

PREA Facility Audit Report: Final

Name of Facility: Maryland Correctional Training Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 05/30/2023

Date Final Report Submitted: 07/26/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Debra D. Dawson	Date of Signature: 07/26/ 2023

AUDITOR INFORMATION	
Auditor name:	Dawson, Debra
Email:	dddawsonprofessionalaudits@gmail.com
Start Date of On-Site Audit:	03/08/2023
End Date of On-Site Audit:	03/10/2023

FACILITY INFORMATION	
Facility name:	Maryland Correctional Training Center
Facility physical address:	18800 Roxbury Road, Hagerstown, MD 21746, Maryland - 21746
Facility mailing address:	

Primary Contact

Name:	Elizabeth Rice
Email Address:	elizabeth.rice@maryland.gov
Telephone Number:	2404201506

Warden/Jail Administrator/Sheriff/Director

Name:	William Bohrer
Email Address:	william.bohrer@maryland.gov
Telephone Number:	240-420-1400

Facility PREA Compliance Manager

Name:	Elizabeth Rice
Email Address:	elizabeth.rice@maryland.gov
Telephone Number:	O: (240) 420-1506

Facility Characteristics

Designed facility capacity:	2958
Current population of facility:	2058
Average daily population for the past 12 months:	2050
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-80
Facility security levels/inmate custody levels:	medium
Does the facility hold youthful inmates?	No

Number of staff currently employed at the facility who may have contact with inmates:	493
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	36
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	74

AGENCY INFORMATION

Name of agency:	Maryland Department of Public Safety and Correctional Services
Governing authority or parent agency (if applicable):	N/A
Physical Address:	6776 Reisterstown Road, Baltimore, Maryland - 21215
Mailing Address:	
Telephone number:	4103395000

Agency Chief Executive Officer Information:

Name:	Acting Secretary Carolyn Scruggs
Email Address:	carolyn.scruggs@maryland.gov
Telephone Number:	(410) 339-5099

Agency-Wide PREA Coordinator Information

Name:	David Wolinski	Email Address:	david.wolinski@maryland.gov
--------------	----------------	-----------------------	-----------------------------

Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of

Standards met, and the number and list of Standards not met.

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

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-03-08
2. End date of the onsite portion of the audit:	2023-03-10

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2958
15. Average daily population for the past 12 months:	2058
16. Number of inmate/resident/detainee housing units:	2055
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	2055
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	8
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	129
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	9
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	30
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	6

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	2
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	17
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	16
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	580
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	74

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	87
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	30
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The auditing team requested inmate rosters to include name, age, date of arrival, race, and those who identify within the LGBTI groups
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	22
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	3
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1

63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	2
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	6
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	4

69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility supervisory staff to include Warden Designee, security supervisors and PCM and reviews of case files, inmates are not placed in segregation for being at risk of sexual victimization
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	17

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	22
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	2
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
---	--

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
--	-------------------

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	11	1	10	0
Staff-on-inmate sexual abuse	5	0	5	0
Total	16	1	15	0

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	2	7	2
Staff-on-inmate sexual abuse	0	2	3	0
Total	1	4	10	2

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

16

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	11
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	5
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	1
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

1

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

There were only one sexual harassment allegation reported during the 12 month review period which was an administrative investigation for staff on inmate

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

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

☒ Yes

☐ No

a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:

1

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☐ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 3. MCTC Organizational Chart and DPSCS Organization Chart 4. MCTC.050.0030 Sexual Misconduct - Prohibited 5. DPSCS.020.0026 PREA Rape Elimination Act- Federal Standards Compliance 6. OPS 200.0005 Sexual Misconduct – Prohibited Inmate on Inmate 7. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 8. Criminal Law Title 3. Other Crimes Against the Person Subtitle 3. Sexual Crimes

8. Interviews with:

a. DPSCS PREA Coordinator

b. MCTC PREA Compliance Manager

115.11(a) The DPSCS and the facility have multiple comprehensive written policies and procedures in place to support the Department's mission, and goal of maintaining a zero tolerance of sexual abuse and sexual harassment. DPSCS. 020.0026 and DPSCS 200.0005 state the Department does not tolerate sexual abuse or sexual harassment of an inmate. The Directives clearly outline the agency's zero tolerance policy and identifies the agency's approach to the prevention, detection, and response to sexual assault incidents in the Department facilities. Criminal Law Title 3. Other Crimes Against the Person Subtitle 3. Sexual Crimes identifies the penalty and sentencing guidelines for sexual conduct between correctional or Department of Juvenile Services employee and inmate and child. Executive Directive OPS.050.0001 states 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. The Directive identify sanctions to be imposed on staff who participate in outlined prohibited acts regarding the zero-tolerance consistent with PREA standards that includes up to termination. Sanctions for those that have participated in prohibited behaviors in the facility is outlined in the Directive. Directive OPS.200.005 contains information on inmate discipline in addition to the inmate rule book identifies the inmate rule violation 117 - as any manner, arrange, commit, perform or engage in a sex act or sexual conduct. Inmates who are determined by the IID Investigator to have committed the criminal act of sexual misconduct to another inmate and or staff will be prosecuted.

115.11(b) In accordance with a review of the DPSCS organizational chart, the Department has designated an upper-level Special Assistant who reports directly to the Deputy Secretary of Operations as the DPSCS PREA Coordinator. An Assistant DPSCS PREA Coordinator is also employed to assist the DPSCS PREA Coordinator in oversight of the agency's efforts regarding PREA in all its facilities. The Assistant DPSCS reports directly to the DPSCS PREA Coordinator. The auditor interviewed the DPSCS PREA Coordinator who confirmed he has the time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities.

115.11(c) The facility has designated a PREA Compliance Manager, who is assigned these duties along with duties as a Correctional Case Management Specialist II. The facility's organizational chart was provided for review and identifies the position of the Compliance Manager reports directly to the Warden. Staff indicated she does have time to fulfill her duties as the Compliance Manager.

Based on the review of policies, organization charts, and interviews it is determined that the facility and Department meets the mandate of all provisions within this Standard.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Website 3. Interviews with the following: <ol style="list-style-type: none"> a. DPSCS PREA Coordinator <p>The DPSCS PREA Coordinator has confirmed that the contract to house inmates at Threshold, Inc. was terminated. The Department does not have a contract to house DPSCS inmates.</p> <p>The auditor conducted a review of the agency's website at DPSCS website @ https://dpscs.maryland.gov/prea/prea-audits.shtml and confirmed PREA Audit Reports were posted for the Threshold Inc conducted in 2015 and 2018. An interview with the DPSCS PREA Coordinator indicated the agency conducted regular monitoring for PREA compliance throughout the contractual services.</p> <p>Based on the review of previous contractual services provided, agency website with posted PREA audits identifying compliance and an interview with the DPSCS PREA Coordinator, the DPSCS facility has demonstrated compliance with all provisions of the standard.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. Directive OPS.115.0001 Correctional Officer Staffing Analysis and Overtime Management 3. DPSCS Staffing Analysis and Overtime Management Manual 4. Post Assignment Worksheet (PAWS) 5. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct Prohibited

6. Log of unannounced rounds

7. MCTC Staffing Plan

8. Observation while on-site

9. Interviews with:

a. Warden Designee

b. DPSCS PREA Coordinator

c. Intermediate and Higher-Level Supervisors

115.13(a) Directive OPS.115.0001 states the requirements of a facility staffing plan. These requirements contain the eleven requirements stated in this provision. The Staffing Analysis and Overtime Management Manual provides guidance regarding minimum operational staffing levels requirements and documentation of any deviations to these requirements. Per the policy, the Department shall establish and maintain a uniform system that establish necessary post assignments at a correction and detention facility; Assign staff to post at a correctional and detention facility; Monitor and analyze staffing assignments and minimize the use of overtime and compensatory time. Per the review of the MCTC Staffing Plan, it addresses the eleven requirements as indicated in this provision. The PAQ identified the average daily number of inmates on which the staffing plan was predicted to be 2424 inmates. The average inmate count for the previous 12 months was 2050. The facility's count on the first day of the on-site visit was 2055. An interview with the Warden Designee and DPSCS PREA Coordinator indicated the facility does develop and comply with a staffing plan as outlined in the Staffing Analysis and Overtime Management Manual and meet to discuss it annually. It was indicated that all DPSCS facilities, including MCTC, are operating under the agency Staffing Plan developed in 2021. The Warden Designee indicated when assessing adequate staffing levels addition video monitoring is considered as previously recommended for various areas throughout the facility to be completed in phases. Prior to COVID-19, the facility was scheduled to begin phase #3, however, the continuation has not yet begun, and no cameras have been added since the last PREA audit.

115.13(b) Directive OPS.115.0001 provides guidance regarding minimum operational staffing levels and requirements for documenting any deviations with the requirements. The facility staffing plan is developed with these requirements in mind and a daily Post Assignment Work Sheet (PAWS) is developed to deploy staff in accordance with the stated staffing plan. The PAWS identifies positions and the staffing requirements for the positions and reconciles staffing deployment in accordance with the positions outlined in the staffing plan. Any deviations from the staffing plan are documented on the PAWS with an explanation. Supervisory correctional staff on duty ensures the required post are always covered on the PAWS during each shift. There is never any deviation from the staffing plan regarding the vacating of critical post, and any level 4 post vacancies would be covered by hiring overtime. Per the Warden Designee, the facility does not incur deviations from the

	<p>established staffing plan as all level 4 and required level 3 position are always filled to include via overtime compensation. However, all changes to post assignments are noted on the PAWS for each shift. The auditing team observed the staffing level was adequate and prevalent throughout the institution during the site visit.</p> <p>115.13(c) Directive OPS.115.0001 states, “At least annually, or on an as needed basis, consulting with the Department PREA Coordinator to review, assess, determine, and document if adjustments are necessary to the facility’s: (a) Staffing plan based on topics identified under §.05C(2)(d) of this directive; (b) Use and deployment of video monitoring system and other surveillance technology; and (c) Resources available to commit to ensure compliance with the established staffing plan.” The staffing plan review is documented on an agency-wide standardized form. The facility’s most recent Staffing Plan review was conducted on May 5, 2023, and documented as reviewed by the DPSCS PREA Coordinator and the MCTC Facility Representation/ Assistant Warden. The review noted the Staffing Plan was based on the Staffing Plan approved on March 15, 2021, while no changes were recommended. The form considers all the criteria required for a staffing plan review as required in this Standard and provides areas for narrative, any recommendations, as well as space for signatures by the facility compliance manager and agency wide coordinator. An interview with the DPSCS PREA Coordinator indicated he is consulted regarding any assessments and adjustments to the facility Staffing Plan on an annual basis. He confirmed all DPSCS facilities are currently operating from the Staffing Plan developed in 2021.</p> <p>115.13(d) OPS. 050.0001 indicates that the facility will 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: (i) Randomly on all shifts; (ii) 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 staff that the rounds are being conducted; and (iii) At a frequency established by the managing official” regarding the conduct of unannounced rounds. Interviews with intermediate or higher-level staff indicated unannounced rounds are conducted each shift by correctional supervisors and those in upper management positions at least weekly in an effort to detect and prevent circumstances of sexual abuse. Unannounced rounds are completed by Lieutenants, Captain, Major, Chief of Security, Assistant Warden, and Warden and are documented in the housing unit logbooks. The auditing team reviewed housing unit logbooks during the tour and observed the unannounced security rounds were noted by intermediate and higher-level staff daily during all shifts.</p> <p>Based on the review of policies, log book entries, PAWS, interviews and analysis, the facility has demonstrated compliance with all the provisions of this Standard.</p>
--	--

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. Directive DPDS.100.0003 Separation of Adult and Juvenile Detainees 3. Return to Youth Detention Center (YDC) Transfers 4. Observation During Site Visit <p>115.14 (a) (b) DPDS.100.0003 and Return to Youth Detention Center (YDC) Transfers stated an inmate sentenced to the DOC, who at the time of sentencing has not reached the age of 18, may be housed at the Youth Detention Center of the Division of Pretrial and Detention Services (DPDS). The juvenile inmate may be housed at YDC until time that he or she reaches the age of 18. 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 in living, program, dining or other common areas. Any other sight or sound contact is minimized, brief and in conformance with applicable legal requirements. MTCT does not house youthful offenders (those under 18 years old).</p> <p>Per review of the PAQ, DPSCS policies, observation during the site visit, and interviews with staff, MCTC does meet the mandate of all standard provisions.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, on-site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.110.0047 Personal Search Protocols-Inmates 3. OPS 050.0001 Sexual Misconduct - Prohibited 4. Lesson Plan- LGBTI 5. Lesson Plans Frisk Searches 6. In-Service Lesson Plan – PREA 7. DPSCS Inmate Process Lesson Plan 8. Observation while on-site

9. Interviews with:

- a. MCTC PREA Compliance Manager
- b. Random staff
- c. Inmate Population

115.15(a) Directive OPS.110.0047, Section .05F states, “(4) 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 additional correctional officer.” Correctional officers shall be the same sex as the inmate being searched, unless the inmate presents a Personal Search Exception card which specifies a different protocol for the search being performed. The Department shall comply with all aspects of the federal Prison Rape Elimination Act and, in doing so, recognize the pre-authorized request of an inmate diagnosed with gender dysphoria, or a transgender or intersex inmate, with regard to a Personal Search protocol as prescribed in this directive. Section .05H (2) states, “Only a certified medical professional may perform a body cavity search of an inmate.” Section .05H (4) states, “Only the certified medical professional and the inmate being searched may be present during the procedure.” 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. The search shall be conducted in the presence of an additional correctional officer. Observation of areas identified by staff where visual searches are conducted confirmed the searches are conducted within areas that provide privacy. The PAQ listed zero cross-gender strip or cross-gender visual body cavity searches of inmates during the review period.

115.15(b) MCTC does not house female inmates. The facility is designated for adult males only. This provision is not applicable for MCTC.

115.15(c) Directive OPS.110.0047, indicates Each inmate search is: (a) Documented on forms approved by the Deputy Secretary for Operations, or a designee; (b) Reported according to established procedures for reporting incidents at a correctional facility; and Executive Directive OPS.110.0047 Page 7 of 20 (c) Entered in “OCMS-Events module” according to procedures established for OCMS reporting Section .05F(6)(b) regarding all strip searches states, “(b) Log or report the search in accordance with established procedures.” Section .05H(1)(b) regarding body cavity searches requires prior written authorization from the managing official or designee before conducting a body cavity search. Each correctional officer is responsible for compliance with the procedures established in this directive. The facility reported zero cross-gender strip or cross-gender visual body cavity searches of inmates including any exigent circumstances, conducted by security or medical staff in the past 12 months. Staff interviews did not indicate any occurrence of cross-gender strip or cross-gender visual body cavity searches of inmates, including any exigent circumstances, conducted by security or medical staff in the past 12 months. Additionally, inmate interviews did not indicate any occurrence of cross-gender

viewing by staff during a strip search or visual cavity search. MCTC does not house female inmates.

115.15(d) OPS.050.0001 state, it is the policy of the Department to not tolerate sexual abuse or sexual harassment of an inmate. The policy enables inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breast, buttocks, or genital except in exigent circumstances when such viewing is incidental to routine cell check (this includes viewing via video camera). Interviews with the inmate population indicated they are provided privacy while changing clothes, showering and performing other bodily functions. The auditing team identified showers within housing unit #8 did not allow privacy to the inmate population during showering due to the absence of shower curtains. Showers curtains were installed during the post audit phase and photographs were presented for review. There were no other areas identified as a concern with privacy for the inmate population during showering, change of clothes, and/or during the performance of bodily functions. All inmate restrooms throughout the facility in program areas and work sites are controlled by the staff assigned to the area to ensure one inmate at a time has access. Formal and informal interviews with the inmate population indicated no concerns in regard to privacy during showering, while changing clothes and/or performing bodily functions and acknowledged the female staff announce their presence upon entering the housing units. Interviews with staff indicated the female staff entering and/or the male staff on post, announce female on the unit upon entering. Staff also indicated the inmates are able to shower, change clothes and perform bodily functions without being viewed by staff.

115.15(e) Directive OPS.110.0047, Section .05F(3)(a) regarding strip searches of transgender and intersex inmate's states, "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 status is unknown, it may be determined by conversation with the inmate, a review of available medical records, or as part of a broader medical examination conducted in private by a licensed medical professional. The Department shall comply with all aspects of the federal Prison Rape Elimination Act and, in doing so, recognize the pre-authorized request of an inmate diagnosed with gender dysphoria, or a transgender or intersex inmate, with regard to a Personal Search protocol as prescribed in this directive. Interviews conducted with two (2) transgenders indicated neither has been subjected to visual searches for the purpose of determining their genital status. Per the MCTC PCM, zero inmates have been identified as intersex has been assigned at the facility. All staff interviewed reported the facility prohibits staff from searching or physically examining transgender or intersex inmates for the sole purpose of determining their genital status.

115. 15 (f) Procedures for conducting the searching of inmates within the LGBTI are provided to staff in attendance of the Maryland Police and Correctional Training Commission Lesson Course Title LGBTI and the Correctional In-Service Training Program Course Title Frisk/Body Searches, Restraints, and Scanning Devices. Search training is also included during annual refresher training for all security staff. A review of these lesson plans confirms training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and

	<p>respectful manner, consistent with security needs. Confirmation of the completed training throughout the review period was submitted for review.</p> <p>Based on policies and lesson plans, interviews with random and transgender inmates, and staff, in addition to the observation during site visit, the facility meets compliance for all provisions of the standard.</p>
--	---

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Office of Equal Opportunity Limited English Opportunity (LEP) Plan 3. DPSCS Executive Directive OEO.020.0032 Limited English Proficiency (LEP) Policy 4. DPSCS Executive Directive OPS.200.0005 Inmate on Inmate Sexual Conduct - Prohibited 5. Translation Services Documentation and Contract 6. PREA Brochure English/Spanish 7. DPSCS Special Management Issues in Corrections Lesson Plan 8. Interpreter Service Telephone Instructions 9. Observation while on-site 10. Interviews with: <ol style="list-style-type: none"> a. Agency Head b. Random staff c. Inmates with Disabilities <p>115.16(a)(b) DPSCS policies require facilities to ensure effective communication for inmates that are Limited English Proficiency (LEP) on policy prohibiting inmate on inmate sexual conduct, procedures for filing a complaint, and inmate rights regarding sexual safety through inmate orientation. Agency policy also requires the head of the facility (or designee) that is responsible for the custody and security of an inmate shall ensure that, except under limited circumstances where a delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of the</p>

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 for other inmates. DPSCS has a contract with Statewide Foreign Language Interpretation and Translation Services effective March 1, 2019 – February 29, 2024. Translation services are available in a number of languages. MCTC also utilizes services with Language Line Services, Inc., and submitted documentation of translation services provided in Spanish and Vietnamese. Hearing impaired services are also available through the Statewide Visual Communication Services. Part of the intake process includes providing inmates with the Prison Rape Elimination Act and Sexual Assault Awareness brochure. This brochure covers the zero-tolerance policy and reporting information and is available in both English and Spanish. During orientation, inmates are provided a copy of the Inmate Handbook that covers the agency's zero-tolerance policy. Additionally, inmates are shown a PREA video that specifically covers PREA topics to include the agency's zero-tolerance policy; how to report sexual abuse and sexual harassment; agency policy regarding sexual abuse and sexual harassment; and inmate rights regarding sexual abuse, sexual harassment, and retaliation. The video presentation has audio and is also available in Spanish. Staff are present during inmate orientation and conduct a question-and-answer session during each session.

The Special Management Issues in Corrections Lesson Plan includes education for staff working with inmates with special needs such as various disabilities. The term "Special Needs" is a blanket term that refers to those inmates with various types of medical, physical, mental health issues and disabilities in an effective manner.

An interview with the Agency Head Designee, indicated a language line and sign language services are available to the inmate population at all facilities. Inmates identified as hearing impaired are assigned to facilities where translation services are provided to include inmate phones with video for sign language translation. The inmates also have access to their tablets for video visiting. The agency attempts to assign regular scheduled staff to the areas where deaf and/or hard of hearing inmates are assigned for familiarity. Inmates identified as blind or low vision are assigned to a facility where they have access to braille. The inmate handbook PREA flyers, PREA language on the inmate's tablet, and pamphlets are available in multiple both English and Spanish languages.

The following inmates were interviewed within the provisions of this standard: one (1) - low vision; one (1) - cognitive disability; three (3) - physical disabilities; one(1) - Limited English Proficiency; and two (2) - hard of hearing. All inmates acknowledged receiving PREA education in formats they fully understood.

115.16(c) Pursuant to Directive OPS.200.0005, Except under limited circumstances whereas 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 communication information required under the directive to other inmates. The PAQ noted language line services were utilized for three (3) inmates for the languages of Spanish and Vietnamese that was supported via documentation of

	<p>the services. Staff interviews indicated they would contact their supervisor for an approved translator upon being unable to communicate properly with an inmate attempting to report a PREA allegation.</p> <p>Based on the review of policies, available resources for communication and translation services for inmates with disabilities to include LEP, observations of posters identifying such information, staff awareness of available services, and analysis, the facility has demonstrated compliance with all the provisions of the standard.</p>
--	---

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS.020.0026 Prison Rape Elimination Act-Federal Standards Compliance 3. Code of Maryland COMAR 17.04.03.10 Selection and Appointment of Eligible and Notification not Secretary 4. ADM 050.0041 Criminal History Background Records Check Documentation 5. Code of Maryland COMAR 12.10.01.05 Background Investigation and Criminal History Record 6. Code of Maryland COMAR 17.04.14.10 Personnel Records 7. Code of Maryland COMAR 12.15.01.19 Rap Back Program 8. PREA DBM DPSCS JOBAPS Application Form 9. PREA Acknowledgement Questions - Signed 10. Hiring and Promotional Records 11. Interviews with: <ol style="list-style-type: none"> a. Administrative (Human Resources) Staff b. MCTC PREA Compliance Manager <p>115.17(a) ADM.050.0041, states that a hiring authority shall ensure that before an employee begins to perform duties and responsibilities of employment that a criminal history records check is performed in order to determine the existence of criminal convictions that may specifically impact performance as an employee. The policy</p>

further states an employee includes: a contractor, an intern and a volunteer.

Directive DPSCS.020.0026, section .05F(1) regarding the Human Resources Services Division (HRSD) states, "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 (as defined in 42 U.S.C. 1997); (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 §.04B(3) of this directive." Human resources staff reported that hiring and background checks of new employees, promotions, and contractors are performed by the centralized hiring unit which is located offsite of the facility. The applicants select the general geographic area in where they would like to be assigned if selected for employment. The determined location is made by the Centralized Hiring Unit which is section of the Human Resource services Division. The background investigation is extensive in the collection of data regarding applicants that includes but not limited to: consideration of the applicant's' criminal background; previous employment history; review of current tattoos for possible gang affiliation; through identification of tattoos; psychological examination; physical examination; completion of a polygraph examination; wanted person check; RAPS (MD CJIS); National Crime Information Center (NCIC) query; civil and criminal record check; consumer credit check; Interview with Background Investigator; reference checks with neighbors and others known by the applicant and more. A review of background investigations and personnel documentation for new hires within the review period confirmed a thorough background is completed prior to the applicant being offered the applying position. Human resource staff verified that the agency does prohibit the hiring or promotion of anyone who do not meet the requirements of this provision. It also prohibits the acquisition of services from any contractor who does not meet the requirements of this provision.

115.17(b) Directive DPSCS.020.0026, Prison Rape Elimination Act-Federal Standards Compliance notes the Department 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. Human resources staff reported that incidents of sexual harassment are considered during the application, interview, and background investigation for all staff to include contract staff. The Human Resource Service Division (Central Hiring) is responsible for initiating background checks on all DPSCS and contract staff assigned to various departments in the DPSCS. Per an interview with the MCTC PCM background checks are completed at the facility for all vendors who are required to entry for repairs and individual vendors who enter the institution to conduct repairs and other installation prior to their entry. These individuals are always escorted by DPSCS staff and have no direct contact with the inmate population.

115.17(c) Pursuant to COMAR12.10.01.05. Background Investigation and Criminal

History Record Check. (1) An agency head, or a designee, shall perform a background investigation and criminal history record check of an applicant for a mandated position. (2) An agency head, or a designee, shall include in the criminal history record check a fingerprint check as required under Regulation .05 of this chapter. ADM.050.0041, states a hiring authority shall ensure that before an employee begins to perform duties and responsibilities of employment that a criminal history records check is performed in order to determine the existence of criminal convictions that may specifically impact performance as an employee. The policy further states that employees include: a contractor, an intern and a volunteer. Directive DPSCS.020.0026, section .05F(3) states, "Before hiring a new employee to perform duties involving contact with an inmate, the Human Resources Services 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." Human resources staff reported the centralized hiring unit performs all criminal background checks and efforts to contact all prior institutional employers of new employees. It was reported that investigators are assigned and attempt to contact all previous employers. The facility reported 18 new hires and one promotion during the review period and eight (8) were randomly selected for review for background checks prior approved employment.

115.17(d) Code of Maryland 17.04.03.10 states the appointing authority shall determine the necessity for investigating the background of an eligible individual for the purpose of verification of suitability for employment. When appropriate and job-related, areas for investigation may include but are not limited to employment history, academic credentials, military records, criminal conviction records and personal references. Directive DPSCS.020.0026, section .05F(3)(c) states, before enlisting a contractor to perform services that involve contact with an inmate, the HRSD shall conduct a criminal background record check of the contractor's employees who may have contact with an inmate." The DPSCS includes in the contracts with other agencies such as YesCare, Centurion, Keefe, Westcare, Chardonay Dialysis, DLLR that all background checks are required to be completed by the DPSCS Human Resource Services Division. Confirmation of nine (9) contract staff from the various contracting agencies were randomly selected for review. Per an interview with the Human Resource staff, criminal background record checks are completed through a query of the Criminal Justice Information Services (CJIS), National Crime Information Center (NCIC) and Maryland Telecommunication Enforcement Resource System (METERS) systems.

115.17(e) Directive DPSCS.020.0026, section .05I states, "For each subordinate employee and contractor service provider who may have contact with an inmate, an appointing authority, or a designee, shall conduct a criminal records background check, at minimum, every five years, or have in place a system for otherwise capturing such information for current employees and contractors." Pursuant to COMAR 12.15.01.19 regarding the state NGI Record of Arrest and Prosecutions Back ("Rap Back") program, arrest reports are monitored for employee contact with law

enforcement, on a continuous basis. The “Rap Back” program is a continuous real time monitoring program. If an employee has any contact with a law enforcement, the contact is immediately reported to the agency. Per the Human Resource Administrator, upon any employee’s submission to fingerprints and/or an arrest, an alert is automatically forwarded to the Human Resource Director and notification is forwarded to the affected institution. Human resource staff also reported agency policy requires staff to report such conduct within 24 hours.

115.17(f) Directive DPSCS.020.0026, section .05F(4)(a)-(b) states, “The HRSD shall inquire of each applicant and current employees who may have contact with an inmate directly about previous misconduct described in §.04B(3) of this directive in: (a) A written application or interview for employment or promotions; and (b) An interview or written self-evaluation conducted as a part of a review of a current employee.” These questions are part of the PREA DBM DPSCS JOBAPS Application form, PREA Interview Questions for Non-Mandated Positions, Mandated Positions, Promotional and Transfer Candidates form, Polygraph Questions for Mandated Positions, and DPSCS Interview form – Correctional Applicant. Individuals seeking promotions are required to complete the PREA Interview Questions for Non-Mandated Positions, Mandated Position, Promotional and Transfer Candidates during the selection process. The questions are as the following: have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, or other institution?; have you 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?; have you been civilly or administratively adjudicated to have engaged in the activities described in question 1 or 2?; and have you ever been accused of sexual harassment? Per an interview with human resource personnel, indicate that hiring and promotion applications include these questions. Additionally, all staff seeking promotions are required to go through the vetting process completed by the IID Investigators for pending investigations and are required to complete the questionnaire. One staff was promoted during the review period. The auditing team selected 18 new hires to include DPSCS staff, one (1) promoted staff and eight (8) various contractors in addition to 10 volunteers for confirmation of submitted PREA Self Report forms during the 12-month review period with no discrepancies noted.

115.17(g) Directive DPSCS.020.0026, section .05F states, “A material omission regarding conduct described in this directive or providing materially false information shall be grounds for termination of employment.” Additionally, the Application Form also contains the following language “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 eligible 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.”

	<p>115.17(h) Maryland's Public Information Act ("PIA"), GP§ 4-311, states, "personnel records of an individual are protected; however, such records are available to the person who is the subject of the record and to the officials who supervise that person. An agency may not generally share personnel records with other agencies; however, it is implicit in the personnel records exemption that another agency charged with responsibilities related to personnel administration may have access to those records to the extent necessary to carry out its duties." Code of Maryland 17.04.14.10 states any current or former State employee may inspect and request copies of the personnel record maintained for the Department for that employee. Per an interview with a human resource administrator, upon an individual's completion of the authorization to release information, it is approved. At that point, the disclosure of substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work is authorized. Additionally, the background investigating team does reach out to other agencies to complete investigations of applicants.</p> <p>Based on the review of policies, completed background checks for agency staff, volunteers, contract workers in addition to the completion of self-reporting requirements, the RAP which is notification of staff interaction with outside law enforcement regarding staff misconduct, the facility does meet all provisions of the standard.</p>
--	--

115.18 Upgrades to facilities and technologies	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. On-site visit observation 3. Interviews with: <ol style="list-style-type: none"> a. Warden Designee b. Agency Head Designee <p>115.18 (a) (b) An interview with the Agency Head Designee indicated when designing, acquiring, or planning substantial modifications to facilities the agency works to eliminate blind spots during the designing stage in addition to approving an increase in surveillance cameras throughout the new facilities to include additional cameras on housing unit tiers, within classrooms, and inmate dining while taking all security measures to provide a safe atmosphere for both staff and the inmate population.</p>

	<p>Funding has been approved throughout the agency for the upgrade and increase of video monitoring and some projects have begun. Additional mirrors have also been installed in numerous institutions to include facilities that are pending the installation of additional cameras.</p> <p>The Pre-Audit Questionnaire indicated there have not been any new additions and/or modification to the facility since the previous PREA audit in 2020 and was confirmed by the MCTC Warden Designee. The Warden Designee indicated the consideration of placement of cameras is reviewed in an effort to increase security of the facility and the safety of staff and the inmate population from sexual abuse while considering statistics (e.g., a prevalence of incidents), past problem areas, blind spots and evidence-based practices. Although, the facility was previously approved for additional cameras prior to COVID-19; none have been added since the last PREA audit.</p> <p>Based on the review of policies, observation, interviews and analysis, the facility has demonstrated compliance with all the provisions of the standard.</p>
--	--

115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. OPS 050.0001 Sexual Misconduct - Prohibited 3. OPS.200.005 Inmate on Inmate Sexual Conduct-Prohibited 4. OPS IIU.110.0011 Investigation of Sex Related Offenses 5. COMAR 10-701 Internal Investigative Unit 6. OPS IIU.020.0002 Complaint Receipt, Documenting, and Processing Complaint Receipt, Documenting, and Processing 7. PREA What to Do Guidelines 8. SAFE/SANE Resource List 10. Memo from Agency-Wide PREA Coordinator regarding Protocol 11. MCASA Website 12. MCASA Contact

13. PREA Investigative Case Files

14. Interviews with:

- a. IID Investigator
- b. Assistant Director of Nurses
- c. Mental Health Professional Counselor
- d. Meritus Medical Center Charge Nurse

115.21 (a) Confirmation of the DPSCS responsibility to meet the requirements of this standard is outlined in the numerous Departmental policies: OPS.050.0001; COMAR 10.12.02.03 and OPS.200.0005; IIU110.0011. 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. A reported allegation of PREA related incidents is categorized as a Priority #2 on the Serious Incident Category Descriptions and is the part of the beginning stage of the investigation by the on-duty security shift supervisor. The shift supervisor is responsible for contacting the IIU Duty Officer for a case number. Per the IIU Investigator, detectives with the IIU Investigators are sworn law enforcement officers by the Attorney General in Baltimore and are authorized under Maryland law to conduct both administrative and criminal investigations. These investigators are assigned to the Internal Investigative Unit/Division. Directive IIU.110.0011, section .03 states, "The Department shall promptly, thoroughly, and objectively investigate each allegation of employee or inmate misconduct involving a sex related offense according to a uniform protocol based on recognized investigative practices that maximize evidence collection to support effective administrative dispositions and, if appropriate, criminal prosecution of the identified perpetrator." Per an interview with an IIU Investigator, all reported PREA allegations are initially identified as criminal. However, upon the conclusion that no criminal acts were committed, the investigative case is continued and closed as an administrative case. All investigations criminal or administrative are tracked and conducted by the IID Unit. Interviews with random staff indicated they were aware and understood DPSCS protocol for obtaining usable physical evidence if an inmate alleged sexual abuse. All indicated they would utilize the first responder duties that include securing the area, separating the alleged victim from the alleged abuser, contacting their supervisor, and attempting to prevent those involved from destroying any and all physical evidence on their person and the identified area.

115.21(b) Comprehensive steps are outlined in the Maryland VAWA Forensic Compliance Guidelines, and COMAR10.12.02.03 details the steps in response to Alleged Rape or Sexual Offense Victim Care. The Agency provided a copy of the OPS. 200.0004 Inmate on Inmate Sexual Conduct Prohibited, the National Protocol "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents, "overview and a memo regarding the Protocol Conformity for the state

of Maryland. IIU.110.001, states that when the possibility for recovery of physical evidence from the victim exists or otherwise is medically appropriate, the investigator will coordinate with appropriate Department facility staff to arrange for the victim to undergo a forensic medical examination that is performed by a SAFE, SANE or a licensed health care professional who has been trained to perform medical forensic examinations of sexual abuse victims. IIU.220.0002 outlines the procedure for evidence collection including general guidelines, custodial investigator guidelines, temporally securing evidence and property, evidence room, collection and control, firearms, currency, controlled dangerous substance and inventory.

115.21(c) COMAR 10.27.21.03, COMAR 10.12.02.03 and OPS.050.0001 govern the mandates of the standard provision that outlines the qualifications and procedures for completion of a sexual assault forensic examination by a registered nurse forensics nurse to include, evidence collection and prophylactic medication. OPS.050.0001 states that if medically appropriate or necessary to preserve evidence, offer the victim access to a medical forensics examination at no cost to the victim that is performed by (i) A Sexual Forensics Examiner (SAFE); (ii) Sexual Assault Nurse Examiner (SANE); (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 examination. MCTC uses the Meritus Medical Center for all forensic examinations. The Charge Nurse explained the hospital has a Sexual Assault Response Team that is called in upon an incoming individual report of sexual assault. The forensic nurse examiners program at the hospital offers treatment 24 hours 7 days a week by trained forensic nurse examiners for sexual assault victims. Although they are not on duty at the hospital 24/7, they are on call 24/7 and required to report to the hospital within 1 hour. Hospitals with SAFE Programs have specially trained Forensic Nurse Examiners (FNE) or physicians available to provide both medical attention and evidence collection services. Medical care provided during SAFE includes acute injury care and medication for the prevention of sexual transmitted infections (STIs), HIV, and pregnancy. A copy of the SAFE/SANE Resource List noted the identified Meritus Medical Center assigned to conduct the forensic examinations. All services and medical care, including HIV prevention medication (nPEP), provided during a SAFE are free of cost. However, the inmate must consent to receipt of a forensic examination and all medical treatment.

115.21(d) DPSCS utilizes the Maryland Coalition Against Sexual Assault (MCASA) to provide victim advocacy services and serve as an agency for reporting PREA allegations of sexual abuse and sexual harassment. Inmates are given a MCASA brochure upon their arrival to the facility during intake in which services offered are explained in detail. MCASA indicates when receiving a forensic examination, the inmate will have the opportunity to receive victim advocacy services. These services will be provided by a local Rape Crisis Center or the hospital at where the services are being performed. Advocacy services include, but are not limited to, accompaniment during the exam, safety planning, and referrals for long-term services. MCTC uses the local Hospital (Meritus Medical Center) for all forensic examinations. The PAQ indicates there were zero forensic exams performed in the last 12 months which was confirmed during the review of the 16 completed sexual abuse investigative case files

and the one pending sexual abuse investigation.

115.21 (e) OPS.200.0005, state if requested by the victim and services are reasonably available, the investigator shall have one of the following accompany, for the purpose of support, the victim through the forensic examination and investigatory interviews; a qualified victim advocate; a Department employee who is not otherwise involved in the incident and has received education and training concerning sexual assault and forensic examination issues or has been appropriately screened and determined to be competent to serve in this role; or a non-Department community-based organization representative that who meets the criteria for a Department employee. Per IIU.110.0011, if the victim requests, the investigator will coordinate with the managing official or designee, to arrange for a victim advocate to accompany the victim to provide support for the victim through the medical forensic examination and investigatory interviews. If requested by the victim, the investigator shall permit a victim advocate to be present during the interview with the victim. DSPCS has entered into a contract for services with MCASA to provide crisis intervention, counseling and referral. The information also confirms services for individual, group and family psychotherapy. PREA Information Packet was reviewed, and it stated If requested by the victim and the services are reasonably available. Additionally, since the issuing of inmate tablets, the inmates have access to conduct these free calls from their tablets throughout the facility. The review of the completed 16 sexual abuse investigative case files confirmed zero inmates reported sexual abuse penetration that met the requirements of a forensic examination and request for victim advocate services. This information was also indicated during interviews with six (6) inmates who reported sexual abuse.

115.21 (f) The DPSCS Internal Investigative Unit (IIU) is responsible for investigations all sexual abuse and sexual harassment. Therefore, this provision is not applicable.

115.21 (g) Not applicable

115.21 (h) Victim advocate services are offered by the Meritus Medical Center as part of the forensic medical examination. Medical staff makes notification to the Sexual Assault Response Team (SART) that includes a victim advocate. Per an interview with the Licensed Social Worker II, she has been designated as the facility victim advocate, however no inmates have requested services as a victim advocate. Upon request, she would provide psychology first aid service to include coping skills and a referral for additional mental health services as needed and/or requested. Victims are also informed of available victim advocate services through the MCASA Life Crisis Center accessible by phone and through use of the inmate tablets. Interviews with six (6) inmates who reported sexual abuse indicated neither requested victim advocate services nor reported sexual penetration. The alleged victims were aware of the posters throughout the facility that identify outside resources.

Based on the review of policies, sexual abuse protocol, facility victim advocate, investigative case files, interviews with the Licensed Social Worker II who serve as advocate advocates and the Life Crisis Center, local hospital who confirmed the SANE and victim advocate service, and inmates who reported sexual abuse, the facility has

	<p>demonstrated compliance with all the provisions of the standard</p> <p>Based on the review of policies, sexual abuse protocol, facility victim advocate, investigative case files, interviews with the Licensed Social Worker II who serve as advocate and the Life Crisis Center, local hospital who confirmed the SANE and victim advocate service, and inmates who reported sexual abuse, the facility has demonstrated compliance with all the provisions of the standard</p>
--	--

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. OPS.200.005 Inmate on Inmate Sexual Conduct-Prohibited 3. OPS.050.0001 Sexual Misconduct-Prohibited 4. Correctional Service Title 10, State Correction al Facilities Subtitle 7, Internal Investigative unit 5. Directive IIU.110.0011 Investigating Sex Related Offenses 6. Investigation Files 7. Agency website 8. Interviews with: <ol style="list-style-type: none"> a. IID Investigator b. Agency Head Designee <p>115.22(a) Correctional Service Title 10 identify the Department duties to investigate alleged criminal violations committed by employees, inmates, visitors and other individuals that affect the safety or security of the Department’s facilities or programs; and alleged professional misconduct by employees of the Department; and adopt regulations for the conduct of its investigations. Investigators within the Internal Investigation Unit are authorized to exercise the powers of a peace or police officer in the State on property that is owned, leased, operated, by or under the control of the Department. Directive OPS.050.0001 and Directive OPS.200.0005 also indicates, “An IID investigator, or an investigator designated by the IID, shall conduct a prompt, thorough and objective investigation of every complaint of alleged sexual misconduct.” The Agency Head Designee confirmed all allegations of sexual abuse or</p>

sexual harassment are investigated by the Investigators assigned to the IIU. All investigations criminal or administrative are tracked by the facility and IID maintain an annual PREA tracking log of all reported sexual abuse and sexual reported allegations. PAQ indicated that there were 17 sexual abuse and sexual harassment allegations while 16 were completed as administrative and one (1) was completed as a criminal investigation. However, there were a total of 18 allegations reported. Sixteen were completed as an administrative investigation, one (1) remained pending throughout the audit process and one (1) inmate on inmate sexual abuse allegation that did not include sexual penetration was concluded as a criminal investigation. Specifically, the investigations findings of the 17 completed investigative case files were identified as the following:

Inmate on inmate sexual abuse: 2- unfounded; 7 - unsubstantiated.; 2 - substantiated.

Inmate on inmate sexual harassment: 0 - unfounded; 0 - unsubstantiated; 0 substantiated.

Staff on inmate sexual abuse: 2-unfounded; 3- unsubstantial; 0 - substantiated.

Staff on inmate sexual harassment: 1 - unfounded; 0 - unsubstantiated; 0 substantiated.

One (1) inmate on inmate sexual abuse case remained pending throughout the audit process.

115.22(b) Directive IIU.110.0011, section .03 states, "The Department shall promptly, thoroughly, and objectively investigate each allegation of employee or inmate misconduct involving a sex related offense according to a uniform protocol based on recognized investigative practices that maximize evidence collection to support effective administrative dispositions and, if appropriate, criminal prosecution of the identified perpetrator." An interview with the Warden Designee and IIU Investigator noted that every allegation of sexual abuse and sexual harassment goes through IID Unit for an investigation.

115.22(c) (d) (e) Per interviews with the Agency Head Designee, and IID Investigator, in addition to the review of PREA investigative case files, DPSCS IID investigators are responsible for investigations of all sexual abuse and sexual harassment reported allegations. Information on how the public can report sexual abuse and /or sexual harassment allegations is located on the Agency's website at <https://dpscs.maryland.gov/agencies/iid.shtml>. The website notes: "The Intelligence and Investigative Division conducts criminal and administrative investigations into allegations of serious misconduct within the Department of Public Safety and Correctional Services. In addition to conducting investigations within statutory authority, the agency is the department's liaison with allied federal, state and local law enforcement agencies, providing investigative services and support. The contact information is noted as Intelligence and Investigative Division Main number: 410-724-5720; Complaint Phone Number: 410-724-5742 at P.O. Box 418 located at 8520 Corridor Road Suite H Savage, Maryland 20763.

	Based on the review of agency policies, review of the completed investigative cases files submitted by the IID Investigators, and agency website, the facility has does meet all standard.
--	--

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Pre-Service and In-Service Training Lesson Plans 3. DPSCS Executive Directive OPS.200.005 Inmate on Inmate Sexual Conduct – Prohibited 4. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct – Prohibited 5. OPS 020.0026 PREA Compliance Policy 6. COMAR 12.10.01.14 Correctional Training Commission Requires Annual Training 7. PREA Training Lesson Plans 8. PREA Training Records 9. Interviews with: <ol style="list-style-type: none"> a. Random Staff <p>115.31(a) The facility provided various policies, directives, and training records, and lesson plans for PREA training. Directive OPS.050.0001 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: (1) Each employee attends approved training related to preventing, detecting, and responding to acts of sexual misconduct;” A similar requirement is included in Directive OPS.200.0005 which 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 (1) An employee attends approved training related to preventing, detecting, and responding to acts of inmate on inmate sexual conduct.”</p> <p>Additionally, COMAR 12.10.01.14 Correctional Training Commission requires completion of annual training by December 31st of each calendar year. PREA training is part of the annual training curriculum. DPSCS utilizes two PREA lesson plans. A Correctional Entrance Level Training Program (for new employees) and a Correctional In-Service Training Program (for current employees). Both lesson plans are similar in</p>

	<p>content. Training is two hours, lecture based with a slide presentation, and followed by a test. Staff must score 75% or better in order to complete the training. The lesson plans cover the 10 topics specified in this provision.</p> <p>A review of staff training records confirm staff completed the required PREA training. Random staff interviews indicated in-service training is provided annually during Day 3 in-service training. The training department tracks staff progress via computer-generated spreadsheet to ensure completion of training. Furthermore, anyone who did not complete training or may have been unable to attend for various reasons (i.e. injury, illness, schedule conflict) would be required to make up any missed training by the required deadline. 100% of random staff interviewed reported that in-service training contains all the information required by this provision.</p> <p>115.31(b) OPS 020.0026, states, “Such training shall be tailored to the gender of the inmates at the employee’s facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.” Training is designed for officers to be able to function in both female and male facilities. MCTC does not house female inmates.</p> <p>115.31(c) OPS.020.0026 states, “All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the Department shall provide each employee with refresher training every two years to ensure that all employees know the Department’s current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the Department shall provide refresher information on current sexual abuse and sexual harassment policies.” All staff are required to complete in-service training annually that includes PREA education.</p> <p>115.31(d) OPS.020.0026 states, “The Department shall document, through employee signature or electronic verification, that employees understand the training they have received.” COMAR 12.10.01.16 Correctional Training Commission section F(3) states, “An agency head or training director sending a mandated employee to another academy for Commission-approved mandated employee training shall maintain records of in-service training and firearms training and qualification provided by the academy conducting the training until audited by the Commission. Confirmation of staff completion of PREA training was provided through a generated computerized roster noting all staff attendance on Day 3 training as identified for PREA training. Interviews conducted with both random and specialized staff indicated they completed PREA training both during pre-service and annually.</p> <p>Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
--	---

115.32	Volunteer and contractor training
---------------	--

Auditor Overall Determination: Meets Standard
Auditor Discussion
<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none">1. MCTC Completed Pre-Audit Questionnaire (PAQ)2. OPS.050.0001 Sexual Misconduct - Prohibited3. DPSCS Volunteer Services Orientation Manual4. Volunteer/Contractor/Guest PREA Acknowledgements Forms5. Documentation of PREA Training6. DPSCS Website7. Interviews with:<ol style="list-style-type: none">a. Religious Service Chaplainb. Volunteersc. Contract Staff <p>115.32 (a) (b) (c) Directive OPSP.050.0001 states 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 and Includes: a contractor; an intern; a volunteer; and an employee of the Maryland Department of Education, Maryland Department of Labor, Licensing and Regulation, or Baltimore City Public Schools thus, these identified groups are subject to the same type of training as employees. Directive OPS.050.0001 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: Each employee attends approved training related to preventing, detecting, and responding to acts of sexual misconduct."</p> <p>The PAQ identified 161volunteers and contract staff. The auditor provided a receipt of PREA training for 18 volunteers, and roster that included contractors from the various departments to include training provided through the agency and on-line by the agency for: Addition/Westcare; Medical/YesCare; Education/DLLR; Mental Health/Centurion; Keefe; Religious Services and Dialysis/Chardonnay. Contractor staff assigned to the various departments attend annual training with agency staff during Day 3 PREA Training. Documentation of completed training was presented.</p> <p>Per the Religious Services Chaplain and MCTC PCM, the Volunteer Activity Coordinator is responsible for providing training to all volunteers. Volunteers complete an application to become a volunteer on-line through the DPSCS website. The auditor verified an informative page on the DPSCS website specifically for volunteers, with contacts for further information as well as other convenient links. The Volunteer Orientation Manual Pages 21 -23 on the DPSCS website provide training to include</p>

	<p>their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response, per the Department policy and procedures. The DPSCS .020.0026, Prison Rape Elimination Act Federal Standards Compliance and OSPS. 050.0001 Sexual Misconduct - Prohibited are included for review under-Volunteer Forms: Additional Material. The Volunteer Activity Coordinator provides additional PREA training to all volunteers during facility orientation training. MCTC identified 74 volunteers who provide services. A random selection of 18 volunteers' acknowledgement forms was presented for review and confirmed their awareness and understanding of the agency's zero tolerance policy of PREA (inmate/detainee with inmate or staff to inmate/detainee) and their responsibility to report immediately all acts of sexual misconduct, retaliation against victims, witness, and individuals reporting sexual abuse. Interviews with two volunteers indicated PREA training is provided during orientation and annually by the Volunteer Activity Coordinator.</p> <p>Interviews were conducted with two contractors and two volunteers who acknowledged receiving PREA education during orientation training and annually on the agency's zero-tolerance policy on sexual abuse and sexual harassment and how to report it. Each stated they would report to a security staff member, security supervisor, and/or their immediate supervisor.</p> <p>Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated compliance with all provisions of this standard.</p>
--	---

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct – Prohibited 3. DCD 200-1 Inmate Rights 4. PREA Hotline signs (English and Spanish) 5. MCTC Inmate handbook 6. DPSCS PREA Sexual Assault Awareness Brochure (English and Spanish) 7. Inmates Orientation Forms 8. Documentation of PREA Video Presentations 9. PREA Education on Inmate Issues Tablets

10. Observation on site

11. Interviews with:

a. Receiving and ID Staff/Intake

b. Random and Targeted Group Inmates

115.33(a)(b) (c) Pursuant to DCD 200-1 Each Warden shall ensure that newly received inmates are provided information about inmate rights, general institutional scheduled, procedures and institutional plans. Special assistance shall be provided to inmates with language or reading problems. If the orientation material or handbooks are not given to inmates, the institution shall make the material available to the inmates for reference in the library or a designated area. Executive Directive OPS.050.0001 states that Receiving and ID departments are responsible for providing inmate orientation. Under this directive, they 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 as part of inmate orientation. An interview with Receiving and ID custody staff, they are responsible for providing PREA education to all inmates upon the completion of the screening process. Specifically, all inmates receive a facility inmate handbook with PREA education included, the DPSCS PREA brochure, MCTC PREA Intake and Reception Information Sheet, and observe the PREA video during the intake process. Additionally, during the 12-month review period, the facility began issuing all inmates a personal tablet that contains PREA education which each inmate is required to acknowledge they have read upon logging on and having full access.

During the interview process with 30 random and 22 targeted group inmates each acknowledged viewing the PREA video on the housing unit televisions that is shown regularly. Additionally, the inmates each acknowledged receipt of issued tablets and their requirement to acknowledge PREA education on the tablet prior to being given full access to the available apps. The lead auditor requested inmates in various housing units to demonstrate and/or explain use of the tablet where PREA information is located and was presented with the PREA information under "Notices." The auditing team confirmed the PREA information installed on the tablet is presented through YesCare (medical). The literature on the inmate tablets gives information on the agency's zero tolerance policy for sexual abuse or sexual harassment and provides information on how to report sexual abuse and sexual harassment and is continuously accessible to the inmates.

115.33(d) Directive OPS.050.0001 section .05C(5) states, "Procedures are in place that eliminate barriers that would prevent or inhibit an individual from reporting alleged sexual misconduct to any one or all of the parties listed under §.05E(4) of this directive." When necessary, telephone interpretation services are needed, the available services are through the Language Line. The targeted group inmate interviews included inmates with the various disabilities that included: low vision, physical disability, hard of hearing, cognitive disability, and LEP and indicated they received PREA education in a manner they understood to include on the inmate

	<p>channel, PREA posters posted throughout the facility, PREA information on their issued tablets and information included in the inmate handbook. PREA information is also provided in both English and Spanish to include in large font. The facility maintains a log documenting the dates and times, the PREA video is shown to the inmate population on the inmate channel in all housing units.</p> <p>115.33 (e) The auditor requested a random selection of 72 inmates for confirmation of receiving PREA education. Inmates acknowledged receiving the facility handbook and PREA education on the MCTC Inmate Orientation Receipt Form. Interviews with the inmate population confirmed they received personal tablets that contain PREA education and their requirement to acknowledge the PREA education before having full access. Inmates also acknowledge observing the PREA video as it has been regularly shown on the inmate's TV channel in addition to upon arrival and receiving an inmate handbook.</p> <p>115.33 (f) PREA information was observed to be readily available to the inmate population throughout the facility. PREA signage containing hotline contact information and sexual abuse information was noted as being posted throughout the institution. Signage was observed to be available in English and Spanish. PREA education is continuously accessible to the inmates in the library through flyers, brochures, and posters. The inmate's personal tablets give them accessibility PREA education, and free calls to third party resources to report PREA allegations that includes MCASA and the Life Crisis Center.</p> <p>Based on the review of policies, inmate handbook, inmate orientation sheets, continuous PREA education posted throughout the facility, confirmation of inmate viewing the PREA video through the inmate television channel and PREA education on the inmate tablets accessible to them 24/7, the facility does meet all provisions of the standard.</p>
--	---

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. OPS.050.0030 Sexual Misconduct - Prohibited 3. OPS. 200.0004 Inmate on Inmate Sexual Misconduct - Prohibited 4. Police Entry Level Objectives 5. Documentation of Specialized Training for Agency Investigators

6. MD Code 10-701 Internal Investigation Unit

7. Lesson Plan – Specialized Training: Investigations

8. Interview with:

a. IID Investigator

115.34(a) OPS.200.0004 states that to the extent possible, but in every case where the allegation of alleged inmate on inmate sexual conduct involves sexual abuse, the investigator assigned to investigate the allegation shall have received specialized training related to conducting sexual abuse investigations in a confinement setting that, at a minimum, specifically addresses: (a) Interviewing sexual abuse victims; (b) Using Miranda and Garrity warnings protecting against self-incrimination; (c) Sexual abuse evidence collection; and (d) Criteria and evidence necessary to substantiate administrative action and, if appropriate, referral for criminal prosecution. The Internal Investigative Division (IID) has jurisdiction over both administrative and criminal investigations. IID handles all allegations of sexual abuse and sexual harassment. IID investigators are required to meet training standards in order to maintain law enforcement certification and are sworn officers. The IID will determine if the allegation will be investigated locally by facility staff or investigated by an IID detective. The Maryland Police and Correctional Training Commission Lesson Plan – Specialized Training: Investigations which is required of all IID detectives before conducting sexual abuse and sexual harassment investigations was reviewed and covers the requirements of this standard. Upon completion of training IID Investigators are issued a certificate of completion indicating that they have successfully completed training in conducting PREA: PREA Specialized Training.

115.34(b) The Lesson Plan – Specialized Training: Investigations is the curriculum utilized to train staff in the conduct of sexual abuse and sexual harassment investigations. In the “General Comments” section on page 2 states, “This lesson plan is intended for use with Department personnel assigned to conduct an investigation of an allegation of misconduct that involves a sex related offense. This lesson will give participants the information they will need to conduct criminal and administrative investigations compliant with the Prison Rape Elimination Act.” This includes the definition, purpose and history of PREA, definitions, first responder duties, medical examinations, comprehensive investigations, evidence collection, interviewing the victim, suspect and witnesses, Miranda rights, Garrity rights, and handling false accusations. The specialized training for investigators is a 7-hour training program including a slide presentation, video presentation, role play activities, handouts and a comprehensive knowledge test. Staff must score 75% or better in order pass the training course.

115.34(c) The MCTC PAQ noted the agency has 36 investigators employed to conduct sexual abuse investigations. These 36 investigators are assigned to the IID and are assigned to institutions by regions.

Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.35	Specialized training: Medical and mental health care
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 409 1126 1014" style="list-style-type: none"> <li data-bbox="256 409 967 443">1. MCTC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 477 1054 510">2. DPSCS.020.0026 PREA Federal Standards Compliance <li data-bbox="256 544 1126 577">3. CORIZON (YesCare) Response to Sexual Abuse Lesson Plan <li data-bbox="256 611 592 645">4. Corizon PREA CHSSO <li data-bbox="256 678 831 712">5. Corizon PREA CHSSO Clinical Modules <li data-bbox="256 745 863 779">6. Corizon PREA CHSSO eLearning Modules <li data-bbox="256 813 576 846">6. Training Certificates <li data-bbox="256 880 520 913">8. Interviews with: <ol style="list-style-type: none"> <li data-bbox="256 947 743 981">a. Medical and Mental Health Staff <p data-bbox="256 1014 1477 1462">115.35(a) Directive OPS.050.0001 defines “employee” as an individual assigned to or employed by the department in a full-time, part-time, temporary, or contractual position. Section .05C (1) 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: Each employee attends approved training related to preventing, detecting, and responding to acts of sexual misconduct;” Mental health staff consist of both contract and DPSCS employees. All are required to complete the agency’s PREA training and specialized training for medical and mental health staff. Medical staff are contracted through YesCare previously known as Corizon. The contract mental health staff are contracted through Centurion.</p> <p data-bbox="256 1485 1477 1821">The following lesson plans were identified as courses completed by both medical and mental health staff as specialized training pursuant to the standard provisions: CORIZON (YesCare) Response to Sexual Abuse Lesson Plan; Corizon PREA CHSSO; Corizon PREA CHSSO Clinical Modules; and Corizon PREA CHSSO eLearning Modules. A review of the various lesson plans and training material includes the role of healthcare staff to sexual abuse; preservation of evidence, response to sexual abuse; reporting, follow-up care, immediate response to include medical and psychological trauma of sexual abuse, and completion of the clinical knowledge testing.</p> <p data-bbox="256 1843 1477 2067">Interviews with medical and mental health staff indicated they received PREA training from both MCTC and their contracting agency. The specialized PREA training is completed online bi-annually through their contracting agency and covers the topics required by this provision. The following lesson plans were identified as courses completed by both medical and mental health staff as specialized training pursuant</p>

	<p>to the standard provisions: CORIZON (YesCare) Response to Sexual Abuse Lesson Plan; Corizon PREA CHSSO; Corizon PREA CHSSO Clinical Modules; and Corizon PREA CHSSO eLearning Modules. A review of the various lesson plans and training material includes the role of healthcare staff to sexual abuse; preservation of evidence, response to sexual abuse; reporting, follow-up care, immediate response to include medical and psychological trauma of sexual abuse, and completion of the clinical knowledge testing. Per these staff, they receive specialized PREA training and PREA training pursuant to 115.32 and 115.31 as applicable upon hiring in addition to annually. A review of the training curriculums confirmed it includes the following topics: how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and whom to report allegations or suspicion of sexual abuse and sexual harassment. The PAQ identified 100% percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy. Confirmation of the on-line specialized PREA training was provided for both medical and mental health staff.</p> <p>115.35(b) The agency nor the facility conducts forensic medical exams. All forensic examinations are performed off-site at a local medical facility.</p> <p>115.35(c) (d) The auditor reviewed training records showing all medical and mental health staff attended the agency PREA training pursuant to standard 115.31 and 115.32. The auditor also reviewed training certificates indicating all medical and mental health staff completion of specialized training.</p> <p>Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated compliance with all the provisions of the standard.</p>
--	--

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.200.0006 Assessment for Risk of Sexual Victimization and Abusiveness 3. PREA Intake Screening Instrument 4. Inmate Screening Files 5. Interviews with:

- a. DPSCS PREA Coordinator
- b. Staff Who Conduct Risk Screening
- c. MCTC PREA Compliance Manager
- d. Intake Officers
- e. Inmate Population

115.41(a) Directive OPS.200.0006 establishes policy and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the Department of Public Safety and Correctional Services to assess the risk of the individual being sexually abused or being sexually abusive towards other inmates. Policy further states the Department shall use a screening instrument as part of the intake and facility transfer process and at other times deemed appropriate to assess each inmate's risk for being sexually abused or being sexually abusive towards other inmates. The Department shall appropriately apply information obtained from assessing an inmate's risk related to sexual victimization and abusiveness to decisions concerning areas, such as inmate housing, programming, treatment, and work assignments in order to minimize circumstances that contribute to incidents of victimization or abusiveness. DPSCS uses the PREA Intake Screening form during the risk screenings. The DPSCS PREA Coordinator is responsible for ensuring the development and procedures for use of the approved screening instrument protocol identified in all provisions of this standard to include ensuring each managing official designated sufficient intake, custody, or case management staff to assess each inmate within 72 hours of arrival at the facility. The policy also dictate case management staff are to re-assess each inmate within 30 days of the inmate's arrival at the facility for risk of victimization or potential for abusiveness are to re-assess each inmate within 30 days of the inmate's arrival at the facility for risk of victimization or potential for abusiveness.

Case managers and the property officers are responsible for ensuring the screening instrument is used to objectively assess an inmate's risk of victimization and/or an inmate being sexually abusive. A random sample of 72 inmate PREA Intake Screening forms was selected for review. 100% of the submitted samples was screened using the PREA Intake Screening form that included both the 72 hours and 30-day risk screenings. The Intake Custody Officers are assigned to conduct the initial risk assessment upon an inmate's arrival at MCTC. An interview with the Intake Officer indicated all newly arriving inmates to include those who enter for direct intake, transfer and/or parole hearings, are screened through use of the PREA Intake Screening form to identified those at risk of sexual victimization and risk of sexually abusing other inmates. Inmates are scored on their responses and at that time the inmate is identified as at risk of victimization and/or risk of abusiveness, both and/or neutral as applicable.

115.41(b) Directive OPS.200.0006, section .05B(1) states, "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 PAQ indicated that 875 inmates had been admitted with a stay longer than 72 hours. A review of screening forms shows compliance with the 72-hour requirement. The auditor requested a random selection of 72 inmates' risk screenings (six per each review month). The facility's risk assessments do include the information that would allow staff to assign a numerical point value to questions regarding risk of victimization and risk of abusiveness categories. The review of documentation identified all inmates were screened via the PREA Intake Screening form on the day of their noted arrival. Per the Intake Officer inmates are screened on the day of their arrival prior to departing the Receiving and ID. Interviews were conducted with 30 random and 22 targeted group inmates. The majority of inmates who arrived throughout the review period acknowledged completing a risk assessment upon their arrival at MCTC to include twice.

115.41(c) Directive OPS.200.0006, section .05A requires the implementation of a screening instrument and cites the criteria utilized to perform the risk assessment. The PREA Intake Screening form is the agency-approved standardized screening instrument. The PREA Intake Screening form is a one-page form that assigns a numerical point value to questions regarding risk of victimization and risk of abusiveness categories. The PREA Intake Screening form considers 18 factors used to identify an inmate as a risk of victimization, risk of abusiveness and/or both. Each risk factor is assigned a numerical point value based on the information obtained from an interview with the inmate and information from the inmate record during the initial screening.

115.41(d) The auditor reviewed the screening instrument and instructions and found that it addresses the identified nine criteria required by this provision. The PREA Intake Screening does not consider whether the inmate is detained solely for civil immigration purposes. However, documentation indicates that the DPSCS does not house inmates solely for civil immigration purposes. Interviews with staff who conduct the risk screening indicated the risk assessment includes the criteria per the standard and all require a yes or no response.

115.41(e) The PREA Intake Screening factors considered in the risk of abusiveness category include prior acts of sexual abuse, prior convictions for violent offenses and a history of prior institutional violence or sexual abuse. The instrument also considers a history of violent crimes including pending and current charges and a history of domestic violence including pending and current charges. A review of the PREA Intake Screening form revealed it does consider all the criteria required by this provision.

115.41(f) Directive OPS.200.0006, section .05B (2) requires case management staff to reassess each inmate within 30 days of the inmate's arrival at the facility. The PREA Intake Screening form is utilized to conduct the 30-day risk screening reassessment. The PAQ indicated that MCTC admitted 812 inmates whose stay was longer than 30 days. An interview with Case Managers who conducts the follow-up risk assessments indicated they meet with the inmate within 30 days after arrival for their first assignments and review the PREA screening information with them and updated the information based on additional information obtained. A random sample of 72 inmate PREA Intake Screening forms was reviewed for compliance with the reassessment

being completed within 30 days of arrival and confirmed all were documented as compliant with the 30-day reassessments.

115.41(g) Directive OPS.200.0006, section .05B (4) requires case management staff to re-assess an inmate's risk level 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. The PREA Intake Screening form is utilized to conduct all re-assessments. Staff who perform risk screening indicated that a re-assessment is conducted upon receiving any additional information that could reflect the inmate's risk scoring, to include an inmate's assignment as a transgender, and/or an inmate is identified as a victim of sexual abuse and/or an aggressor of sexual victimization as indicated during a PREA investigation, in addition to new criminal charges and information that could affect an inmate's scoring. Two sexual abuse investigations received a substantiated investigative finding. Documentation supported staff utilized the PREA Intake Screening forms to reclassify the applicable inmates as victims and the two aggressors as abusers.

115.41(h) Directive OPS.200.0006, section .05B (5) states that inmates will not be disciplined for refusing to answer or disclosing complete information in response to screening questions. Interviews with Intake Officer and Case Management staff who perform risk screening indicated inmates are never disciplined for refusing to answer questions asked during the PREA risk screening process.

115.41(i) Directive OPS.200.0006, section .05B (6) requires, "Appropriate controls to be in place for facility dissemination of information collected during screening to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates." Upon completion, the PREA Intake Screening form is placed in the inmate's base file. Inmate files are secure in a designated area, and accessibility is given to limited staff. Case Management staff ensure screening information is entered in the Offender Case Management System (OCMS). The OCMS system has limited access, is password protected, and confined to case management staff with user profile access. Per the DPSCS PREA Coordinator, the inmates' PREA Intake Screening forms/information is accessible only to authorized staff with a need to know and is maintained in a secure manner that is not accessible to all. Per staff who perform risk screening and the MCTC PCM, the risk assessments are maintained in the inmate's base file securely stored in file cabinets with combination locks in case management office area. Alerts identifying inmates' incompatibles are stored within the OCMS available to the Traffic Officers and Intake Officers for safe housing. Additional access to any staff requires approval by the Warden.

Based on the review of the agency's policy and review of the standardized instrument form (PREA Intake Screening), and confirmation of the 72 selected inmates risk assessments completed within 72 hours and 30 days of their arrival, MCTC meets all provisions of the standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, on-site visit)</p> <ol style="list-style-type: none"> 1. MCTC Completed PAQ 2. Directive OPS.200.0006 Assessment for Risk of Sexual Victimization and Abusiveness 3. PREA Intake Screening Instrument 4. Completed Risk Assessments 5. Interviews with: <ol style="list-style-type: none"> a. DPSCS PREA Coordinator b. MCTC PCM c. Intake Staff/Case Managers/Staff assigned to conduct risk assessments. <p>15.42(a) Directive OPS.200.0006, section 5C(1)(a) 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: (1) 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.” The facility does not house victims and abusers together. Relevant alerts shall also be placed on all facility and agency data systems by case management to assist in housing and programming decisions. Housing decisions should be made using the PREA Compatibility Rules. Staff who perform risk screening indicated the screening instrument is utilized to maintain a tracking system to prevent the placement of inmates at risk of victimization separate from inmates at risk of abusiveness based on the risk assessment score. The screening also assists in the proper assignment of inmates in housing, programs and the submission and follow-up mental health referrals based on their risk screening score. Per the MCTC PCM, although inmate identified prior victims and/or prior aggressors, risk of victimization and/or risk of abusiveness may be assigned to limited work assignments and or educational programs together as they are directly supervised staff. However, these inmates are never assigned to any confined areas together to include within the food service department.</p> <p>115.42(b) Directive OPS.200.0006, section .05C(1)(b) 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: When making individualized determinations as how to ensure the safety of each inmate.” As</p>

indicated above, the information from each inmate's individual risk screening is reviewed and utilized to keep inmates safe. Staff who perform risk screening indicated the screening instrument is utilized to maintain a tracking system to prevent the placement of inmates at risk of victimization separate from inmates at risk of abusiveness based on the risk assessment score to provide a safe environment during housing and program assignments.

115.42(c) Directive OPS.200.0006 states, "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." A review of the PREA Intake Screening form revealed that it does affirmatively inquire as to whether an inmate is transgender or intersex. The MCTC PCM indicated there has been two (2) inmates identified as transgender and zero inmates identified as intersex assigned at the facility.

115.42(d) (e) Directive OPS.200.0006,.05C(2) states, "Placement and programming assignments for each transgender or intersex inmate shall be re assessed at least twice each year to review threats to safety experienced by the inmate." The inmate's own views with respect to his safety shall be given serious consideration." A review of the PREA Intake Screening form revealed that it does affirmatively inquire as to whether an inmate is transgender or intersex. Interviews with staff who conduct risk screening indicated inmates identified as transgender and/or intersex would be reassessed every six months while reviewing how the inmate is coping within the institutional setting to include housing, assignments, and programs. Documentation supported the transgenders housed at MCTC to include one since 2019, were reassessed bi-annually based on their assignment at and in accordance with the standard provision.

115.42(e) Directive OPS.200.0006, section .05C (3) states, "A transgender or intersex inmate's own views with respect to personal safety shall be seriously considered." Transgender and intersex inmates can request a personal search exception card issued by the warden which allows the inmate to be searched by staff of a preferred gender. Staff who perform risk screening reported when the facility receive an inmate identified as transgender and/or intersex inmate, their own views of safety are considered in addition to coping with the correctional setting, various programs and assignments. MCTC issues transgender inmates a personal search card upon approval by the Warden. Interviews were conducted with two (2) transgenders who stated they were able to express safety concerns with staff.

115.42(f) Directive OPS.200.0006, section .05C (4) states, "Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Facility practice does allow transgender or intersex inmates to shower during off hours from other inmates. Staff interviews confirmed the transgender inmates are given the opportunity to shower separately from other inmates. Interviews with the two (2) transgender inmates indicated they are given an opportunity to shower separately. However, one transgender indicated he has not elected to do so as he has not elected to share his status with others. Per the MCTC PCM, zero inmates identified

	<p>as intersex have been housed at the facility.</p> <p>115.42(g) Directive OPS.200.0006, section .05C (5) states, “Lesbian, gay, bisexual, transgender, or intersex inmates may not be placed 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 connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting inmates.” The PCM indicated MCTC does not house lesbian, gay, bisexual, transgender, or intersex inmates in dedicated units or wings. The auditor interviewed inmates who was identified as 1- gay, 1 - bi-sexual and 2 - transgenders. Each confirmed during the interview process that they have not been placed in designated housing units or wings. Per the DPSCS PREA Coordinator, the State of Maryland does not have a consent decree. Direct observation and a review of housing assignments corroborated with inmate and staff interview results as the inmates were housed in various housing units throughout the facility.</p> <p>Based on the review of policies, housing assignments, completed bi-annual assessments for transgenders, risk screening forms, interviews and analysis, the facility has demonstrated compliance with all the provisions of the standard.</p>
--	---

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DOC.100.002 Case Management Manual 3. PREA Investigative Case Files 4. Interviews <ol style="list-style-type: none"> a. Warden Designee b. Staff Assigned to Supervise Segregation <p>115.43(a) The DOC- Case Management Manual section .18E (1)(a)-(f) states, “Protective custody housing is appropriate only when required for the protection of the inmate. Every effort shall be made by case management staff and the managing official to find suitable alternatives to protective custody housing. Alternatives may include, but are not limited to: (a) Transfer of the inmate to a different housing unit within the facility; (b) A lateral transfer of the inmate to another facility of the same security level; (c) Transfer of the inmate’s documented enemy or enemies to another facility; (d) Transfer of the inmate to another state under the provisions of the</p>

Interstate Corrections Compact (ICC); (e) Transfer to MCAC (in exceptional circumstances only); or (f) Assignment to home detention (if eligible. The PAQ noted no inmates held in involuntary segregated housing in the past 12 months for less than 30 days. The Warden Designee indicated the facility does not place inmates at a high risk of sexual victimization in involuntary segregation, however they may be placed in administrative segregation for normally not longer than 72 hours pending an assessment/investigation.

115.43(b) The DOC-Case Management Manual section .18F(1)-(17) states in part that an inmate assigned to administrative segregation or protective custody shall be subject to the conditions of confinement and those conditions of confinement outline opportunities that have been limited, and the duration of these limitations.

Opportunities for those in protective custody include institutional movement, hygiene, property, out-of-cell activities, access to health care, case management, education, library, legal, visits, religion, food, mail, commissary, and segregation status. The rationale for any limitations would be documented on the Administrative Segregation Investigative Report and the Notice of Assignment to Administrative Segregation.

However, per the Warden Designee, and staff who supervise segregation indicated MCTC does not place inmates at a high risk of victimization sexual abuse in involuntary segregation but may be placed in administrative segregation where restriction are less and are not held normally beyond 72 hours. There were zero inmates placed in involuntary segregation due to being at a high risk of victimization sexual abuse during the site visit.

115.43(c) The PAQ noted no inmates were held in involuntary segregated housing for longer than 30 days in the past 12 months awaiting completion of assessment. The review of the investigative case files did not indicate inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months. The Warden Designee indicated the facility does not place inmates at a high risk of sexual victimization in involuntary segregation, however they may be offered safety in administration segregation which normally is for 72 hours pending an assessment/ investigation. Administrative segregation is less restrictive.

115.43(d) The DOC- Case Management Manual section .18E requires the use of the Administrative Segregation Investigative Report and Notice of Assignment to Administrative Segregation to document the basis for concern and reasons why no alternative means of separation can be arranged. The Notice of Assignment to Administrative Segregation is provided to the inmate and provides the inmate a rationale for placement. Per a review of the 17 completed investigative case files, inmates were not placed in involuntary segregation.

115.43(e) The DOC - Case Management Manual section .18B(2)(c) requires a case management team review each case at least once every 30 days. As indicated in provision (c) above no inmates were held in involuntary segregated housing for longer than 30 days. The Warden was aware of the requirement for 30 days reviews but indicated inmates have not been held in involuntary segregated housing for longer than 30 days due to high risk for sexual victimization.

Based on the review of policies, PREA investigative case files, and interviews, the

	facility has demonstrated compliance with all the provisions of this standard.
--	--

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1.MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 3. DPSCS Executive Directive OPS.200.0005 Inmate on Inmate Sexual Conduct-Prohibited 4. Agency PREA Lesson Plan 5. Administrative Remedy Tracking Log 6. PREA Investigative Case Files 7. PREA Posters 8. Inmate Handbook 9. Inmate Issues Tablets 10. MCASA Brochure 11. Interviews with: <ol style="list-style-type: none"> a. Random staff b. MCTC PREA Compliance Manager c. Random Inmates <p>115.51(a) Directive OPS.050.0001, section .05E (1), OPS.200.0005 section 5 (E) and discusses methods on how a complaint of alleged sexual misconduct may be submitted in the following formats: (a) In writing (includes electronic documents); or (b) Verbally. A complaint of alleged inmate on inmate sexual conduct may be submitted by (a) the victim; (b) an individual a with knowledge of an incident of alleged inmate on inmate sexual conduct; or (c) a third-party or other individual who has knowledge of the alleged inmate on inmate sexual conduct. Additionally, section E (4) states that to effectively reduce actual or implied barriers to filing a complaint, an individual may file a complaint of sexual misconduct with any one or all of the following without regard to chain of command or assignment: (a) Within the Department: (i) An employee; (ii) A supervisor, manager, or shift commander; (iii) The</p>

head of a unit; (iv) The Intelligence and Investigative Division (IID); (v) The Inmate Grievance Office, Inmate Handbook and the PREA and Sexual Assault Awareness brochure, PREA posters, and information on the inmate's housing units bulletin boards contain information on how to report sexual assault.

The MCTC Inmate Handbook includes information on how victims of sexual assault or have been threatened or forced to have sexual contact with someone. Available resources include reporting the situation to any staff member that may feel comfortable confiding in or calling the toll-free hotline at 410-585-3177. Random inmate interviews indicated all inmates were aware of the reporting options available. They indicated there is signage on walls for the hotline and calling the hotline number to include through the use of their tablets as the common response.

Random staff interviews indicated all staff were aware of private methods in which inmates could report sexual abuse to include directly to a staff member, the PREA Hotline, and/or through the use of their tablets. The lead auditor requested an inmate to demonstrate usage of their issued tablet and how he could report PREA allegations and confirmed the available service was accessible and free to the inmate. Reporting directly to staff, via the PREA Hotline to include through the use of their tablets were the most response of inmates to report.

115.51(b) Directive OPS.050.0001 and Directive OPS.200.0005 both indicate that they allow inmates to make a report of sexual abuse or sexual harassment outside the department to the Office of the Attorney General or any other private or public office. DPSCS has an agreement with the Maryland Coalition Against Sexual Assault (MCASA) to provide advocacy services statewide. MCASA also receives reports of sexual abuse and sexual harassment from inmates as an external reporting entity. Postings are on the inmates' housing unit bulletin boards outlining the various methods to report sexual misconduct to include the JUST Detention International (JDI). The Intake & Reception Sheet lists the contact information for the following outside agencies to report allegations of sexual misconduct: CASA, Inc. 116 West Baltimore Street, Hagerstown, MD 21740 @ (301) 739-4990; Hotline (301) 739-8975; Rape Abuse and Incest National Network (RAINN) @ (800) 656-4673; National Sexual Abuse Hotline @ (800) 656-Hope; MCASA PO Box 8782 Silver Spring, MD 20907 @ (301) 328-7023. The MCTC Inmate Handbook also includes the Rape Abuse and Incest National Network (RAINN) and the MCASA as outside resources. A review of case files indicated inmates were aware of the PREA Hotline and reported sexual abuse allegations through the Life Crisis Center. An interview with the mailroom staff indicated inmates are allowed to forward confidential mail to the identified outside resources. The lead auditor's contact information was observed posted throughout the facility during the site visit and confirmed via dated photographs of postings six weeks prior to the site visit. Per the mail room staff, letters addressed to the auditor would be treated as confidential mail as handled in the same manner as legal mail. Per the MCTC, the inmate population have access to contact the PREA Hotline MCASA Life Crisis Center from the facility inmate phones and/or from their issued tablets. The facility has received information immediately upon an inmate reporting through the Hotline. The review of the PREA investigations included the method in which the allegations were reported to include via the PREA Hotline.

	<p>The facility reported 18 sexual abuse and sexual harassment allegations during the 12-month review period. A review of the 17 completed investigations indicated inmates elected various methods to report their allegations to include via third party (PREA Hotline, Life Crisis Center), verbally to staff, and via written notes to staff.</p> <p>MCTC does not house inmates detained solely for civil immigration purposes.</p> <p>115.51(c) The agency PREA Lesson Plan includes the following responsibilities of staff regarding reporting; a) Staff must report any incident complaint to their supervisor, manager shift commander, or head of the unit. b) Staff must accept reports made verbally, in writing anonymously, and third parties; c) Staff must promptly document any verbal reports; report any knowledge, suspicions, or information in a facility.</p> <p>Directive OPS.050.0001 and Directive OPS.200.0005 requires an employee receiving a complaint of sexual abuse or sexual harassment to immediately report the complaint to a supervisor, manager, shift commander, or head of the unit and subsequently document the report in a written format. Additionally, reports of sexual abuse or sexual harassment may be submitted verbally, in writing (including electronic documents), anonymously, and by third parties. Inmates also have access to a toll-free hotline number which is referred for investigation. The PREA Hotline numbers are accessible to the inmates via the inmate telephone system and their issued tablets. Inmate interviews indicated they were aware they could report sexual abuse or sexual harassment either verbally, in writing, anonymously, or via third parties in addition to through their issued tablets. Random interviews with staff also indicated inmates could report sexual abuse or sexual harassment either verbally, in writing, anonymously, and via third parties. Staff indicated they would immediately notify their supervisor and document any verbal reports of sexual abuse or sexual harassment. The review of the 17 completed investigations identified allegations of sexual abuse and/or sexual harassment were documented as reported through verbal communication, written, Hotline and/or through a third party.</p> <p>115.51(d) Directive OPS.200.0005 states The Department shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.” This policy guides facility practice with regard to privately reporting sexual abuse, sexual harassment, and retaliation. Interviews with random staff indicated staff are knowledgeable in how to privately report sexual abuse or sexual harassment. Most staff cited the PREA hotline or notifying a supervisor as their primary method to make a private report of sexual abuse or sexual harassment.</p> <p>Based on the review of policies, review of investigative case files, accessible posters, observation during site visit, inmate handbook, use of inmate tablets, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
--	--

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. COMAR 12.02.28 DPSCS Administrative Remedy Procedures to Resolve Inmate Complaints 3. Interviews with: <ol style="list-style-type: none"> a. MTC PREA Compliance Manager b. MCTC Grievance Officer <p>Maryland Code of Regulations (COMAR) 12.02.28.04B(5) (Title12-DPSCS, Subtitle 02-Division of Correction, Chapter 28-Administrative Remedy Procedures (ARP) to Resolve Inmate Complaints, Section .04B), An inmate may not use the ARP to resolve a complaint concerning: (5) The following acts by staff or another inmate, which shall be addressed according to Department procedures for addressing complaints under the Prison Rape Elimination Act: (a) Rape; (b) Sexual assault, sexual harassment, sexual abuse; and (c) Other sexual misconduct. If a complaint is made through the ARP, it is treated as any other written form of reporting and forwarded directly to the supervisory correctional staff on duty, PCM and to IID to be processed for investigation. Per the MCTC PCM, and MCTC Grievance Officer, all reported allegations are addressed immediately and reported to the IID Investigators for a thorough investigation.</p> <p>DPSCS does not have an administrative procedure to address inmate grievances regarding sexual abuse making this agency exempt from this standard.</p>
--	---

115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 3. DPSCS Executive Directive OPS.200.0005 Inmate on Inmate Sexual Conduct-Prohibited 4. Maryland Coalition Against Sexual Assault (MCASA) Brochure 5. Contract Between DPSCS and MCASA

6. DPSCS PREA and Sexual Assault Awareness Brochure

7. PREA Intake and Reception Sheet

8. MCASA/PREA Posters

9. Interviews with:

a. Inmates Who Reported Sexual Abuse

b. Formal and Informal Inmate Interviews

115.53(a) (b) Upon arrival inmates are provided the Maryland Coalition Against Sexual Abuse (MCASA) Brochure which informs inmates about services (including confidential emotional support services) provided through MCASA prior to departing Intake & Reception. Prior to accessing services inmates are informed to the extent to which their communications will be monitored. The brochure is a guide for prisoners, advocates, and allies and includes information for inmates to report sexual misconduct to outside confidential support services. The services noted in the brochure include the following counselling services: (1) ALLEGANY Family Crisis Resource Center 146 Bedford St., Cumberland, MD 21502 Hotline (301) 759-9244; (2) ANNE ARUMDEL Sexual Assault Crisis Center 1517 Ritchie Hwy, Suite 101, Arnold, MD. 21012, Hotline: (410) 222-6068;(3) BALTIMORE CITY TurnAround, Inc., 1800 North Charles St., Suite 404, Baltimore, MD 21218, Hotline (401) 828-6390; (4) ST. MARY'S Walden-Sierra, Inc. 30007 Business Center Dr., Charlotte Hall, MD 20622 Hotline: (301)863-6661; SOMERSET, WICOMICO, WORCESTER Life Crisis Center, Inc. P.O. Box 387, Salisbury, MD 21803 Hotline: (410)749-4357; (5) WASHINGTON CASA, Inc 116 West Baltimore St. Hagerstown, MD 21740 Hotline: (301) 739-8975.

The PREA Intake & Reception Sheet is not only posted in the Intake & Reception area, it is also posted on inmate bulletin boards in their housing units. The facility provides inmates with access to outside victim advocate for emotional support service related to sexual abuse by giving them mailing addresses and telephone numbers including toll-free hotline numbers where available, of State, or national victim advocacy or rape crisis organizations. The facility will enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. Telephone calls to these agencies may be monitored. Written communication will remain confidential. The Intake & Reception Sheet for MCTC list the following: (1) CASA, Inc., 116 West Baltimore St., Hagerstown, MD 21740 (301)739-4990; (2) Maryland Coalition Against Sexual Assault P.O. Box 8782 Silver Spring , MD. 20907 (301) 328-7023/(800) 983-7273; (3) Sexual Assault Legal Institute P. O. Box 8782 Silver Spring, MD 20907 (301)-564-2277/(877)-496-SALI; (4) Just Detention International 1900 L St, NW, Suite 601 Washington, DC, 20036 (202) 506-333; (5) RAINN Rape, Abuse & Incest National Network which does have accept written correspondence but provides a telephone number of (800) 656-4673. The inmates are issued personal tablets in which they can make free calls to the listed centers.

MCASA posters are installed throughout the facility to include in all inmate housing,

visitation, program areas and work assignments. The posters identify advocacy services that are available by calling the 855-971-4700 to the Life Crisis Center which is under the umbrella of MCASA. In addition to the inmate's accessibility to utilize the inmate public telephones, inmates have access to complete these calls on their personal tablets. Interviews conducted with random, targeted group inmates to include informal interviews during the tour, confirmed the inmate's knowledge of the outside advocacy services. The lead auditor asked an inmate within a housing unit to complete a call to the identified number while the auditor personally spoke with staff at the Life Crisis Center while confirming the available service. Interviews conducted with the inmate population confirmed they were also able to complete these calls from their personal tablets.

The review of 16 sexual abuse investigative case files indicated one (1) inmate reported sexual penetration, however the allegation was reported approximately three (3) months after the reported date of occurrence and therefore was not applicable for a forensic examination. The two (2) substantiated sexual abuse allegations did not include sexual penetration. Victim advocate services were not requested. Interviews were conducted with six (6) inmates who reported sexual abuse and neither inmate reported sexual penetration. All indicated they did not request victim advocate services. Each stated they were aware of the MCASA posters, advocate services, and the telephone number noted on the posters. The inmate population also acknowledged the availability to contact the outside resources via their issued tablets and the calls are not monitored.

The Intake and Reception Sheet list the contact information for the following outside agencies to report allegations of sexual misconduct: CASA, Inc. 116 West Baltimore Street Hagerstown, MD 21740 Tel: (301) 739-4990 Hotline: (301)739-8975; Maryland Coalition Against Sexual Assault P.O. Box 8782 Silver Spring , MD 20907 @ 301-328-7023 and 800-983-7273; Sexual Assault Legal Institute P.O. Box 8782 Silver Springs, MD 20907 @ 301-564-2277 and 877-496-SALI; Just Detention International 1900 L St. NW. Suite 601, Washington, DC 20036 @ 202-506-3333 and Rape, Abuse and Incest National Network (RAINN) 1220 L Street, NW Suite 505, 20036 @ 800-656-4673; and may make a free, confidential call to the PREA Hotline (410.585.3177) on any inmate telephone.,

MCASA core members are the state's 17 rape crisis and recovery centers. Services provided through MCASA include legal advocacy, legislative advocacy, general advocacy, and emotional support services provided through MCASA's network of providers. The agreement specifically states, "MCASA will develop procedures to meet PREA Standard 115.53 in providing access to outside confidential services for Inmates. MCASA will provide technical assistance as needed, including researching, and developing policies to address problems and concerns related to provision of confidential emotional support services." Some inmates were aware that advocacy, crisis intervention to include emotional support services were available as some recalled receiving the informational brochure and observing it on the inmate bulletin boards.

115.53 (c) DPSCS has established a contract for services with the Maryland Coalition

	<p>Against Sexual Assault (MCASA) to provide emotional support services. Services include legal advocacy, legislative advocacy, general advocacy, and emotional support services provided through MCASA's network of providers. A copy of the contact between DPSCS and MCASA was presented for review that does meet all requirements of the standard.</p> <p>Based on the review of policies, posters, inmate access to outside confidential supports services, inmate handbook, contract with MCASA that meets the standard requirements, available resources for the inmate population, and interviews with inmates and staff, in addition to observation during the site visit, the agency and facility has demonstrated compliance with all the provisions of this standard.</p>
--	--

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. MCASA Packet 3. DPSCS Executive Directive OPS.200.0005 Inmate on Inmate Sexual Conduct-Prohibited 4. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 5. MCTC Inmate Handbook 6. DPSCS website <p>115.54(a) Directive OPS.200.0005 states, "A complaint of alleged inmate on inmate sexual conduct may be submitted by the following individuals: A "third party" or other individual who has knowledge of the alleged inmate on inmate sexual conduct." The DPSCS PREA and Sexual Assault Awareness "What Every Inmate Needs to Know" lists reporting options for PREA allegations that includes the PREA Hotline @ 410-585-3177. Additionally, the PREA Hotline number was identified as posted throughout the facility to include front entrance, housing units, food service, program areas, and inmate visitation while being accessible to the inmate population, visitors and staff.</p> <p>The PREA Intake and Reception Sheet list the contact information for the following outside agencies to report allegations of sexual misconduct: CASA, Inc. 116 West Baltimore Street Hagerstown, MD 21740 Tel: (301) 739-4990 Hotline: (301)739-8975; Maryland Coalition Against Sexual Assault P.O. Box 8782 Silver Spring , MD 20907 @ 301-328-7023 and 800-983-7273; Sexual Assault Legal Institute P.O. Box 8782 Silver</p>

	<p>Springs, MD 20907 @ 301-564-2277 and 877-496-SALI; Just Detention International 1900 L St. NW. Suite 601, Washington, DC 20036 @ 202-506-3333 and Rape, Abuse and Incest National Network (RAINN) 1220 L Street, NW Suite 505, 20036 @ 800-656-4673; and may make a free, confidential call to the PREA Hotline (410.585.3177) on any inmate telephone.,</p> <p>Third party reporting methods are also listed on the agency's website which is visible to the public @ https://dpscs.maryland.gov/prea/index.shtml. All complaints of sexual misconduct or sexual assault are serious incidents that will be thoroughly investigated. The Department's Internal Investigative Division oversees all PREA related investigations and will accept complaints from any concerned individual. The Internal Investigative Division can be contacted at Complaint Number (410) 724-5742. The website also listed the DPSCS PREA Coordinator contact information at the Office of the Chief of Staff 300 E. Joppa Road Suite 1000 Towson, MD 21286 with phone number listed as (410)-339-5091 as an avenue to make reports. Interviews with staff indicated they were aware of their responsibility of reporting all PREA allegations to include those reported by a 3rd party and they would immediately report the information received to their next level supervisor who would continue with the reporting process.</p> <p>The MCTC Inmate Handbook also includes third -party reporting methods for the inmate population to include the toll-free hotline number 410-585-3177 to report an incident of sexual abuse.</p> <p>Informal and formal interviews with the inmate population throughout the tour of the facility, confirmed their awareness of the PREA Hotline for third party reporting in addition to their family members accessibility to report for them. The lead auditor requested an inmate to conduct a test of the PREA Hotline, and confirmed the number was accessible for the inmate population to make a report. The auditing team also observed the PREA Audit Notice posted throughout the facility accessible to the inmate population for reporting PREA allegations and/or to request an interview with the auditor. The auditor did not receive any requests from the inmate population prior to the site visit.</p> <p>Based on the review of agency policies, agency website, investigative case files, available third-party reporting methods, testing of the PREA Hotline, and formal and informal interviews with inmate population, the facility does meet the standard provision.</p>
--	---

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review):

1. MCTC Completed Pre-Audit Questionnaire (PAQ)
2. COMAR 10.01.18.05 Mandatory Reporting
3. Completed PREA Investigative Casefiles
4. DPSCS Executive Directive OPS.200.005 Inmate on Inmate Sexual Conduct-Prohibited
5. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited
6. DPSCS Executive Directive IIU.110.0011 Investigating Sex Related Offenses
7. DPSCS Executive Directive OPS.020.0003 Reporting Serious Incidents
8. Medical/ Mental Health Limitation of Confidentiality
9. Maryland Family Law
10. Interviews with:
 - a. MCTC Warden Designee
 - b. DPSCS PREA Coordinator
 - c. MCTC PREA Compliance Manager
 - d. Assistant Director of Nurses
 - e. Mental Health Professional Counselor – Lead
 - f. Random staff

115.61(a) Directive IIU.110.0011, section .05A 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.” Directive OPS.050.0001 and Directive OPS.200.0005 requires employees who receive a complaint of or otherwise have knowledge of alleged sexual misconduct/sexual conduct shall immediately report the complaint to a supervisor, manager, shift commander, or head of the unit followed by the appropriate written format used to document the incident. It also requires the supervisor, manager, shift commander, or head of a unit at a facility other than the facility where the alleged sexual misconduct/sexual conduct occurred notify the managing official responsible for the facility receiving. If the incident occurred at another facility, the managing official responsible for the facility receiving the complaint immediately, but not later than 72 hours of being notified of the incident, shall notify the managing official of the facility where the incident occurred. If the incident occurred at a facility that is not under the authority of the department the facility head or agency head responsible for the facility where the incident occurred and the IID regardless of the jurisdiction where

the incident occurred. COMAR 10.01.18.5 also outlines the responsibility of any staff member who observes, receives a complaint regarding, or otherwise has reason to believe that an individual has been subjected to, inappropriate sexual behavior to file a report in no circumstances more than one (1) working day, after becoming aware of the situation. Directive OPS. 020.0003 identify PREA related incidents as a priority #2 within the serious incident category descriptions. The policy lists staff responsibility and procedures in reporting such incidents. All reporting incidents are to be documented in an incident report (matter of record) by the initial reporting staff member. Interviews with 17 random staff indicated they were aware of their responsibility to report any knowledge of PREA allegations to include harassment, sexual abuse, and retaliation and would report to their supervisor immediately.

115.61(b) Directive OPS.050.0001 and Directive OPS.200.0005 identify information concerning a complaint of alleged inmate on inmate sexual conduct is confidential and may only be available to individuals who have an established role in the reporting, processing, investigation, and resolution of alleged inmate on inmate sexual misconduct and immediate and continued care of the victim. Interviews with random staff indicated all staff are required to report directly to their supervisor and not share the information with others who do not have the need to know. Staff also indicated the information received would not be included in logbooks accessible to all staff.

115.61(c) Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. Interviews Mental Health Professional Counselor and Assistant Director of Nurses confirmed their awareness of their duties required by this provision that includes their duty to report. Per the mental health staff, inmates are advised of staff duty to report all PREA incidents and of their limitations to confidentiality. Mental health staff immediately reports all PREA related allegations to the building sergeant and medical staff which initiates further reporting process and an investigation. Per medical staff, all inmates are initially notified of medical staff's limitation to confidentiality and their duty to report by the intake nurse. Additionally, inmates are notified by the attending medical staff upon their disclosure during services. Inmates acknowledge their signature of awareness on the medical and mental health Limits of Confidentiality and Mental Health Informed Consent forms that includes acts of sexual abuse.

115.61(d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the Department shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws." Child Abuse and Neglect, Maryland Family Law § 5-704 (2013) pertains to health practitioners, educators or human service workers, and police officers regarding reporting physical and sexual abuse of children and vulnerable adults. Per interviews with the Warden Designee, DPSCS PREA Coordinator, MCTC PCM, staff and observation during the on-site visit, MCTC does not house youthful inmates under the age of 18 years old.

	<p>115.61(e) Directive IIU.110.0011, section .05A 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. OPS. 200.0005 indicate a complaint of alleged inmate on inmate sexual conduct may be submitted by the victim, an individual with knowledge of an incident of alleged inmate on inmate sexual conduct, or a “third party or other individual who has knowledge of the alleged inmate on inmate sexual conducted. It also notes that a complainant of inmate-on-inmate sexual conduct received anonymously shall be accepted and processed the same as a complaint received from an identified and may remain anonymous. An interview with the IID Investigator indicated all allegations of sexual misconduct are investigated to include those reported by third party, by the alleged victim, and anonymously and are handled in the same manner. The auditing team reviewed the 17 cases completed for PREA investigations and confirmed the IID completed investigations reported by written notes, verbally, and third party b (PREA Hotline/Life Crisis Center).</p> <p>Based on the review of policies, investigative case files, interviews with medical and mental health supervisors, random staff, Warden Designee, DPSCS PREA Coordinator, MCTC PCM, observation during site visit, the facility has demonstrated compliance with all the provisions of this standard</p>
--	--

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.200.005 Inmate on Inmate Sexual Conduct-Prohibited 3. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 4. Division of Correction Manual: DOC.100.0002, Case Management Manual 5. Interviews with: <ol style="list-style-type: none"> a. Agency Head Designee b. MCTC Warden Designee c. Random staff

115.62 (a) Pursuant to OPS.050.0001 agency policy requires that each employee attend approved training related to preventing, detecting, and responding to acts of sexual misconduct. An employee receiving a complaint of alleged sexual misconduct, shall immediately notify a supervisor, manager, shift commander, or head of the unit of the complaint and safeguard the victim from further harm. The Directives hold supervisors responsible for taking reasonable actions to eliminate circumstances that may result in or contribute to an incident of sexual misconduct. Staff responding to an incident are to ensure the safety of a victim of sexual misconduct by immediately stopping an incident in progress, and if necessary, arranging for separation of the victim from the abuser. Continued personal protection of the alleged victim shall be provided. This information is also covered in the PREA lesson plan. Directive OSPS.200.0005 states a supervisor, manager, or shift commander shall take reasonable actions to eliminate circumstances that may result in or contribute to an incident of inmate-on-inmate sexual abuse. The Case Manager Manual section 18 provides guidance if an inmate claims to have an enemy within the Division of Corrections, the staff member receiving the claim shall notify case management staff, or a custody supervisor. If the enemy is housed at the same facility, a custody supervisor shall interview all inmates involved and determine whether the claimant shall be placed on administrative segregation pending further investigation. At the completion of the investigation, the case management specialist shall indicate on the Enemy Status form whether the inmate's claim has been verified. If the claim is verified, the information shall be entered on the OCMS Enemy Alert and Retraction screen. Per the PAQ in the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse was zero.

Interviews with the Agency Head stated protective actions to an inmate identified as subject to a substantial risk of imminent sexual abuse would immediately be separated from any threat that could include being moved, assigned to different housing, reassignment of cellmate, transferred to another facility and as a last result would be placed in protective custody.

Per the Warden Designee upon learning an inmate is subject to a substantial risk of imminent sexual abuse, a variety of measures would be initiated. The inmate at risk would immediately be removed from any area of threat and alternate housing would be initiated for placement to include administrative segregation if deemed necessary. An investigation would be conducted, and further actions would be based on the investigative findings.

Interviews with 17 random staff indicated upon being advised that an inmate was subject to a substantial risk of imminent sexual abuse, they would remove the inmate from the area of threat and contact their supervisor.

Based on the review of policy, the PAQ that identified zero inmates identified as a substantiated risk of imminent sexual abuse, and interviews with the MCTC Warden Designee and Agency Head Designee, the facility has demonstrated compliance with all the provisions of this standard.

115.63	Reporting to other confinement facilities
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 409 1362 925" style="list-style-type: none"> <li data-bbox="256 409 967 443">1. MCTC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 488 1362 566">2. DPSCS Executive Directive OPS.200.005 Inmate on Inmate Sexual Conduct-Prohibited <li data-bbox="256 600 1305 633">3. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited <li data-bbox="256 667 611 701">4. Investigative Case File <li data-bbox="256 734 520 768">5. Interviews with: <ol data-bbox="256 813 544 925" style="list-style-type: none"> <li data-bbox="256 813 480 846">a. Agency head <li data-bbox="256 880 544 913">b. Warden Designee <p data-bbox="256 958 1474 1574">115.63 (a) (b) (c) (d) Executive Directive OPS.050.0001 states that If a complaint of alleged sexual misconduct is received by a supervisor, manager, shift commander, or head of a unit at a facility other than the facility where the alleged sexual misconduct occurred, the managing official responsible for the facility receiving the complaint immediately, but not later than 72 hours of being notified of the incident shall notify: (i) If the incident occurred at another Department facility, the managing official of the facility where the incident occurred; (ii) If the incident occurred at a facility that is not under the authority of the Department, the facility head or agency head responsible for the facility where the incident occurred; and (iii) The IID, regardless of jurisdiction for the facility where the incident occurred and record the notifications made in accordance with this directive. An IID representative notified under this directive and the facility where the alleged sexual misconduct occurred (if it is a Department facility), shall follow up with the managing official responsible for the Department facility where the alleged sexual misconduct occurred to ensure that the complaint is addressed according to requirements established under this directive.</p> <p data-bbox="256 1619 1426 1731">Per an interview with the MCTC Warden Designee, the notification would be made from Warden to Warden and their designee upon being reported by an inmate and referred for an investigation.</p> <p data-bbox="256 1776 1458 1933">The PAQ identified one allegation of sexual abuse was forwarded to MCTC during the inmate housing at another DPSCS facility. It was determined the allegation was previously reported by the inmate during his designation at MCTC and the investigative finding was identified as unfounded.</p> <p data-bbox="256 1944 1458 2056">An interview with the Agency Designee indicated when allegations are reported to a facility that was alleged to have occurred at the inmate's previous facility, the allegation is to be reported to affected institution with 72 hours and the allegation is</p>

	<p>immediately reported to the IID Duty Officer for an investigation.</p> <p>Based on the review of policies, documents, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
--	--

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.200.0005 Inmate on Inmate Sexual Conduct-Prohibited 3. MCTC.050.0030.1 Sexual Misconduct - Prohibited 4. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 5. Review of PREA Investigations 6. Interviews with: <ol style="list-style-type: none"> a. Security First Responders b. Random Staff c. Inmates who reported sexual abuse <p>115.64(a) (b)Directives OPS.050.0001 and Directive OPS 200.0005 addresses the requirements of this standard. It indicates the first correctional officer responding to an incident of sexual misconduct shall respond by immediately stopping an incident in progress, if necessary arranging for separation of the victim from the abuser, immediately providing medical attention, if qualified, or arranging for appropriate medical attention, preserving the scene of the incident, and ensuring the victim and abuser are advised not to do anything that would contaminate or destroy physical evidence such as bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating. MCTC 050.0030.1 states staff first responders shall follow Directives OPS.OSPS.050.0030 and Directive OPS 200.0004 to safeguard the victim from further harm, ensure the scene is secured and inmates are housed appropriately.</p> <p>Directive OPS.050.0001 states, “that if the first employee responding to an incident of sexual misconduct is not a correctional officer, the employee shall immediately request that a correctional officer respond to the scene and take steps to ensure that the victim not do anything that might destroy physical evidence, i.e., brushing teeth,</p>

	<p>bathing, changing clothes, urinating, defecating, drinking, or eating.” Interviews with non-security staff indicated they were aware of their responsibilities as first responders. Staff reported that they would immediately separate inmates and maintain sight of a victim, initiated methods to preserve a crime scene that include advising the involved inmates not to shower, change clothing, brush teeth, eat, drink, or use the toilet.</p> <p>The PAQ identified one sexual abuse allegation was reported within a time period, that allowed for the collection of physical evidence, and as the number of times the first security staff member to respond to the report requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. However, this information was later identified as incorrect as there were zero instances where the collection of physical evidence was applicable.</p> <p>The facility identified 18 reports of sexual abuse and sexual harassment. Seventeen investigations were completed and reviewed by the auditing team. The reviewed investigative case files were identified as the following: 16 sexual abuse allegations and one (1) sexual harassment allegation. The allegations were reported through various methods to include verbally to staff, written notes to staff, and/or via the PREA Hotline.</p> <p>Interviews were conducted with six (6) inmates who reported sexual abuse who indicated upon reporting the allegation of sexual assault, staff responded immediately as statements were taken by supervisory staff and they were seen by medical staff. The alleged victims were not in the presence of the alleged aggressor and the allegations did not include penetration.</p> <p>Interviews were conducted with two security staff who served as first responders. Each staff indicated neither inmate reported sexual penetration and the reporting inmate was not in the presence of the alleged aggressor upon reporting the allegation. One security staff indicated upon being informed, he secured the victim in a secure area and notified his supervisor who assumed all responsibilities thereafter. A second security first responder indicated upon the inmate reporting an allegation of sexual abuse, he notified his supervisor, and was advised to escort the inmate to the medical department where his security supervisor assumed responsibility of the situation.</p> <p>Based on the review of policies, interviews with inmates who reported sexual abuse, random staff and staff who served as first responders, and review of sexual investigative case files, MCTC is identified as meeting all provisions of the standard.</p>
--	---

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. Facility Directive MCTC 050.0030.1 Sexual Misconduct - Prohibited 3. Interviews with: <ol style="list-style-type: none"> a. Warden Designee <p>Facility Directive MCTC.050.0030.1, identifies a plan of action for Warden/Designee, Chief of Security, MCTC PREA Compliance Manager, Case Management, Medical Staff, facility staff, facility practice, incident reporting and response, mental health, victim advocate services, cell assignment, investigations, completion of incident reviews, staff training, PREA First Responder Checklist, PREA Response and Containment Checklist, and PREA Follow-up. The Warden Designee confirmed the facility policy with the inclusion of the facility's coordinate response.</p> <p>Based on a review of the policy, interviews and analysis, the facility has demonstrated compliance with this standard.</p>
--	---

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. State Personnel and Pensions Article, §3-302, Annotated Code of Maryland 3. AFSCMET MOU 4. Interviews with: <ol style="list-style-type: none"> a. Agency Head Designee <p>115.66(a) AFSCME Maryland Memorandum of Understanding between the American Federation of State County and Municipal Employees & the State of Maryland Effective January 1, 2022, through December 21, 2023 Article 3. Management rights indicated "The employer retains the sole and exclusive authority to for the management to its operation and may exercise all right, powers, duties, authority and responsibilities conferred upon and invested to it by all laws including, but no limited to, the Collective Bargaining Law (Title 3, State Personnel and Pensions Article). Maryland law requires that management retain all basic rights. State Personnel and Pensions Article, §3-302, Annotated Code of Maryland regarding management's rights</p>

	<p>as provided by law was submitted for review. Items 1 through 8 documents specifically state that the Agency has the ability to manage their staff in the event that an issue were to occur related to many different issues, of which (3) states, hire, direct, supervise, and assign employees, and (4) states, promote, demote, discipline, discharge, retain, and lay off employees. The Agency Head designee reported that Maryland is a management rights state. DPSCS has discretion regarding the assignment, hiring and firing of staff and no limitations to the agency's ability to remove employee sexual abusers from contact with inmates.</p> <p>Based on a review of the MOU, interviews and analysis, the facility has demonstrated compliance with this standard.</p>
--	---

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 3. IIU.110.0011 Investigating Sexual Related Offenses 4. OPS. 200.0005 Inmate on Inmate Sexual Misconduct - Prohibited 5. Retaliation Monitoring forms 6. Interviews with: <ol style="list-style-type: none"> a. Agency Head b. Warden Designee c. MCTC PREA Compliance Manager d. Staff Assigned to Conduct Retaliation Monitoring <p>115.67 (a) (b) and (e) Directives OPS.200.0005 and Directive OPS.050.0001, states the head of a unit, or a designee, is responsible for ensuring 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. Directive IIU.110.001 also notes the agency's policy regarding retaliation monitoring and includes the definition of retaliation toward staff and the inmate population.</p> <p>The Directives states if retaliation is identified or feared take action to stop the actual</p>

or feared retaliation that may include the following: An application of available medical or mental health services or counseling; Changes to inmate housing assignments, change in inmate work assignments, disciplinary actions, staff work assignments, staff write-ups, inmate and/or staff change in behavior.

Per an interview with the Agency Head Designee, there are multiple ways to protect inmates and staff from retaliation for sexual abuse or sexual harassment allegations, the actions taken would be depended on the situation but could be housing changed, transfer of the abuser provide protective custody, and provide emotional support.

The Warden Designee indicated a variety of measures are in place to protect inmates and staff from retaliation from others. Staff assigned to conduct retaliation monitoring would individually meet with the identified inmate and/or staff and discuss any changes they may have occurred since reporting and/or cooperating with an investigation to include reviewing any discipline, housing and behavior changes and interaction with others. Staff would be monitored for unjustified work schedules and post assignments changes and interaction with others. An investigation would be initiated for those suspected of performing acts of retaliation against others to include inmates and staff.

A security supervisor (Lieutenant) was identified as staff assigned to conduct retaliation monitoring and was interviewed in regard to his duties in such role. He stated he initiates contact with each inmate within 7 days of the reported allegation but normally on the same day or his next workday. He further indicated the alleged aggressor would be relocated from the housing area of the alleged victim to prevent further interaction, unless the victim requested to be relocated from the area. He conducts monitoring of the victim for unjustifiable changes in job assignments, and housing assignments, in addition to disciplinary reports, and negative interaction with staff and other inmates. He added he has not encountered any instances where retaliation monitoring on a staff member was applicable, however he monitors unjustifiable changes in work assignments, disciplinary actions, denial for requested leave, and negative interaction with other staff. He indicated continue retaliation monitoring at 30-, 60- and 90-days intervals. At any time, the investigation is concluded as unfounded, the retaliation monitoring would end. If there are occurrences in which the continuation of monitoring in an excess of 90 days was required, he would continue.

115.67(c) (d) (f) Executive Directive OPS.050.0001, identifies changes that may suggest possible retaliation by inmates or staff, which may include, but is not limited to unreasonable or unjustified: Discipline; Changes in work or program assignments; Transfers or placements; or Denial of privileges or services. These must be monitored. The facility presented Retaliation Monitoring forms, that includes inmate name and case number, the facility, victim, report date, retaliation monitor and preliminary protection measures. The tracking portion of the form identifies housing changes, programming changes, disciplinary record, etc., as items to monitor, and provides a place for reporting within 7 days, at two weeks, within 30 days, within 60 days, final 90 days, and space for extended monitoring. It also includes a column for the retaliation monitor to include notations regarding negative interactions with staff or

inmates. The policy and retaliation monitoring form allows staff to discontinue retaliation monitoring upon the investigative finding being determined as unfounded.

A review of the 17 investigative case files identified retaliation monitoring was not completed in accordance with provisions of the standards (c), and (d) for either of the alleged victims. Specifically, although staff assigned to conduct retaliation monitoring indicated he conducted retaliation monitoring in accordance with the standard provisions and agency policy, it was not supported through documentation and interviews. The review of retaliation monitoring forms for the completed 16 sexual abuse investigations, and interviews with six (6) inmates who reported sexual abuse indicated retaliation monitoring was not conducted in accordance with agency policy and standard provisions (c) and (d). Although the retaliation monitoring forms noted the date requirements for monitoring and areas monitored, the forms did not include the required subject initial as noted "Meetings with Subject Monitor and & Subject Must Initial." Interviews with six (6) inmates who reported sexual abuse each indicated they had not spoken with staff regarding their reported allegation based on their concerns with retaliation from others and/or incidents they felt were harassment due to reporting the allegations. The investigative findings of the six (6) inmates interviewed included one (1) substantiated sexual abuse investigative finding, four (4) unsubstantiated sexual abuse investigative findings and one (1) unfounded sexual abuse investigative finding that remained pending beyond 30 days.

The agency has policies that outlines the procedures to conduct retaliation monitoring for completion, however a review of documentation and interviews with inmates who reported sexual abuse indicated staff failed to complete the retaliation monitoring in accordance with agency policy and the standard provision (c) and (d). Therefore, MCTC does not comply with the identified standard provisions.

Corrective Action:

The discrepancy in compliance with provisions (c) and (d) was identified during the site visit, through interviews with inmates who reported sexual abuse and further review of the retaliation monitoring forms. Upon being identified and reported to the MCTC PCM, a new security supervisor was assigned as staff to conduct retaliation monitor and received training by the MCTC PCM during the site visit. The newly assigned retaliation monitoring staff demonstrated an understanding of his role to serve as such during an interview with the lead auditor. The retaliation monitoring would be monitored monthly by the MCTC PCM during the corrective action period not to exceed 120 days from the site visit.

Correction Action Completed:

The MCTC reported five (5) allegations of sexual abuse during the corrective action review period. Each of the sexual abuse allegations were concluded as unsubstantiated by the assigned IID Investigators. Documentation supported each inmate was monitored for retaliation in accordance with all provisions to include c and d. Specifically, staff documented the monitoring of changes that may suggest possible retaliation by inmates or staff, which may include, but is not limited to unreasonable or unjustified: Discipline; Changes in work or program assignments;

	<p>Transfers or placements; or Denial of privileges or services. The facility presented retaliation monitoring forms, that included inmate name and case number, the facility, victim, report date, retaliation monitor and preliminary protection measures. The tracking portion of the forms identified housing changes, programming changes, disciplinary record, etc., as areas monitored, and documented monitoring periods within two (2) weeks, within 30 days, within 60 days, and final 90 days, and additional space available for extended monitoring if required. It also includes a column for the retaliation monitor to include notations regarding negative interactions with staff or inmates. Retaliation monitoring was completed for 90 days for four (4) and continued for the 90-day monitoring period during the conclusion of the corrective action phase for one (1) inmate. Therefore, MCTC has demonstrated compliance with all provisions of standard 115.67 a - that includes c and d..</p>
--	--

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DOC 100.0002 Case Management Manual 3. Interviews with: <ol style="list-style-type: none"> a. Warden Designee b. Staff Assigned to Supervise Segregation <p>115.68 (a) DOC.100.0002 Case Management Manual indicates that Protective Custody is appropriate when required for the protection of the inmate. It goes on to say, "every effort shall be made by Case Management Staff, and the managing official, to find suitable alternatives to protective custody housing." Suitable alternatives identified in the Case Management Manual include transfer of the inmate victim to another housing unit within the facility, a lateral transfer of the inmate victim to another facility of the same level, and transfer of the inmate's documented enemy, or enemies, to another facility. Every Protective Custody placement is reviewed every 30 days. Inmates housed in Protective Custody are allowed the same out-of-cell activity as in their regular housing unit, have the same access to Health Care and Case Management services, the same visiting opportunities, the same access to the library and legal reference materials, the same access to programming, including religious programming, and to educational programming. Any limitations of access to any of these opportunities must, by policy, be documented, including the</p>

	<p>reasons for the limitations.</p> <p>Per interviews with the staff assigned to supervise segregation, the facility does not house inmates in involuntary segregation who have alleged suffering sexual abuse. Inmates may request protective custody and/or may be placed in administrative segregation. Inmates assigned to administrative segregation have access the same access to the library and legal reference materials, access to programming, including religious programming, and educational programming. Any limitations of access to any of these opportunities must, by policy, be documented, including the reasons for the limitations.</p> <p>Per the Warden Designee, based on the nature of the cases, the victim could be placed in administrative segregation on a case-by-case placement which is a less restrictive unit and is not a punitive unit. Ideally placement would be for 72 hours to review the allegations reported during an investigation. However, alternate housing is also available at the facility that prevents the placement of involuntary segregation. There were no inmates in involuntary segregation who alleged to have suffered sexual abuse during the site visit and/or identified by the PAQ during the 12-month period.</p> <p>Based on the review of policies, interviews and analysis, the facility has demonstrated compliance with this standard.</p>
--	--

115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire 2. IIU.110.0011 Investigating Sexual Related Offenses 3. MD Correctional Services Title 10 State Correctional Facilities Subtitle 7, Internal Investigative Unit 4. OPS. 050.0001 Sexual Misconduct – Prohibited 5. OPS 200.0005 Inmate on Inmate Sexual Misconduct – Prohibited 6. Investigative Case Files <ol style="list-style-type: none"> a. Interviews With: b. IID Investigator c. Warden Designee

d. MCTC PCM

e. DPSCS PREA Coordinator

f. Inmates Who Reported Sexual Abuse

115.71 (a) Directive OPS. 050.0001, OPS 200.0005, IIU.110.0011, and MD Correctional Services Title 10 State Correctional Facilities Subtitle 7, Internal Investigative Unit governs the mandate of the standard provisions. Pursuant to the Directives an IID investigator, or an investigator designated by the IID, shall conduct a prompt, thorough and objective investigation of every complaint of alleged sexual misconduct according to applicable statutory, regulatory, case law contract, Department procedures, or other reasonably accepted standards.

Additionally to the extent possible, but in every case where the allegations of alleged sexual misconduct involves sexual abuse, the investigator assigned to investigate the allegation shall have received specialized training related to conducting sexual abuse investigations in a confinement setting that, at a minimum, specifically addresses: (a) interviewing sexual abuse victims; (b) Using Miranda and Garrity warnings; Sexual Abuse evidence collection; and criteria and evidence necessary to substantiate administrative action and, if appropriate, referral for criminal. Per an interview with an IID Investigator, the length of time in the initiation of an investigation of reported sexual abuse or sexual harassment depends on how the allegation is received. If an inmate reports to the hospital for a forensic examination, the IID Investigator would report to the hospital and meet with the inmate. If medical staff determine a SANE exam is not required, the investigator normally report to the institution within 7 days to meet with the inmate for sexual abuse cases. However, there are also times when cases could be delayed based on the lack of information given and the severity of allegations made. All third party and anonymously PREA allegations are conducted in the same manner as those directly reported and are not handled any differently.

115.71 (b) Pursuant to OPS.050.0001, to the extent possible, but in every case where the allegations of alleged sexual misconduct involves sexual abuse, the investigator assigned to investigate the allegation shall have received specialized training related to conducting sexual abuse investigations in a confinement setting that, at a minimum, specifically addresses: (a) interviewing sexual abuse victims; (b) Using Miranda and Garrity warnings; Sexual Abuse evidence collection; and criteria and evidence necessary to substantiate administrative action and, if appropriate, referral for criminal. OPS. 050.0001 and OPS.200.0005 states Department personnel assigned to conduct the investigation of alleged employee or inmate misconduct involving a sex related offense shall be trained in techniques related to conducting investigation of sex related offenses in the correctional setting in accordance with standard 115.34. An interview with an IID Investigator confirmed all IID Investigators are sworn law enforcement officers inducted by the Attorney General in Baltimore. The investigators attend training established by the Maryland Police and Correctional Training Commission for police to maintain certification, as well as advance training in investigative techniques.

115.71 (c) & (d) Directive OPS.200.0005 notes "An IID investigator, or an investigator designated by the IID, shall conduct a prompt, thorough and objective investigation of every complaint of alleged inmate on inmate sexual conduct according to applicable statutory, regulatory, case law, contact, Department or agency procedures, or other reasonable accepted standards related to: a) collecting and preserving evidence; b) interviewing victims, witnesses, and suspected perpetrators; c) conducting and using polygraph examination; d) identifying suspects; e) preserving an individual's person dignity and legal rights; f) and maintaining confidentiality of the investigation. An interview with an IID Investigator confirmed their methods of conducting investigations include those described in a - f. She added review available video footage, review phone calls of both the alleged victim and alleged perpetrator and conducting inmate and staff interviews. The Investigator would also report to the local hospital if there was a need for the alleged victim to be transported for a forensic examination for the DNA sample. She explained the DNA sample results could take several months.

The IID Investigators are sworn law enforcement by the Attorney General in Baltimore. Per an interview with the IID Investigator, they are authorized to do indictments and the suspect would be advised of their Miranda rights, but the investigators are not required to consult with prosecutors on whether compelled interviews may be an obstacle for subsequent criminal prosecution.

115.71.(e) Directive OPS.050.001 states a victim of sexual misconduct may not be compelled to submit to a polygraph or other truth-telling examinations as a condition for proceeding with an investigation of alleged sexual misconduct. Directive IIU.110.0011. page 8 section e. notes the credibility of a victim, witness or suspect shall be determined on an individual basis, regardless of the individual's status, for example employee or inmate. In addition, a victim may not be required to take a polygraph or other truth telling test to determine to proceed with an investigation of an incident involving a sex related offense. The IID investigator explained the determination of the findings is based on an individual basis of credibility of evidence recovered during the investigative process to include collection of available video surveillance, monitored phones, staff's logs, interviews, photographs, bed sheets, medical records, DNA collected and all other available evidence. She continued in stating at no time would the continuation to proceed with the investigation be based upon an alleged victim requirement to submit to the polygraph or truth-telling device. A sexual abuse alleged victim would never be asked to submit to a polygraph or truth-telling device. The review of the 17 completed investigative cases files did not identify a request for either inmate to submit to a polygraph and/or other truth telling device. Six (6) inmates who reported sexual abuse were selected for interview and reported they were not asked to submit to a truth telling device during the investigation. A review of the 17 completed investigative case files that included both sexual abuse and sexual harassment allegations indicated the investigative finding was concluded based on the evidence collected.

115.71 (f) Directive OPS.050.0001 and Directive OPS.200.0005 requires agency investigators to thoroughly document all aspects of the investigation in a written report as to best support subsequent administrative action and, if appropriate,

referral for criminal prosecution. Directive IIU.110.0011, section .05D 6 states, "Conduct post-incident investigation action to a comprehensive investigation of the incident that intends to: (a) Identify the perpetrator; (b) Determine if employee action or lack of action contributed to the occurrence; and (c) Collect and preserve evidence to effectively support an administrative and, if appropriate, criminal proceedings' with regard to 115.71 (f). An interview with an IID Investigator indicated all PREA investigation are initially opened as a criminal case and treated as such in the gathering and collection of evidence and those involved. At any time during the investigation there was evidence to support staff did not perform their rounds, or wasn't on post and or falsify the logs, an administrative investigation would be initiated on that staff while documenting their actions contributed to the prohibited act. A review of completed PREA cases did not identify staff inappropriately performing assigned duties that could have contributed to an alleged incident.

115.71 (g) Directive IIU.110.0011 states An investigator assigned to investigate an incident involving a sex related offense shall document all aspects of the investigation in a comprehensive investigative report that: (a) Thoroughly describes, physical, testimonial, and documentary evidence; (b) Explain the reasoning behind credibility assessment; (c) Include facts and findings; and (d) When appropriate, include related documents and (e) the report is maintained according to an established retention scheduled, which requires the report is maintained as long as the employee is employed by the Department or the inmate is under the authority of the Department plus five years. Directive OPS.050.0001reference upon the IID Investigator completing an investigation of a complaint of alleged sexual misconduct, the investigator shall: (a) Thoroughly documental all aspects of the investigation in a written report so as to best support subsequent administrative action and, if appropriate, referral for criminal prosecution; (b) Include in the report a determination indicating the complaint of alleged sexual misconduct to be Substantiated(the investigation determined the sexual misconduct occurred); Unsubstantiated (the investigation produced insufficient information to determine whether or not the alleged sexual misconduct occurred); or Unfounded (the investigation determined that the alleged sexual misconduct did not occurred).

115.71 (h) Directive 200.0005 Upon completing an investigation of a compliant of alleged inmate on inmate sexual conduct, the investigator: thoroughly document all aspects of the investigation in a written report so as to best support subsequent administration and action, if appropriate, referral for criminal prosecution Directive IIU.110.0011 indicate if an investigation finding is appropriate, the investigator shall work with the prosecutor to develop the case for criminal prosecution. An interview with the IID Investigator indicated all PREA allegations are initially opened as a criminal case until it is proven no criminal activity was committed. At that time, the case is completed as an administrative investigation.

115.71 (i) OPS.050.0001 and OPS.200.0005 requires the investigative files be filed and maintained in accordance with an established retention schedule which requires the report is maintained as long as the employee is employed by the Department, or the inmate is under the authority of the Department plus five years. An interview with an IID Investigator confirmed the retention schedule of the investigative files.

	<p>115.71 (j) Directive IIU.110.0011 states an investigation under this directive may not be terminated based on victim or suspect departure for Department employee or custody. The IID investigator confirmed whether staff is terminated or resigns, the investigation continues. The investigative staff would either go to staff's member home or request they report to the investigative staff. If an inmate is transferred, or released, an investigative staff would continue with the investigation.</p> <p>115.71 (k) (l) All administrative and criminal sexual abuse and/or sexual harassment investigations are conducted by the Department IID investigators. These investigators are sworn law enforcement officers with the State of Maryland. The investigative process was confirmed by the IID Investigator, Warden Designee, MCTC PCM and review of the investigative case files. Therefore, these provisions are not applicable.</p> <p>Based on the review of policies, investigative case files, and interviews, MCTC is compliant with all applicable provisions of the standard.</p>
--	--

115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire 2. IIU.110.0011 Investigation of Sexual Related Offenses 3. Interview With: <ol style="list-style-type: none"> a. IID Investigator <p>115.72 (a) OPS. IIU. 110.0011 indicates upon conclusion an investigation involving an inmate as a victim of a sex related offense, the investigative detective shall make their determination regarding substantiating the allegation based upon a preponderance of the evidence. A review of 17 investigative case files to include sexual abuse and sexual harassment, the investigative findings were determined on the collection of evidence recovered during the investigative process, to include interviews conducted, and physical evidence collect. The review of the investigative files confirmed the Department does not impose a standard higher than a preponderance of evidence in determining whether allegations of sexual abuse/sexual harassment is substantiated. An interview an IID Investigator confirmed the preponderance of evidence is the standard necessary to substantiate an allegation for sexual abuse/harassment through collected evidence and interviews.</p> <p>Based on a review of the relevant policy, review of investigative files and interview, it is determined that MCTC is compliant with the applicable provision of the standard.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. IIU.020.002 Investigating Sex Related Crimes 3. OPS.050.0001 – Sexual Misconduct – Prohibited 4. OPS.200.0005 – Inmate on Inmate Sexual Conduct – Prohibited 5. Inmate Notification of Investigative Findings 6. Interviews: <ol style="list-style-type: none"> a. Warden Designee b. IID Investigator c. Inmates Who Reported Sexual Abuse <p>115.73. (a) (b) (c) (d) (e) IIU.110.0011, OPS. 050.0001 and OPS. 200.0005 governs the mandates of the standard provisions. The Directives states upon concluding an investigation involving an inmate as victim of 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 Substantiated, Unsubstantiated, or Unfounded. Policies outline the investigator shall document victim notification in the investigative report to include the name of the individual who notified the victim: the date, time, and location that the victim was notified and how the victim was notified.</p> <p>The IID Investigator indicated that oftentimes the inmate is notified of the investigative findings during the interview process and or the investigator returns to the facility to notify the inmate and the notification of the investigative findings is included in the conclusion of the investigative report. Additionally, facility staff provides the inmate victim with a written copy of the investigative findings. Per the Warden Designee, inmates are notified of the investigative findings in writing by the MCTC PREA Compliance Manager. The auditing team conducted interviews with six (6) inmates who reported sexual abuse during the review period. Each All inmates indicated they received notification of the investigative findings by the IID Investigator, Facility Investigator and/or by the MCTC PREA Compliance Manager.</p> <p>DPSCS conducts its own administrative and criminal investigations that includes all sexual harassment and sexual abuse reported allegations. Therefore, this provision is not applicable.</p> <p>The Directives requires if an investigated incident involved an employee committing a</p>

	<p>sex related offense on an inmate and the incident was substantiated or unsubstantiated, the investigator will arrange for the inmate to be advised when the employee is no longer assigned to the inmate's housing unit, when the employee is no long employed at the facility, when, if known, the employee was indicted or charged with a sex related offense occurring at the facility, or if known, the employee was convicted of a charged related to a sexual related offense occurring at the facility. A review of the 17 completed investigative case files identified zero substantiated staff on inmate sexual abuse and/or sexual harassment investigative summaries during the 12-month review period.</p> <p>In accordance with the Directives, the investigator shall document victim notification in the investigative report to include the name of the individual who notified the victim: the date, time, and location that the victim was notified and how the victim was notified. An interview with the Warden indicated the assigned IID Investigators return to the facility to personally notify the inmates of the investigative findings. Although there were 18 PREA allegations reported during the 12-month review period, 17 were completed and reviewed. The 17 PREA investigations included 16 sexual abuse investigations and one (1) sexual harassment investigations. Documentation supported the inmates' notification of the investigative findings and by whom were documented in the conclusion of the investigation report by the IID investigator and a written notification by the MCTC PREA Compliance Manager.</p> <p>Per agency policy if an investigated incident involved an inmate committing a sex related offense on another inmate, the investigator will arrange for the victim inmate to be advised, if known that the perpetrator was indicted or a charge related to as related offense occurring at the facility: and if known, that the perpetrator was convicted of a charge related to a sex related offense occurring at the facility. Criminal charges were pursued for one inmate on inmate substantiated sexual abuse investigation. The victim received notification of the substantiated findings and the pending criminal charges against the aggressor for Sex Offense 4th Degree Sexual Contact and 2nd Degree Assault DOC Employee ETC, by the assigned IID Investigator.</p> <p>IU.110.001 states the victim reporting requirements under this standard shall terminate at the time the victim inmate is released for the DPSCS custody.</p> <p>Based on the review of policies, investigative summaries, inmate signature and verbal acknowledgment notification, interviews with IID Investigators, and Warden Designee and analysis, the facility has demonstrated compliance with all provisions with this standard.</p>
--	--

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Evidence Reviewed (documents, investigative files, interviews, and on-site visit)</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire 2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct – Prohibited 3. DPSCS Executive Directive IIU.110.0011 Investigating Sex Related Offenses 4. Review of Investigative PREA casefiles <p>115.76 (a) (b) (c) and (d) Executive Directive OPS. 050.0001.05 notes the Department does not tolerate sexual misconduct by an employee, by either omission or commission; and consider alleged or actual consent as a defense to an allegation of sexual misconduct. An employee is subject to disciplinary action, up to and including termination of employment with the Department if it is determined that the employee, except under exigent circumstances, did not perform responsibilities established under the directive or neglected or violated other duties or responsibilities that contributed to an incident of sexual misconduct. The directive further states an employee determined to have committed sexual misconduct is in violation of Department Standards of Conduct and is subject to a penalty under the Standards of Conduct, up to including termination of employment with the Department; Criminal prosecution; and if applicable, notification to a relevant licensing authority.</p> <p>Per the PAQ and review of the 17 completed PREA investigations, there were no substantiated allegations of staff sexual misconduct during the 12-month review period. Therefore, there were no disciplinary actions and/or termination of staff nor was there a requirement to report to a relevant licensing body.</p> <p>Based on the review of policy, interviews, and review of PREA investigative files, the facility meets all provisions of the standard.</p>
--	--

115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1.MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited 3. PREA Investigative Case Files 5. Interview with: <ol style="list-style-type: none"> a. Warden Designee

	<p>115.77 (a) (b) Executive Directive OPS.050.0001, Executive Directive OPS.200.0005, governs the mandate of the standard provisions. Agency policies identifies an employee 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 and includes: a contractor; an intern; a volunteer; and an employee of the Maryland Department of Education, Maryland Department of Labor, Licensing and Regulation, or Baltimore City Public Schools. Thus, these identified groups are subject to the same types of discipline employees are for such an infraction. OPS.050.001 states an employee may not: commit, participate in, support, or otherwise condone sexual misconduct. A contractor who does not perform responsibilities established under the directive is considered to be in violation of the terms of conditions of a contract or other agreement establishing the relationship between the contractor and the Department or agency. The contractor is subject to sanctions according to provisions of the contract or agreement and criminal prosecution.</p> <p>Per an interview with the Warden Designee, volunteers and contractors accused of sexual misconduct shall be prohibited from contact with the inmate population, denied entry into the facility and all other DPSCS facilities immediately until an investigation is completed. If the accusation is substantiated the individuals shall be terminated, and referred for criminal prosecution if the behavior is criminal in nature. Per the PAQ and review of the 17 completed investigative case files, zero volunteers and/or contractor were identified as an aggressor of sexual abuse and/or sexual harassment by the inmate population.</p> <p>Based on the review of policies, investigative case files, interviews policies and analysis, the facility is compliant with all provisions of this standard.</p>
--	--

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, on-site visit)</p> <ol style="list-style-type: none"> 1. OPS.050.0001 Sexual Misconduct - Prohibited 2. OPS. 200.0005 Inmate on Inmate Sexual Conduct - Prohibited 3. COMAR 12.03.01 Inmate Discipline 4. Criminal Court Documents 5. Interviews With: <ol style="list-style-type: none"> a. Warden Designee b. Mental Health Professional Counselor

115.78(a) (b) (c) DSPCS.020.0026 states The Department does not tolerate sexual abuse or sexual harassment of an inmate. The policy identifies sexual abuse of an inmate by another inmate to include the following acts, if the victim inmate does or does not consent, is coerced into the act by overt or implied threats of violence, or is unable to consent or refuse: (i) Acts listed under §§ .04B(3)(a)(i) and (ii) of this directive; (ii) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and (iii) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin breast, inner thigh, or the buttocks of another inmate, excluding contact incidental to a physical altercation. OPS.200.0005 states: The Department does not (1) Tolerate inmate on inmate sexual conduct; (2) Consider alleged or actual consent as a defense to an allegation of inmate-on-inmate sexual conduct. Title 12 DPSCS Subtitle 03 Operations Chapter 01 Inmate Disciplinary Process and COMAR 12.03.01 identify the inmate violation summary code has 117 – An inmate may not in any manner, arrange, commit, perform, or engage in a sexual act.

The facility reported 18 PREA allegations during the review period. The auditing team elected to review each of the 17 completed investigations that included one criminal investigative finding and one administrative sexual abuse investigative finding. The remaining 15 investigations were concluded as unfounded and/or unsubstantiated during an administrative investigation. The aggressor identified in the criminal investigation was found to be guilty “Sex Offense 4th Degree -Sex Contact” by the District Court for Washington. The victim identified in an administrative substantiated sexual abuse investigation elected to not pursue criminal charges. Sexual penetration was not identified in either the criminal and/or administrative investigation.

An interview with the Warden Designee indicated inmates identified as an aggressor during substantiated sexual abuse investigation would receive disciplinary sanction for violation of 117 – An inmate may not in any manner, arrange, commit, perform, or engage in a sexual act. He stated an inmate’s mental disability and mental illness would be considered when applying disciplinary sanctions. However, a review of the aggressors’ disciplinary history did not indicate discipline was applied.

115.78(d) OPS.200.0005 state: If therapy, counseling, or other intervention designed to address and correct underlying reasons or motivation for sexual conduct is available, may be required to participate in available therapy, counselling, or other intervention as a condition of participation in other forms of programming or inmate benefits that are otherwise subject to sanctioning under the Inmate Disciplinary Process. Per mental health staff, individual counseling sessions are offered to an identified aggressor, however the inmate has the option to participate or not. The inmates are required to acknowledge their signature a release of responsible noting their refusal.

115.78(e) OPS.200.005 states inmates, "May be disciplined for sexual conduct with staff only if it is determined that the staff did not consent to the sexual conduct." There were no substantiated cases of sexual abuse for staff on inmate and no incidents in which inmates were disciplined for sexual abuse for sexual abuse with staff only if it was determined that the staff did not consent to the sexual conduct. No

	<p>inmates were disciplined for sexual conduct with a staff member.</p> <p>115.78(f) OPS.200.0005 states, "A complaint of alleged inmate on inmate sexual conduct made in good faith based upon a reasonable belief that the alleged inmate on inmate sexual conduct occurred may not be considered a false report or lying, even if the required investigation does not establish sufficient evidence to substantiate the allegation of inmate-on-inmate sexual conduct." The PAQ identified zero inmates received disciplinary sanctions based on the determination of filing a false report during the reported allegation of sexual abuse and/or sexual harassment. This was confirmed during the review of the 17 completed PREA investigative case files.</p> <p>115.78(g) OPS.200.0005 states, "An inmate may not commit, participate in, support, or otherwise condone sexual conduct." Per interview with the Warden, the facility does not consider consensual sexual activity between inmates to be sexual abuse. Per the PAQ and an interview with the MCTC PCM, zero inmates received disciplinary sanctions for participating in sexual conduct activities that was not determined to be sexual abuse.</p> <p>Based on a review of policies, investigative case files, criminal court documents, interviews and analysis, the facility meets all provisions of the standard.</p>
--	--

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. MCTC 050.0030.1 Sexual Misconduct - Prohibited 3. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited. 4. Directive OPS.200.006 Assessment for Risk of Sexual Victimization and Abusiveness 5. Mental Health Referral Forms 6. Tracking Logs Documentation 7. Interviews with:

- a. Mental Health Professional Counselor
- c. Staff who conduct risk screening
- d. Inmates that disclosed during PREA Screening

115.81 (a) (b) Pursuant to MCTC.050.0030.1 if the screening indicates that an inmate who have previously perpetrated sexual abuse whether in an institutional setting or in the community, Mental Health staff shall offer a follow-up meeting with that inmate within 14 days of the screenings. The policy indicates an inmate identified as having experience prior sexual victimization would be seen by a Social Worker. OPS.200.006 states whenever screening indicates that an inmate has experienced prior sexual victimization, whether it occurred in a facility or in the community, the inmate is offered a follow-up with medical or mental health practitioner within 14 days of the initial PREA screening. All inmates are screened by medical staff on the day of arrival at the facility. Mental health referrals are offered by the intake officer during the 72-hour assessment and/or by the inmate's assigned case manager during the 30-day reassessment. The referral is offered based on the inmate's risk assessment scoring as prior sexual abuse victimization and/or previously perpetrated sexual abuse. Upon an inmate accepting to conduct a follow-up based on his risk screen scoring, the referral is forward to the appropriate department, social worker or mental health. Social workers are assigned to the mental health department. Interviews with intake staff and those staff who perform screening for risk of victimization indicated mental health referrals are available to all inmates who have experienced prior sexual victimization and inmates who were identified as an abuser. Per interviews with a social worker and mental health staff, staff document all inmates seen in reference to risk screenings and PREA allegations. Specifically, social workers are assigned to meet with all inmates who experience prior sexual abuse during risk screening. Mental Health staff are responsible for conducting all follow-up sessions with inmates who previously perpetrated sexual abuse within a correctional institution and/or community, in addition to all victims and aggressors of reported sexual abuse allegations at the facility.

The PAQ noted in the past 12 months, 100 % of inmates who have previously perpetrated sexual abuse, previously perpetrated sexual abuse and/or have experience prior sexual victimization as indicated during the screening, were offered a follow-up meeting with the social worker and/or a mental health practitioner. A review of these referrals confirmed the inmates met with the mental health upon the day of arrival and/or within 7 days of the referral. This was confirmed by the date of screening, date of referral, and date meeting was completed on the referral log.

The PAQ noted 100 % (16) inmates who reported sexual abuse during the risk screening. Documentation of follow-up sessions by both social workers and mental health are maintained through case notes and tracking logs. Documentation of services includes the date of the risk screening, date of the made referral, date received by mental health and whom the inmate was seen. The inmates were seen on the day of the submitted referral and/or within 7 days. Interviews with four (4) inmates who reported prior sexual victimization acknowledged their acceptance and/

	<p>or refusal for follow-ups. Two (2) inmates indicated they advised staff they were already on the mental health caseload, one (1) inmate indicated he refused the service and the fourth inmate indicated he was seen within a couple of days.</p> <p>115.81(c) MCTC is not a jail.</p> <p>115.81(d) OPS.050.0001 states that information concerning an alleged complaint of 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 misconduct and immediate and continued care of the victim. Per interviews with staff who conduct risk screening specific details related to sexual victimization or abusiveness are strictly limited. Hardcopies are maintained in secured file cabinets in designated areas that require authorized key accessibility. Electronic programs are maintained on a network drive and protected by password. Staff have access to the identification of victims and abusers as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments.</p> <p>115.81(e) The PAQ indicated that 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 eighteen. Interviews with medical and mental health staff confirm that they obtain informed consent prior to reporting any sexual abuse that did not occur in an institutional setting. The staff indicated that if an inmate under the age of eighteen reports any type of abuse, whether it be physical, mental, or sexual, they are required to report the information to the Department of Social Services as well as the security staff. However, MCTC does not house inmates under the age of 18 years old. A review of Mental Health Informed Consent and Limits of Confidentiality forms outlines the limitations of medical and mental staff of confidentiality that the inmate acknowledges via signature prior to the receipt of services. Per the staff, inmates are required to acknowledged via signature of medical and mental health staff limitations to confidential and their duty to report. Both medical and mental health staff indicated they have not encountered a situation where an inmate has refused to sign.</p> <p>Based on a review of policies, completed mental health follow-up documentation, interviews with staff and inmates, and analysis, the facility is compliant with all provisions of this standard.</p>
--	--

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <p>1. MCTC Completed Pre-Audit Questionnaire (PAQ)</p>

2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited.

3. Directive OPS.200.0005 Assessment for Risk of Sexual Victimization and Abusiveness

4. DPSCS Office of Clinical Services Inmate Health Medical Evaluations Manual Chapter 13 Sexual Assault on An Inmate

5. DPSC General Health Services Policy & Procedure Health Response to Sexual Abuse

6. PREA Investigative Casefiles

7. Medical and Mental Health Documentation

6. Interviews with:

a. Assistant Director of Nurses

b. Mental Health Professional Counselor

c. Inmates who reported sexual abuse

115.82(a) OPS.050.0001states supervisors, managers, and shift commanders are responsible for ensuring the safety of a victim of sexual misconduct, through a coordinated response to a complaint of sexual misconduct that includes referral for medical and mental health care follow up and non-medical or mental health related counseling services. The DPSCS General Health Services Policy & Procedure Health Response to Sexual Abuse provides procedures statements and facility guidance for response to sexual abuse. Following any report by an inmate concerning sexual assault, the inmate will be brought to medical for an examination to address any immediate medical needs. The clinician will identify and triage inmates that require medical intervention, and provide treatment (First Aide type, ice bandages etc.) necessary to stabilize the inmate prior to and during transfer to a facility for forensic examination. The review of

Interviews with both medical and mental health staff indicated victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Medical staff are assigned to the facility 24/7 and provide medical services within minutes of being notified. Per mental health staff, victims of sexual abuse are normally seen within 24 hours or the best business workday of reporting the allegation. Both indicated the nature and scope of the treatment and crisis intervention services provided to the victims are determined by the professional judgment of the medical and mental health treatment staff. Interviews were conducted with six (6) inmates who reported allegations of sexual abuse, and all indicated they were seen within minutes by medical staff after reporting the allegation to responding staff. Each inmate also acknowledged they were seen by mental health staff within a couple of days of the reported allegation. Documentation supported the selection of 26 inmates identified in sexual abuse allegations to include abusers and victims were seen by mental health not later than the following day of

	<p>the submitted referral. The investigative case files documented the inmates were evaluated by medical staff immediately upon reporting the allegation.</p> <p>115.82(b) OPS.050.0001 states, "The first correctional officer responding to an incident of sexual misconduct shall: (a) Ensure the safety of a victim of sexual misconduct by: (i) Immediately stopping an incident in progress, if necessary, arranging for separation of the victim from the abuser; and (ii) If applicable, immediately, if qualified, providing medical attention or arranging for appropriate medical attention. Interviews with two (2) security staff who served as first responders indicated upon notifying their immediate supervisor, the inmates were escorted to the medical department for an assessment. The inmates were not in the area of their alleged aggressor and neither inmate reported sexual penetration. Further protocols were initiated by supervisory staff.</p> <p>115.82(c) Chapter 13 outlines the requirement that the victim and alleged abuser shall be offered follow-up STI testing within 60-90 days of initial testing to include HIV, HCV, and syphilis serology in addition to other protocols regarding an allegation of sexual abuse. DPSCS Health has a policy which addresses the requirement of this provision which states, "prophylactic treatment and testing is offered to the patient, as well as follow-up care for sexually transmitted or other communicable diseases." MCTC is an adult male facility and does not meet the requirement of timely access to emergency contraception.</p> <p>A review of the PREA investigative case files indicated one (1) allegation of sexual penetration and forced oral sex was reported. The allegation was reported on April 9, 2022, and alleged to have occurred on January 31, 2022. Due to the length of time between the alleged sexual abuse and when reported, the on-call Regional Medical Director declined to have the victim transported to an outside hospital for a further medical examination. The inmate was referred for psychology, dental, and infectious control for testing of STI and HIV. The remaining 16 sexual abuse allegations did not include sexual penetration and included documentation of both medical and mental health assessments that confirmed all inmates were seen timely after reporting the allegation to include one (1) inmate who stated he could not identify his alleged aggressor.</p> <p>115.82(d) OPS.050.0001 and Chapter 13 governs the mandate of the standard provision that states all treatment services shall be provided to both parties (victim, and the alleged abuser) without financial cost and regardless of whether the victim names the abuse or cooperates with any investigation arising out of the incident. Interviews with both medical and mental health staff verified the services would be provided to inmates at no cost.</p> <p>Based on the review of policies, investigative case files, medical and mental assessments documentation, interviews and analysis, the facility is compliant with all provisions of this standard.</p>
--	--

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

	and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OPS.050.0001 Sexual Misconduct-Prohibited. 3. DPSCS Executive Directive OPS.200.0005 Inmate on Inmate Sexual Conduct-Prohibited 4. DPSCS Office of Clinical Services Inmate Health Medical Evaluations Manual Chapter 13 Sexual Assault on An Inmate 5. DPSCS Office of Clinical Services Inmate Health Medical Evaluations Manual Chapter 9 Continuity of Care 6. Interviews <ol style="list-style-type: none"> a. Assistant Director of Nurses b. Mental Health Professional Counselor c. Inmates who reported sexual abuse <p>115.83(a) DPSCS Office of Clinical Services/Inmate Health, Medical Evaluations Manual, Chapter 13-Sexual Assault addresses the requirements of this standard. Per Section I, Detainees/inmates reporting to have been sexually assaulted while in DPSCS custody shall be managed using guidelines consistent with the Prison Rape Elimination Act (PREA). An initial medical evaluation and subsequent intervention focused solely upon injury or trauma sustained during the assault shall be conducted.” DPSCS (YesCare) Health Procedure on Sexual Assault also provides procedures to follow in event of sexual abuse. In an interview with medical staff, indicated they would ensure the victim is stable and then provide follow up treatment plans for the physician or local hospital.</p> <p>Per Chapter 13, Section F of the Manual, within 4 (four) hours of return to the DPSCS facility, a clinician will review the emergency room notes, and write appropriate orders for care in the patient’s medical record. If the provider is off site, the emergency room protocol for review will be conducted and the disposition of care executed. Mental health staff are scheduled Monday through Friday 7:00 a.m. – 3:30 p.m. and complete the PREA screenings and see any follow-up referrals.</p> <p>115.83(b) Per Chapter 9, Section A of the Manual Inmates leaving DPSCS (Pre-Trial, Sentenced, and Home Detention Units) will be provided with information and access to systems that will enable them to continue care for diagnosed disease proceeds that was received while the inmate was incarcerated. As needed a confirmation of</p>

	<p>continued community follow-up services would be arranged prior to the inmate's departure from the facility and a continued community follow-up service was not applicable. Testing of the one inmate who identified sexual penetration results were identified as negative.</p> <p>115.83(c) Interviews with the Assistant Director of Nurses and Mental Health Professional Counselor indicated the level of care provided is consistent with the community level of care.</p> <p>115.83(d) & (e) MCTC does not house female inmates. Therefore, these provisions are not applicable.</p> <p>115.83(f) Per Chapter 13, Section F of the Manual, all follow-up testing related to Sexually Transmitted Infections (STI), pregnancy, HBV, RPR shall be reviewed with the inmate within 5 business days, including any additional testing or required treatment. Per Section M of the Manual, the patient and alleged abuser shall be offered follow-up STI testing within 60-90 days of initial testing to include HIV, HCV, and syphilis serology. Investigative case file reviewed indicated one (1) inmate reported a sexual abuse allegation that included sexual penetration. Documentation supported that he was offered HIV and STI testing. The remaining sexual abuse allegations did not identify sexual penetration.</p> <p>115.83(g) Per Chapter 13, Section O, of the Manual, all treatment services shall be provided without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Interviews with six inmates (6) who reported sexual abuse and review of the 16 sexual abuse investigative case files did not indicate any inmates they were held responsible for any financial cost to include the one (1) inmate who failed to identify his alleged aggressor.</p> <p>115.83(h) Per Chapter 13, Section K, of the Manual, an alleged abuser shall be offered mental health evaluation by a mental health professional within 30-60 days of the alleged assault or abuse. The Mental Health Professional Counselor confirmed a mental health evaluation of all known inmate-on-inmate abusers is completed within two days of receiving notification of substantiated sexual abuse allegations. Documentation confirmed both victims of sexual abuse and those identified as aggressors are assessed by mental health staff upon identified as such. All inmates were evaluated on the day of being referred and/or not later than the following day regardless of the investigative finding.</p> <p>Based on the review of policies, documentation, interviews and analysis, the facility is compliant with all provisions of this standard,</p>
--	--

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

1. DJRC Completed Pre-Audit Questionnaire (PAQ)
2. OPS.020.0027 PREA Investigations Tracking and Review
3. MCTC.050.0030.0 Sexual Misconduct - Prohibited
3. PREA Investigative Case File/Incident Reviews
4. Interviews with:
 - a. Warden Designee
 - b. DJRC PCM/Incident Review Team Member

115.86(a)(b)(c) OSP.S020.0027 states, "that except for sex related offenses that are investigated and determined to be unfounded, a facility incident review team shall, within 30 days after an investigation of a sex related offense is concluded, review the incident. It also indicates the facility incident review team shall consist of upper-level facility management officials designated by the facility managing official after consultation with the facility PREA Compliance Manager and have input from or access to line supervisors, investigators, and medical or mental health practitioners concerning the incident being reviewed. The PAQ noted the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents as 11. The correct number was identified as 12. Per MCTC.050.0030.0, the MCTC PREA Compliance Manager is to ensure an incident review was completed within 30 days of the conclusion of the investigation by IID. A review of the investigative case files confirmed the completion of an incident review within 30 days of each case that included two (2) substantiated and 10 unsubstantiated investigative findings.

115.86(d) OSP.S020.0027 requires that the team consider if the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status, gang affiliation, or other group dynamics at the facility, that the team examine the location where the incident allegedly occurred to determine if there are physical plan issues that may have contributed to the incident and assess staffing levels in the area and the need for monitoring technology to augment or supplement staffing in these areas. Per an interview with the MCTC PCM, she serve as a member of the incident review team and the reviews are scheduled weekly during the Reduction in Violence Meetings. Members of review team includes the Chief of Security, Warden, Assistant Warden, Facility Administrator, Segregation Supervisor, Investigative Captain, Major, mental health staff, medical and social workers. The review team discusses the area of the allegation, any physical barriers, violations in policy, staffing level at time of reported occurrence while making an identifiable recommendation.

115.86(e) OSP.S020.0027 requires the managing official to work with the facility's PCM to implement the facility incident review team's recommendations for

	<p>improvement from the review team; or if a recommendation is not implemented, document the reason for not adopting the recommendation. Per review of the completed incident reviews, and there were no recommendations made in the reports.</p> <p>Based on the review of policies, incident reviews, interviews and analysis, the facility is does meet all provisions of the standard.</p>
--	--

115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OSPS.020.0027 PREA Investigations Tracking and Review 3. DPSCS Website 5. Interviews with: <ol style="list-style-type: none"> a. DPSCS PREA Coordinator <p>115.87(a) OSPS.020.0027 says that the Department’s Internal Investigation Division, IID, is the primary investigative body for all PREA related allegations and is responsible for uniformly collecting and maintaining data regarding PREA related criminal and administrative investigations and for developing the forms to collect such data. Documentation provided included an information sheet entitled Incident-Based Data Collection. This outlines exactly what information is to be collected and reported on. The document identifies detailed information that must be collected regarding victim’s information, perpetrator information, staff perpetrator information, medical and mental health information, and information from investigations that were conducted.</p> <p>115.87(b) OSPS.002.0027, indicates that the DPSCS PREA Coordinator is responsible for aggregating the incident-based sexual abuse data annually. The DPSCS PREA Coordinator indicated he receives the data from the IIU and prepares the report based on that data. He collects data from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews and review the data collected with the Warden prior to writing the report. The report is based on the Fiscal Year.</p> <p>115.87(c) The DPSCS provided a copy of their most recent SSV-2 report that demonstrated that the data collected is at least sufficient to answer all questions on</p>

	<p>the survey conducted by the Department of Justice, the Survey of Sexual Violence.</p> <p>115.87(d) Directive OSPS.020.0027 also holds the DPSCS PREA Coordinator responsible for collecting, maintaining, and reviewing the data from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews. The DPSCS PREA Coordinator provided a tracking sheet that he uses to keep track of the data. It includes information such as name and number of inmates involved, both the inmate making the allegation and any known perpetrators or suspects, date of the allegation, investigative case number, the outcome of the investigation, date of closure of the case, name of the investigator assigned to the case, date of notification of inmate complainant and the nature of the complaint.</p> <p>115.87(e) Directive OSPS.020.0027, section .03B states, "The Department shall uniformly collect accurate data for every allegation of sexual abuse from each correctional facility under the authority of the Department to assess and improve effectiveness of sexual abuse prevention, detection and responsiveness." The Maryland Department of Public Safety and Correctional Services contracts with "Threshold, Inc." for its pre-release services. The DPSCS does aggregate incident-based sexual abuse data for "Threshold, Inc." at least annually. The annual reports contained aggregated data for "Threshold, Inc." These annual reports are published online and can be found on the agency website.</p> <p>115.87(f) Directive OSPS.020.0027, section .03B states, "The IID shall: (4) By June 30 of each calendar year, report sexual violence data from the previous calendar year to the Department of Justice." The DPSCS PREA Coordinator, provided a copy of the most recent SSV-2 which demonstrate that the information is submitted to the Department of Justice timely.</p> <p>Based on the review of policies, incident reviews, interviews and analysis, the facility is compliant with all provisions of this standard.</p>
--	--

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OSPS.020.0027 PREA Investigations Tracking and Review 3. DPSCS Website 4. 2021 Annual PREA Report

	<p>5. Interviews with:</p> <p>a. PREA Coordinator</p> <p>b. Agency Head Designee</p> <p>115.88(a-d) Section .05 C of OSPS.020.0027 addresses the requirement of this standard. The Directive indicates the DPSCS PREA Coordinator, or a designee shall aggregate the incident-based sexual abuse data annually. Maintain review and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews. Ensure that all aggregated sexual abuse data is included in an annual report that includes an assessment of the Department's sexual abuse prevention, detection, and response policies, practices, and training; If applicable, identifies Department-wide problem areas or problems within specific correctional facilities; Is used to facilitate corrective action at the Department and correctional facility levels; compares the current calendar year's data and activities with that available from previous years; Assess the Department's progress in addressing sexual abuse; and is approved by the Secretary and made available to the public through the Department's public and redacts information that would present a clear and specific threat to the safety and security of a correctional facility before publication.</p> <p>Per an interview with the DPSCS PREA Coordinator, the data is collected, on all cases, by IID, every year, and forwarded to him. He aggregates the data and compares the data to previous years, looking for patterns or for anything unusual or noteworthy. He writes the annual report for the Secretary's review and signature. Upon the Secretary approval and signature, it is published on the agency web site. He also indicated he does not typically include information that needs to be redacted.</p> <p>The auditor reviewed the website and verified the 2021 annual report was signed by the Secretary and published. A review of the report indicated a comparison of 2012 through 2021 data. The report is professionally written and addresses the requirement of this standard.</p> <p>Based on a review of policy, website, annual report, interview and analysis, the facility is compliant with all provisions of the standard.</p>
--	--

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCTC Completed Pre-Audit Questionnaire (PAQ) 2. DPSCS Executive Directive OSPS.020.0027 PREA Investigations Tracking and

	<p>Review</p> <p>3. Agency website</p> <p>4. 2021 Annual PREA Report</p> <p>5. Interviews with:</p> <p>a. PREA Coordinator</p> <p>Section C of OSPS.020.0027 addresses the requirements of this standard. The directive indicates the DPSCS Coordinator is responsible for completing an annual report and when approved by the Secretary it is made available to the public through the Department's public website. The report should redact information that would present a clear and specific threat to the safety and security of a correctional facility before publication indicating the nature of the redacted information and related personal identifiers. Securely maintain incident-based and aggregate data ensuring only authorized personnel have access to the information. Maintain sexual abuse data for at least 10 years from the date received.</p> <p>Per an interview with the Agency PREA Coordinator, he stated he writes the report that is published on the Department website. He does not include any information that presents a clear and specific threat to the safety and security of a correctional facility or personal identifiers in the report, so he does not have to redact anything. He also indicated the data is securely maintained for at least 10 years in computerized system and only authorized personnel has access. The auditor reviewed the agency website and confirmed the 2021 annual report was published. A review of the report indicated there were no personal identifiers.</p> <p>Based on the review of policy, website, annual report, interview and analysis, the facility is compliant with all provisions of this Standard.</p>
--	---

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.401 (a) (b) The facility is part of the Maryland Department of Public Safety and Correctional Services. This is the first year of the current cycle (fourth). A review of the agency's website https://dpscs.maryland.gov/prea/prea-audits.shtml confirmed all agency correctional facilities were audited during the previous three-year cycle and are visible to the public. The Department scheduled the facility audits within the three-year cycle, while one third were completed each year of the cycle.</p> <p>115.401 (h -n) The auditor received all requested documentation throughout the pre-audit, on-site visit, and post audit phases that included a sufficient sampling based on the size of the facility of case records, training records, investigative</p>

	<p>reports, additional program information and documents to support a conclusion of compliance with each PREA standard. An excess of the required number of staff and inmates were interviewed, and all were knowledgeable regarding PREA education and how to report. The auditor was granted access to tour and visit all areas of the facility. Inmates confirmed their observation of the notice of the audit posted throughout the institution that included the auditor's name and mailing address to submit confidential correspondence. The audit notice was posted on December 21, 2022, well in an excess of six weeks prior to the site visit. Per an interview with mailroom staff, inmates are allowed to forward confidential correspondence to the auditor in the same manner as mail addressed to a legal counselor. The auditing team did not receive any confidential letters and/or request for interviews from the inmate population and/or staff.</p>
--	--

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.43 (f) A review of the agency's website https://dpscs.maryland.gov/prea/prea-audits.shtml confirms all agency correctional facilities PREA audits are posted and visible to the public. The most recent PREA audit posted on the agency's website for MCTC is dated September 4, 2020.</p>

Appendix: Provision Findings**115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

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

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

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

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
--	-----

Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
--	-----

Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
--	-----

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

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

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

115.12 (a) Contracting with other entities for the confinement of inmates

If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
---	----

115.12 (b) Contracting with other entities for the confinement of inmates

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na
---	----

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(f)			
	<table><tr><td data-bbox="316 174 1289 568"><p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p></td><td data-bbox="1289 174 1490 568">yes</td></tr></table>	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes
<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes		