmates

Does the agency discipline an inmate for sexual contact with staff only yes upon a finding that the staff member did not consent to such contact?

115.78 (f) Disciplinary sanctions for inmates

For the purpose of disciplinary action does a report of sexual abuse yes made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?

115.78 (g) Disciplinary sanctions for inmates

Does the agency always refrain from considering non-coercive sexual yes activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)

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 yes 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?

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 yes 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.)

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 yes 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?

115.81 (d) Medical and mental health screenings; history of sexual abuse

Is any information related to sexual victimization or abusiveness that yes 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?

115.81 (e) Medical and mental health screenings; history of sexual abuse

Do medical and mental health practitioners obtain informed consent from yes inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?

115.82 (a) Access to emergency medical and mental health services

Do inmate victims of sexual abuse receive timely, unimpeded access to yes 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?

115.82 (b) Access to emergency medical and mental health services

If no qualified medical or mental health practitioners are on duty at the yes 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?

Do security staff first responders immediately notify the appropriate yes medical and mental health practitioners?

115.82 (c) Access to emergency medical and mental health services

Are inmate victims of sexual abuse offered timely information about and yes timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?

115.82 (d) Access to emergency medical and mental health services

Are treatment services provided to the victim without financial cost and yes regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?

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 yes appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?

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 yes 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?

115.83 (c) Ongoing medical and mental health care for sexual abuse victims and abusers

Does the facility provide such victims with medical and mental health yes services consistent with the community level of care?

115.83 (d) Ongoing medical and mental health care for sexual abuse victims and abusers

Are inmate victims of sexually abusive vaginal penetration while na incarcerated offered pregnancy tests? (N/A if all-male facility.)

115.83 (e) Ongoing medical and mental health care for sexual abuse victims and abusers

If pregnancy results from the conduct described in paragraph § na 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.)

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 yes sexually transmitted infections as medically appropriate?

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 yes regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?

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 yes 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.)

115.86 (a) Sexual abuse incident reviews

Does the facility conduct a sexual abuse incident review at the yes conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?

115.86 (b) Sexual abuse incident reviews

Does such review ordinarily occur within 30 days of the conclusion of the yes investigation?

115.86 (c) Sexual abuse incident reviews

Does the review team include upper-level management officials, with yes input from line supervisors, investigators, and medical or mental health practitioners?

115.86 (d) Sexual abuse incident reviews

Does the review team: Consider whether the allegation or investigation yes indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?

Does the review team: Consider whether the incident or allegation was yes 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?

Does the review team: Examine the area in the facility where the incident yes allegedly occurred to assess whether physical barriers in the area may enable abuse?

Does the review team: Assess the adequacy of staffing levels in that yes area during different shifts?

Does the review team: Assess whether monitoring technology should be yes deployed or augmented to supplement supervision by staff?

Does the review team: Prepare a report of its findings, including but not yes 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?

115.86 (e) Sexual abuse incident reviews

Does the facility implement the recommendations for improvement, or yes document its reasons for not doing so?

115.401 (h) Frequency and scope of audits

Did the auditor have access to, and the ability to observe, all areas of the yes audited facility?

115.401 (i) Frequency and scope of audits

Was the auditor permitted to request and receive copies of any relevant yes documents (including electronically stored information)?

115.401 (m) Frequency and scope of audits

Was the auditor permitted to conduct private interviews with inmates, yes residents, and detainees?

115.401 (n) Frequency and scope of audits

Were inmates permitted to send confidential information or yes correspondence to the auditor in the same manner as if they were communicating with legal counsel?