PREA Facility Audit Report: Final

Name of Facility: Williams County Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA **Date Final Report Submitted:** 05/29/2024

| Auditor Certification | | |
|---|--|---------|
| The contents of this report are accurate to the best of my knowledge. | | |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | | |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | | |
| Auditor Full Name as Signed: Darnel Carlson Date of Signature: 05 | | 29/2024 |

| AUDITOR INFORMATION | | |
|----------------------------------|-----------------------|--|
| Auditor name: | Carlson, Darnel | |
| Email: | dmcarlson16@gmail.com | |
| Start Date of On- Site Audit: | 03/05/2024 | |
| End Date of On-Site Audit: | 03/07/2024 | |

| FACILITY INFORMATION | | |
|----------------------------|--|--|
| Facility name: | Williams County Correctional Center | |
| Facility physical address: | 223 East Broadway Suite 302, Williston, North Dakota - 58801 | |
| Facility mailing address: | | |

Primary Contact

| Name: | Thomas Carr |
|-------------------|---------------------------|
| Email Address: | ThomasC@co.williams.nd.us |
| Telephone Number: | 701-577-4537 |

| Warden/Jail Administrator/Sheriff/Director | | |
|--|---------------------------|--|
| Name: | Verlan Kvande | |
| Email Address: | verlank@co.williams.nd.us | |
| Telephone Number: | 701-577-7700 | |

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

| Facility Health Service Administrator On-site | | |
|---|-----------------------------|--|
| Name: | Jennifer May | |
| Email Address: | JenniferM@co.williams.nd.us | |
| Telephone Number: | 701-713-3521 | |

| Facility Characteristics | | |
|---|------------------------|--|
| Designed facility capacity: | 246 | |
| Current population of facility: | 87 | |
| Average daily population for the past 12 months: | 85 | |
| Has the facility been over capacity at any point in the past 12 months? | No | |
| Which population(s) does the facility hold? | Both females and males | |

| Age range of population: | 18-69 |
|---|--|
| Facility security levels/inmate custody levels: | minimum, medium, maximum, administrative segregation, protective custody |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 43 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 0 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 2 |

| AGENCY INFORMATION | | |
|---|--|--|
| Name of agency: | Williams County Sheriff's Office | |
| Governing authority or parent agency (if applicable): | | |
| Physical Address: | 223 East Broadway Suite 302, Williston, North Dakota - 58801 | |
| Mailing Address: | | |
| Telephone number: | 7015774585 | |

| Agency Chief Executive Officer Information: | | |
|---|---------------|--|
| Name: | Verlan Kvande | |
| Email Address: | | |
| Telephone Number: | 7015777700 | |

| Agency-Wide PREA Coordinator Information | | | |
|--|-----------------|----------------|---------------------------|
| Name: | Alexis Sprecher | Email Address: | alexiss@co.williams.nd.us |

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: | 2024-03-05 | |
| 2. End date of the onsite portion of the audit: | 2024-03-07 | |
| Outreach | | |
| 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility? | YesNo | |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated: | Northwest Human Services Center | |
| AUDITED FACILITY INFORMATION | | |
| 14. Designated facility capacity: | 246 | |
| 15. Average daily population for the past 12 months: | 85 | |
| 16. Number of inmate/resident/detainee housing units: | 9 | |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | Yes No Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) | |

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit 74 **36.** Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit: 0 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: 39. Enter the total number of inmates/ 2 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: 40. Enter the total number of inmates/ 0 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: 41. Enter the total number of inmates/ 0 residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit: 42. Enter the total number of inmates/ 0 residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: 43. Enter the total number of inmates/ 0 residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:

| 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: | 1 |
|---|-------------------|
| 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: | 1 |
| 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: | 0 |
| 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: | 31 |
| 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: | 2 |

| 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: | 0 |
|---|--|
| 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: | 14 |
| 54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply) | Age Race Ethnicity (e.g., Hispanic, Non-Hispanic) Length of time in the facility Housing assignment Gender Other None |
| 55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse? | I selected at least one confined person from each occupied housing unit based on age, race, length of stay, and gender. |
| 56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews? | YesNo |

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):

The confined persons selected by the auditor agreed to be interviewed.

Targeted Inmate/Resident/Detainee Interviews

58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:

2

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".

60. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:

0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:

Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.

The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The PAQ did not identify any confined persons who met the criteria under the targeted interview categories as physically disabled. Documents reviewed at the facility, observations onsite, medical staff, and correctional staff did not disclose any information about physically disabled confined persons being housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify there weren't any physically disabled confined persons in the facility.

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:

0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:

Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.

The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The PAQ did not identify any confined persons who met the criteria under the targeted interview categories with a cognitive or functional disability. Documents reviewed at the facility, observations onsite, and conversations with other confined persons, medical staff, and facility staff did not disclose any information about cognitively or functionally disabled confined persons being housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify there weren't any cognitively or functionally disabled confined persons in the facility.

| 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: | 0 |
|--|---|
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed. |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | The PAQ did not identify any confined persons who met the criteria under the targeted interview categories who are blind or have low vision. Documents were reviewed at the facility, observations were made on site, and conversations with other confined persons, medical staff, and facility staff did not disclose any information about blind or low-vision confined persons being housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify that there were no blind or low-vision confined persons in the facility. |
| 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: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed. |

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The PAQ did not identify any confined persons who met the criteria under the targeted interview categories who are deaf or hard of hearing. Documents were reviewed at the facility, observations were made on site, and conversations with other confined persons, medical staff, and facility staff did not disclose any information about deaf or hard-of-hearing confined persons being housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify that there were no deaf or hard-of-hearing confined persons in the facility.

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:

0

- a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:
- Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.
- The inmates/residents/detainees in this targeted category declined to be interviewed.
- b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The PAQ did not identify any confined persons who met the criteria under the targeted interview categories for limited English proficiency. Documents were reviewed at the facility, observations were made on site, and conversations with other confined persons, medical staff, and facility staff did not disclose any information about limited English-proficient persons housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify that there were no limited English-proficient confined persons in the facility.

| 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: | 0 |
|--|---|
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | ■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed. |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | The PAQ did not identify any confined persons who met the criteria under the targeted interview categories who identified as lesbian, gay, or bisexual. Documents were reviewed at the facility, observations were made on site, and conversations with other confined persons, medical staff, and facility staff did not disclose any information about confined persons who identified as lesbian, gay, or bisexual being housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify that there weren't any confined persons identifying as lesbian, gay, or bisexual in the facility. |
| 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: | 1 |
| 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: | 0 |

| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | ■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed. |
|--|--|
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | The PAQ did not identify any confined persons who met the criteria under the targeted interview categories who reported sexual abuse. Documents were reviewed at the facility, observations were made on site, and conversations with other confined persons, medical staff, and facility staff did not disclose any information about confined persons who reported sexual abuse being housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify that there weren't any confined persons who reported sexual abuse. |
| 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: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | ■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed. |
| | |

b. Discuss your corroboration strategies The PAQ did not identify any confined persons to determine if this population exists in who met the criteria under the targeted the audited facility (e.g., based on interview categories who disclosed prior information obtained from the PAQ; sexual victimization. Documents were documentation reviewed onsite; and reviewed at the facility, observations were discussions with staff and other inmates/ made on site, and conversations with other residents/detainees). confined persons, medical staff, and facility staff did not disclose any information about confined persons who disclosed prior victimization housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify that there were no confined persons who reported prior sexual victimization in the facility. 69. Enter the total number of interviews 0 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: Facility said there were "none here" during a. Select why you were unable to conduct at least the minimum required the onsite portion of the audit and/or the number of targeted inmates/residents/ facility was unable to provide a list of these detainees in this category: inmates/residents/detainees. The inmates/residents/detainees in this

targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).

The PAQ did not identify any confined persons who met the criteria under the targeted interview categories who were placed in segregated housing/isolation for risk of sexual victimization. Documents were reviewed at the facility, observations were made on site, and conversations with other confined persons, medical staff, and facility staff did not reveal any confined persons who were placed in segregated housing/isolation for risk of sexual victimization housed there. I spoke with the PREA Coordinator and PREA Compliance Manager to verify that there weren't any confined persons in segregated housing/isolation for risk of sexual victimization. The Jail Captain confirmed that segregated housing is generally not used to house confined persons 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):

The randomly selected confined persons selected to interview all cooperated with the process.

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews 71. Enter the total number of RANDOM STAFF who were interviewed: 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply) Shift assignment Work assignment Rank (or equivalent) Other (e.g., gender, race, ethnicity, languages spoken) None

| If "Other," describe: | Male and female detention deputies were interviewed. |
|--|---|
| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews? | Yes 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): | The staff was cooperative and willing to be interviewed. No barriers were encountered when selecting or interviewing staff. |
| 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): | 10 |
| 76. Were you able to interview the Agency Head? | Yes No |
| 77. Were you able to interview the Warden/Facility Director/Superintendent or their designee? | YesNo |
| 78. Were you able to interview the PREA Coordinator? | Yes No |

| 79. Were you able to interview the PREA Compliance Manager? | Yes |
|---|--|
| | ○ No |
| | NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

| 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 |

| | Other |
|---|---|
| If "Other," provide additional specialized staff roles interviewed: | Deputy in charge of training |
| 81. Did you interview VOLUNTEERS who | ● Yes |
| may have contact with inmates/ residents/detainees in this facility? | ○ No |
| a. Enter the total number of VOLUNTEERS who were interviewed: | 1 |
| b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply) | ■ Education/programming |
| | ☐ Medical/dental |
| | ■ Mental health/counseling |
| | Religious |
| | Other |
| | |
| 82. Did you interview CONTRACTORS who may have contact with inmates/ | Yes |
| residents/detainees in this facility? | ● No |
| 83. Provide any additional comments | Staff and volunteers were available for |
| regarding selecting or interviewing specialized staff. | interviews. |

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.

| 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? | |
| Was the site review an active, inquiring proce | ess 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, crossgender viewing and searches)? | |
| 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)? | |
| 87. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)? | YesNo |
| 88. Informal conversations with staff during the site review (encouraged, not required)? | YesNo |
| | |

| 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?



O No

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

While onsite, staff training records, supervisory round logs, and video reviews were completed.

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 | |
|---|--|------------------------------|--|---|
| Inmate- on- inmate sexual abuse | 1 | 0 | 1 | 0 |
| Staff- on- inmate sexual abuse | 1 | 0 | 1 | 0 |
| Total | 2 | 0 | 2 | 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 | 3 | 0 | 3 | 0 |
| Staff-on- inmate sexual harassment | 3 | 0 | 3 | 0 |
| Total | 6 | 0 | 6 | 0 |

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detained 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 | 2 | 1 | 0 |
| Staff-on-inmate sexual harassment | 0 | 2 | 1 | 0 |
| Total | 0 | 4 | 2 | 0 |

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

| 98. Enter the total number of SEXU | 4L |
|-------------------------------------|----|
| ABUSE investigation files reviewed/ | |
| sampled: | |

2

| 99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | Yes No NA (NA if you were unable to review any sexual abuse investigation files) |
|---|---|
| Inmate-on-inmate sexual abuse investigation | files |
| 100. Enter the total number of INMATE- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 1 |
| 101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? | Yes No NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations? | Yes No NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| Staff-on-inmate sexual abuse investigation fil | es |
| 103. Enter the total number of STAFF- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 1 |
| 104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? | Yes No NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) |

| 105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations? | Yes No NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) |
|---|--|
| Sexual Harassment Investigation Files Select | ed for Review |
| 106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled: | 7 |
| 107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | Yes No NA (NA if you were unable to review any sexual harassment investigation files) |
| Inmate-on-inmate sexual harassment investig | pation files |
| 108. Enter the total number of INMATE- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: | 3 |
| 109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations? | Yes No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) |
| 110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations? | Yes No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) |

| Staff-on-inmate sexual harassment investigation files | | | |
|--|---|--|--|
| 111. Enter the total number of STAFF- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: | 4 | | |
| 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. | A total of nine administrative investigation files were reviewed. One staff-on-inmate sexual harassment allegation investigated was found not to be PREA related. | | |
| SUPPORT STAFF INFORMATION | | | |
| DOJ-certified PREA Auditors Support S | taff | | |
| 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 preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. | Yes No | | |

| Non-certified Support Staff | |
|--|---|
| 116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the preonsite 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

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

Auditor Discussion Instructions

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

115.11

Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Meets Standard

Auditor Discussion

The Agency has implemented a zero-tolerance policy as detailed in facility policy #606, which addresses the Agency's approach to preventing, detecting, and responding to all forms of sexual abuse and sexual harassment. The policy also outlines prohibited behavior and includes basic definitions outlined in this standard. Policy #306 outlines discipline for staff, volunteers, and contractors who violate sexual abuse and harassment policies. Facility policy #600 outlines discipline for confined persons who violate sexual abuse and harassment policies. The twelve staff interviewed knew their responsibilities under their Agency's zero-tolerance policies. They were able to explain the training and how they would respond to reported or actual sexual abuse. The sixteen confined persons interviewed confirmed receiving and understanding the Agency's zero-tolerance policy and how to report allegations.

The jail lieutenant serves as the designated PREA coordinator, ensuring the effective implementation of the zero-tolerance policy. As outlined in the organizational chart, the lieutenant reports directly to the Jail Captain, who reports to the Sheriff. The Lieutenant has dedicated time to developing, implementing, and overseeing the

Agency's efforts toward PREA compliance.

The Agency operates one facility but has developed a PREA team of a Sergeant and the Security Deputy. The Security Deputy is assigned as the PREA Compliance Manager, who works with the Lieutenant to oversee the Agency's efforts toward PREA compliance.

115.12 Contracting with other entities for the confinement of inmates Auditor Overall Determination: Meets Standard Auditor Discussion The Agency does not contract with other agencies for the confinement of its confined persons.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility reports an average daily population of 77 confined persons. On the first day of the onsite audit, there were 74 confined persons in custody. The staffing plan is based on 246 confined persons. The DOCR inspectors found the facility to be compliant in November 2023 with Standard 003 - Grade, Classification, and Population on the North Dakota Department of Corrections and Rehabilitation (DOCR) inspection report that states, "The Director of the DOCR shall notify each correctional facility administrator of the approved correctional facility grade classification, approved inmate classifications, and total number of individuals who may be confined in the correctional facility." The staffing plan includes considerations outlined in paragraph (a) of this standard and approval from the Director of the DOCR. The Jail Captain and Lieutenant review the staffing plan every four weeks for compliance. An annual review is conducted with the Jail Captain, Lieutenant, and the PREA Compliance Manager. The facility reports on the PAQ that there have not been any deviations from the staffing plan. The staffing plan was adjusted, and a flex team was added. The flex team is scheduled to work during higher activity times. Based on observations during the onsite audit, staffing was at a level to complete all required jail operation duties. Sergeants, Corporals, and Correctional Deputies rotate between day and night shifts every two months.

Facility policy #606.3 requires supervisory staff to conduct and document unannounced rounds. The Sergeant or Corporal conducts unannounced rounds on every shift, covering all periods. The Sergeants interviewed understood the purpose of conducting unannounced rounds.

Facility policy #606, a review of the staffing plan, a review of the unannounced rounds log and video review, and interviews with the Jail Captain, Lieutenant, Sergeant, and PREA Compliance Manager demonstrated compliance with this standard.

| 115.14 | Youthful inmates |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The agency does not house juvenile offenders as outlined in facility policy #506. |

Auditor Overall Determination: Meets Standard Auditor Discussion In adherence to its commitment to respect individual rights, the facility reported on the PAQ that one cross-gender pat search and strip search were conducted in the past twelve months. The facility does not conduct cross-gender strip searches or visual

the PAQ that one cross-gender pat search and strip search were conducted in the past twelve months. The facility does not conduct cross-gender strip searches or visual body cavity searches except in exigent circumstances.

Facility policy #514.3 prohibits male staff from patting down female confined persons except in emergencies. The facility reported on the PAQ that there had been zero patdown searches of female confined persons by male staff in the past twelve months. The twelve staff interviewed confirmed that at least one male and one female deputy are always on duty. Staff said that female deputies search female persons, and male deputies search male persons. Four female confined persons were interviewed, and it was verified that they hadn't been prohibited from attending activities outside the housing unit. The female persons interviewed said a female deputy has always been on duty.

Facility policy #501.6 requires that cross-gender searches be documented in the shift log and incident report, and facility policy #514.2 requires all cross-gender pat-down searches to be documented.

Facility policy #801.12 ensures that confined persons can shower, perform bodily functions, and change clothing in privacy. It also requires staff of the opposite gender to announce their presence when entering a housing unit. The twelve staff interviewed confirmed that confined persons are given privacy, and they announce themselves when entering an opposite-gender housing unit. The sixteen confined persons interviewed said they are given privacy, and staff of the opposite gender announce themselves before entering the housing unit.

Facility policy #514.4 prohibits staff from searching or physically examining a transgender or intersex confined person for the sole purpose of determining a person's genital status. A confined person who met the criteria of a targeted class confirmed private showers are available.

The facility reported on the PAQ that 100 percent of the staff were trained to conduct cross-gender pat searches and searches of transgender and intersex confined persons. The twelve staff interviewed explained the training and how they would conduct cross-gender, transgender, and intersex pat searches.

The facility must comply with Standard 036 - Searches-Clothed and Unclothed.

Correctional facilities shall have a written policy and procedure for clothed and unclothed searches of inmates. The policy and procedure must include the following:

- Licensed medical personnel may conduct manual, visual, or instrument searches of body cavities based upon reasonable suspicion and within the scope of their licensure.
- Licensed medical personnel may conduct cross-gender unclothed body searches. Facility staff must document any cross-gender unclothed body searches by medical personnel.
- Cross-gender unclothed body searches of male or female inmates may not be conducted absent exigent circumstances. Facility staff shall document all such searches, including the exigent circumstances for the search.
- Correctional staff may conduct unclothed body searches of individuals who
 will not be placed in the general population when the individuals are in the
 facility for a crime of violence, a crime involving illegal drugs, or the unclothed
 body search is based on reasonable suspicion the inmate may be concealing
 drugs, weapons, or other contraband.
- Correctional staff may conduct unclothed body searches of inmates who will be placed in general population.
- Correctional staff may conduct unclothed body searches of inmates who have had personal contact visitation or who have exited and returned into the facility.
- Unclothed body searches must be conducted where they cannot be observed by any other individuals not involved in the search. Visual inspections must be non-intrusive and may not involve touching the inmate.
- Cross-gender clothed searches may not be conducted on female inmates absent exigent circumstances. Facility staff shall document all cross-gender clothed searches of female inmates, including the exigent circumstances for the search.
- PREA requirements, including:
- Staff may not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.
- If the inmate's genital status is unknown, it may be determined through conversation 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.

- If it is determined either through assessment or through admission by the inmate that an inmate is transgender or intersex, the person responsible for the screening or the search shall ask the inmate if they prefer to be searched by a male or female officer and document the response.
- If the inmate does not have a preference or if a search must be completed by someone not of the inmate's preferred gender because of security concerns, available staff may conduct the search and document the reason the person was searched by someone, not of the inmate's preferred gender.

The agency must comply with the North Dakota Department of Corrections and Rehabilitation (DOCR) standards to pass the facility inspection.

Facility policies #501, #514, and #801, a review of training records and a report of a cross-gender pat search and strip search, compliance with the DOCR facility inspection on December 27, 2023, interviews with twelve jail staff, fifteen confined persons, and one confined person who identifies with a targeted class demonstrated compliance with this standard. The incident report outlining the circumstances of the conducted searches confirmed this was an isolated incident based on information known to the agency during the initial intake process.

115.16

Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility contracts with the Language Line to accommodate limited English-proficient confined persons. Persons are given a tablet that offers multiple language options. Kiosks in the housing units provide multiple language options for a confined person to read the handbook and PREA tab. Hard copies of documents are available in Spanish. A staff member will verbally orient confined persons with intellectual disabilities, blind, or limited reading skills.

Facility policy #606.6 prohibits using inmate interpreters, readers, or other inmate assistants, except in limited circumstances where an extended delay could compromise the inmate's safety. The twelve facility staff interviewed stated they would only use professional services for translation. To the best of their knowledge, inmate interpreters, readers, or other types of inmate assistants have not been used concerning sexual abuse or harassment allegations.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

Facility policy #105.4.1 and the Recruitment and Selection Policy prohibit hiring or promoting staff members or hiring contractors who may have contact with confined persons who have engaged in the prohibited conduct specified in paragraph (a) of this standard. Any incidents of sexual harassment will be considered in determining whether to hire or promote anyone or retain the services of any contractor who may have contact with confined persons. The H.R. representative confirmed that incidents of sexual harassment are considered during the hiring process.

The agency conducts a comprehensive criminal background check on all potential new employees, staff promotions, contractors, and volunteers. This check is not limited to local records but extends to Federal and State registers, ensuring a thorough review of the individual's history. The H.R. representative confirmed that these background checks are consistently completed as required.

Facility policy #606.3 mandates follow-up criminal background records checks on all staff or contractors who may have contact with inmates once every five years. The H.R. representative confirmed that background checks are conducted every five years. Five-year background checks were conducted on August 31, 2023. Staff are asked annually the three questions outlined in paragraph (a) of this standard.

New applicants and staff applying for promotions are asked the three questions outlined in paragraph (a) of this standard. Facility policy #104.2 requires staff who may have contact with inmates to disclose any conduct described in paragraph (a) of this standard. The H.R. representative confirmed that these questions are prominently featured on the applications.

Facility policy #105.5 underscores the gravity of providing false information or material omissions. Such actions are grounds for immediate termination.

The H.R. representative confirmed that any request for information from an institutional employer about a former employee's previous misconduct would be shared when a signed release of information is provided unless prohibited by law.

The H.R. representative had a complete understanding of the PREA standards and the requirements related to hiring and promotions.

Facility policy #105, facility policy #606, facility Recruitment and Selection policy, document review, and the interview with the H.R. representative demonstrated compliance with this standard.

115.18 Upgrades to facilities and technologies

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility reports in the PAQ that since the last PREA audit, the agency has not acquired a new facility or completed any substantial modifications to the building. However, it's crucial to emphasize that the agency remains steadfast in its commitment to PREA compliance. The Sheriff and Jail Captain have reiterated that PREA will be a key consideration in all future modifications.

The Jail Captain informed this auditor that seventeen cameras have been strategically added, with ten to fifteen being a direct result of annual security walk-throughs and DOCR inspections. This proactive measure demonstrates the agency's commitment to maintaining a safe and secure environment.

The Sheriff and Jail Captain, as the key leaders of the facility, are resolute in their commitment to ensuring the safety and security of all individuals within the facility, including staff, visitors, and confined persons.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The Williams County Sheriff's Office employs highly trained, licensed investigators who are adept at handling criminal investigations of sexual abuse and harassment allegations. These investigators are well-versed in the uniform evidence protocol outlined in the Sheriff's Office Sexual Abuse Investigative policy and the 2014 Fifth Edition North Dakota Sexual Assault Evidence Collection Protocol. Their expertise ensures the maximum potential for obtaining usable physical evidence. During interviews, jail staff were asked to explain their responsibilities as a first responder. All staff members presented their duties and confirmed their responsibility to secure the scene until a trained deputy or licensed investigator arrived.

Forensic medical examinations are conducted in the CHI St. Alexius Health emergency department in Williston, North Dakota

(https://www.chistalexiushealth.org/locations/williston). The hospital's SANE program follows a uniform evidence protocol for conducting forensic medical examinations. The SART protocol, designed with the victim's needs in mind, requires the hospital to contact an advocate. With the victim's approval, the advocate will accompany the victim through the forensic medical examination and provide emotional support. As facility policy #606.10 outlines, treatment services shall be provided to the victim without financial cost.

The facility uses the Northwest Human Service Center (https://www.hhs.nd.gov/HSC/northwest) to provide confidential emotional support services. The agency does not have a Memorandum of Understanding (MOU) with Northwest; the state mandates Northwest to provide these services.

The Williams County Sheriff's Office conducts investigations into allegations of sexual abuse.

The facility reported on the PAQ that zero forensic medical examinations were conducted in the past twelve months.

It was apparent during the interview with the Lieutenant of Investigations that the high priority the Sheriff's Office considers sexual assault allegations. The Lt. explained the responsibilities of the Sexual Assault Response Team (SART) members and the coordinated plan that is in place. The plan is developed to provide victim-centered care, with allegations, forensic examinations, emotional support services, and the legal system.

Review of facility policies #606, #801, and #802, review of documentation, and interviews with custody staff, an investigator, and medical staff demonstrated compliance with this standard.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Facility policy #606.7 requires administrative, criminal, or both investigations to be completed for all allegations of sexual abuse and harassment. The facility reports on the PAQ that nine administrative investigations were conducted in the past twelve months. The Sheriff confirmed that all allegations of sexual abuse and harassment are investigated. Allegations involving staff are turned over to be investigated by the ND Bureau of Criminal Investigations. The Sheriff's Office conducts investigations for inmate-on-inmate allegations. Criminal investigations of sexual abuse and harassment are performed by licensed, trained Sheriff's Office investigators.

The Agency publishes its investigative policy on its website: **https://www.williamsnd.com/prea/**.

115.31 Employee training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Facility policy #306 outlines the training topics all employees who may have contact with confined persons receive on preventing, detecting, and responding to sexual abuse and harassment of confined persons. Twelve staff members were interviewed, and the length of service was from one month to ten years. All twelve staff confirmed receiving PREA training. Staff employed under one year received initial training during their zero week (first week) of training. Staff employed for over one year have received training on an annual basis. The agency uses the training curriculum on the Corrections One training platform. Staff are required to read the agency's PREA policy and complete training bulletins on agency policies.

The agency operates one facility. The training is designed for a co-ed facility and includes cross-gender searches and mental health training.

All training records are securely stored electronically through the Corrections One training platform, ensuring easy access and accurate staff training tracking.

The North Dakota Department of Corrections and Rehabilitation - Office of Facility Inspections - standard 030 - Trained Staff and Female Staff - Correctional facilities may not detain an inmate without at least two trained correctional officers who have completed North Dakota Correctional Officer Basic Certification and Correctional Medical Training I and II, have completed the training required under standard 103, or are acting under the supervision of trained correctional facility staff.

Standard 103 - Staff Orientation Training -

Correctional facilities shall have a written policy and procedure requiring all correctional officers to participate in a documented orientation training program prior to independent assignment. The orientation program must meet the particular needs of the correctional facility and must include, at a minimum,:

10. Prison Rape Elimination Act (PREA) training.

Facility policy #306, interviews with custody staff and the training officer, documentation review, and compliance with the December 27, 2034 standards 030 and 103 on the facility inspection demonstrate compliance with this standard.

| 115.32 | Volunteer and contractor training |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Facility Policy #306 outlines the essential training requirements for volunteers and contractors who may have contact with confined persons.

Contractor training:

The facility does not have contracted employees entering the building. The nursing staff are William's County employees who receive employee training outlined in Standard 115.31 and specialized training outlined in Standard 115.35.

The facility does not have contracted employees entering the building. The nursing staff are William's County employees who receive employee training outlined in standard 115.31.

The facility does not have a kitchen, but the agency has a contract with a restaurant in the Sheriff's Office building. This restaurant is responsible for preparing meals for confined persons. After preparation, the restaurant employees push the meal carts to a jail sallyport. From there, detention deputies distribute meals to the confined persons in each housing unit.

Volunteer training:

Volunteers complete the National Institute of Corrections (NIC) "Your Role in Responding to Sexual Abuse Training" and review the agency PREA policy.

Training records are securely stored electronically.

One volunteer was interviewed. The volunteer confirmed completion of the NIC training and signed an acknowledgment verifying understanding of a continuing duty to report and employee training outlined in standard 115.31. The volunteer would report any information to the security officer or supervisor.

115.33 Inmate education Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility reported on the PAQ that 2158 inmates were admitted in the past twelve months, and 195 inmates stayed over thirty days. All confined persons receive initial PREA information and formal education during intake.

Confined persons are not only informed about the agency's zero-tolerance policy on

sexual abuse and harassment but also guided on how to report incidents or suspicions of such acts. Fifteen confined persons, when interviewed, confirmed reading information about the facility's zero-tolerance policy and acknowledged receiving the information by signing on the computer signature pad. Observations of a new intake going through the booking process further verified that the person was given information to read about PREA and asked to sign on the signature pad. Three staff members certified to perform intake screenings consistently explained this system. Before leaving the booking room, the confined person is given an inmate handbook. PREA posters (in English and Spanish) are posted in the booking room and the housing units. Every housing unit has a PREA information sheet posted.

The facility contracts with the Language Line to accommodate limited English-proficient confined persons. Persons are given a tablet that offers multiple language options. Kiosks in the housing units provide multiple language options for a confined person to read the handbook and PREA tab. Hard copies of documents are available in Spanish. A staff member will verbally orient confined persons with intellectual disabilities, blind, or limited reading skills.

Signed training acknowledgments are part of the individual's electronic booking record.

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Facility policy #306.5 outlines the training requirements of this standard. The licensed investigator interviewed is the Lieutenant of Investigations for the Sheriff's Office, who has eighteen years of law enforcement experience, thirteen years working at the Sheriff's Office, and twelve years assigned to investigations. The investigator has received specialized training outlined in this standard. Administrative investigations are conducted by facility staff who have received specialized training outlined in this standard. The detention center security deputy has also received specialized training through the National Institute of Corrections online training platform.

The facility maintains copies of the training certificates.

115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

Auditor Discussion

As outlined in facility policy #306, all full- and part-time qualified health care and

mental health professionals who regularly work in the facility shall receive all the member training listed in standard 115.31(a), as well as training that includes:

- 1. Detecting and assessing signs of sexual abuse and sexual harassment.
- 2. Preserving physical evidence of sexual abuse.
- 3. Responding effectively and professionally to victims of sexual abuse and sexual harassment.
- 4. Reporting allegations or suspicions of sexual abuse and sexual harassment.

Nursing staff are William's County employees who receive employee training outlined in standard 115.31(a) on the Corrections One online training platform. Nursing staff also has received specialized training outlined in paragraph (a) of this standard. Forensic medical examinations are not conducted in the facility.

The staff person interviewed has a prior SANE nurse certification, completed additional PREA courses, and has training in victim-centered care.

All training records are stored and managed electronically through the Corrections One training platform. This ensures easy access and accurate and up-to-date staff training tracking.

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

As outlined in facility policy #508.2, anyone housed in the facility shall be appropriately classified according to security and health risks to make appropriate supervision, temporary holding, and housing assignments. The general practice is to complete the PREA questionnaires during the initial intake process within twenty-four hours of intake. This process involves two standard forms completed by staff. Staff review the PREA Aggressor questionnaire, which includes questions about the individual's potential aggressive factors, and the PREA Vulnerability Factor questionnaire, which includes questions about the person's risk of vulnerability with the confined person. Two staff interviewed confirmed the booking process is completed within twenty-four hours on every new intake. Thirteen interviewees confirmed the staff completed the PREA questionnaires during the intake booking process. Two interviewees couldn't remember, and one interviewee had been in the facility for over twelve months.

The PREA questionnaires were reviewed, and the requirements for this standard were included, as outlined in paragraph (d). The risk assessment also considers prior acts of sexual abuse, prior convictions for violent offenses, and a history of previous institutional violence or sexual abuse as known to the agency. The two staff interviewed were able to list questions asked on the PREA questionnaires and verified

that both questionnaires are used during every intake.

Facility policy #508.3 prohibits disciplining confined persons who do not cooperate or refuse to answer:

- 1. Whether the confined person has a mental, physical, or developmental disability.
- 2. Whether the confined person is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
- 3. Whether the confined person has previously experienced sexual victimization.
- 4. The confined person's perception of vulnerability.

The two staff confirmed confined persons are not disciplined for refusing to answer questions (1-4) listed above.

Facility policy #508 outlines the facility's classification process to correctly classify and reclassify confined persons according to security and health risks to make appropriate supervision, temporary holding, and housing assignments. Within seventy-two hours after the initial classification, a reclassification is completed using information obtained from a criminal and discipline history and any pertinent information to determine if reclassification is warranted. A second reclassification is completed within thirty days of admission. The classification and reclassification information is documented electronically in the individual's file. A confined person's risk level will be reassessed when required due to a referral, request, incident of sexual abuse, or receipt of additional information that increases the person's risk of sexual victimization or abusiveness. The Jail Lieutenant and Security Deputy complete confined persons' reclassifications. Confined persons interviewed did not believe they had been reclassified. Reclassification files were reviewed to confirm reclassifications were completed.

The PREA questionnaires are part of the confined person's file in the Jail Management System (JMS). Staff cannot view the completed questionnaires; access is limited to supervisory and administrative staff.

Facility policy #508, review documentation, observation of new intake booking and file reviews, interviews with the PREA Coordinator, PREA Compliance Manager, staff, and confined persons, and compliance with standard 010 on the DOCR Facility Inspection Report dated December 27, 2023, demonstrate compliance with this standard.

| 115.42 | Use of screening information |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

The facility employs the PREA questionnaires and classification process to determine the placement of confined persons. The PREA Compliance Manager and staff confirmed that the questionnaires, the classification system, and conversations with the person are all integral in determining housing assignments. This comprehensive approach ensures the separation of vulnerable persons from likely abusers.

Interviews with staff confirmed that each confined person is classified on a case-bycase basis to determine the best placement to ensure the person's safety. The PREA Compliance Manager confirmed that any concerns found during the classification process are handled individually.

The PREA Compliance Manager confirmed that a transgender or intersex person's housing and program assignments would be determined on a case-by-case basis, considering the person's safety and if the placement would present any management or security issues. A transgender or intersex person's placement and programming would be reassessed at least twice yearly. The PREA Compliance Manager confirmed a transgender or intersex person's placement would be reviewed as needed and at a minimum every six months. A person identifying as transgender was interviewed and confirmed that their safety was considered. The person was assigned to a general population unit.

The PREA Compliance Manager and the person interviewed confirmed that views of the person's safety were and will be seriously considered during the classification process. The facility has private showers in each housing unit, and the person interviewed confirmed that they could shower privately.

The facility is not subject to a consent decree. The PREA Coordinator and PREA Compliance Manager confirmed that placement of transgender and intersex persons is determined on a case-by-case basis.

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

The PAQ report reveals significant compliance with the policy on involuntary protective custody. No confined persons were placed in involuntary protective custody for one to twenty-four hours, and there were zero instances of such custody lasting over thirty days in the past twelve months.

As outlined in facility policy #508, confined persons at high risk for sexual victimization shall not be placed in involuntary protective custody unless alternative housing is not available. The Jail Captain confirmed facility policy prohibits placing confined persons at high risk for sexual victimization unless alternative housing is not available. The facility has segregated housing but has not used it as protective custody to segregate a person at increased risk of sexual victimization.

Facility policy #606.11 inmates placed in temporary protective custody shall continue to have access to programs, privileges, education, and work opportunities. If restrictions are put in place, the Jail Commander shall document the following:

- The opportunities that have been limited;
- The duration of the limitation;
- The reason for such limitations.

The Jail Captain and intake staff interviewed confirmed that a confined person would only be in involuntary protective custody until other arrangements can be made to keep the person safe.

Facility policy #606.11 mandates a thorough review of the status of confined persons in involuntary protective custody every thirty days. This review, conducted by the Jail Commander, is designed to assess the continuing need for protective custody and ensure the rights and access of confined persons are maintained.

Facility policy #606, interviews with the Jail Commander and segregated housing staff, and compliance with standards #95 and #98 in the December 27, 2023, facility inspection report conducted by the ND Department of Corrections and Rehabilitation Office of Facility Inspections demonstrate compliance with this standard.

115.51 | Inmate reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility has established multiple internal ways for confined persons to report sexual abuse, harassment, retaliation, and staff neglect or violation of responsibilities that may have contributed to an incident. As outlined in facility policy #606.4 and the inmate handbook, any allegations of sexual abuse or harassment can be privately reported in multiple ways:

- Anonymously;
- Any staff member;
- Verbally;
- In writing;
- Third-party

Information on how to make a report is on posters posted in the housing units in English and Spanish, in the hardcopy of the inmate handbook, and the inmate handbook in multiple language options on the kiosk. Nine of the confined persons

interviewed said they would report an allegation to a staff member, five persons said they would report in writing on the kiosk, one person would use the drop box (verified the drop box is for any written request), and one person wouldn't report anything. The twelve staff interviewed were able to list how a confined person can privately report sexual abuse and harassment.

The facility has a Memorandum of Understanding (MOU) with the Dispatch Center, which is not part of the Sheriff's Office, to accept confidential reports from confined persons. If an allegation is reported to the Dispatch Center, it will receive it and immediately notify the detention center, allowing the reporter to remain anonymous. Facility policy #501.3 states no individual should be held based solely on a federal immigration detainer under 8 CRF 287.7 unless the person has been charged with a federal crime or the detainer is accompanied by a warrant, affidavit of probable cause, or removal order. The twelve staff interviewed confirmed they would accept allegations reported verbally, in writing, anonymously, and through third parties. They would document a verbal report as soon as possible, as outlined in facility policy #606.4. The sixteen confined persons confirmed they could make reports verbally, anonymously, and in writing, and a third party could report on their behalf.

The twelve staff interviewed knew they could privately report sexual abuse and sexual harassment information to a Sergeant or follow the chain of command. Staff are advised of this during annual training, new hire zero-week training, and training policy and procedure training bulletins.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility reported on the PAQ receiving seven grievances related to sexual abuse and harassment. The grievances were reviewed and responded to within the required timelines.

As outlined in facility policy #608.4, there is no time limit on when a confined person can submit a grievance alleging sexual abuse or sexual harassment. The policy ensures that grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint. Confined persons can submit a PREA grievance electronically through the kiosk or place a paper grievance in the drop box. When an individual submits an electronic PREA grievance, access to the grievance is strictly limited to the PREA team and administration. Corrections deputies do not have access to information placed in the drop box, further ensuring the confidentiality of the process.

Facility policy #606.4 requires staff who receive a grievance to forward it to a supervisor. Grievances will not be sent to a supervisor who is the subject of the complaint. Confined persons and staff are not required to attempt to resolve

grievances related to sexual abuse informally. The shift commander shall ensure that grievances related to sexual abuse and harassment are investigated and resolved within ninety days of the initial filing. If reasonable, the shift commander may grant an extension of up to seventy days to make an appropriate decision. If an extension is granted, the confined person shall be notified in writing and provided a date for the decision.

Third parties, including fellow confined persons, staff members, family members, attorneys, and outside advocates, are permitted to assist confined persons in filing grievances related to sexual abuse and harassment and filing such grievances on behalf of the confined person if the confined person agrees to have the grievance filed on their behalf. The staff member who receives a grievance filed by a third party on behalf of the confined person shall ask whether the confined person wishes to have the grievance processed and document the person's decision.

Facility policy #608.4 allows confined persons to file an emergency grievance if they believe they or any other confined person is at substantial risk of imminent sexual abuse. The supervisor must determine whether immediate action is necessary to protect the person and provide an initial response within forty-eight hours. The grievance must be referred to the shift commander for investigation, and a final decision must be made within five calendar days.

Confined persons may be disciplined for filing a false grievance related to sexual abuse only when it is determined that the person filed the grievance in bad faith. One confined person was disciplined for filing a grievance in bad faith. Information related to the discipline was reviewed during the onsite audit.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility uses the Northwest Human Service Center (https://www.hhs.nd.gov/HSC/northwest) to provide confidential emotional support services. The agency does not have a Memorandum of Understanding (MOU) with Northwest; the state mandates Northwest to provide these services. The contact information is visibly posted in the housing units and published in the inmate handbook. The confined persons are informed that all telephone calls are recorded, but individual confidentiality will be protected.

Seven of the sixteen confined persons interviewed knew a hotline was available to call, two knew information was available, and seven didn't know. The seven persons who didn't know about services were asked follow-up questions to determine facility compliance with this standard.

The facility had an agreement with the Family Crisis Shelter until its recent closure.

During the audit, the agency demonstrated its commitment by actively seeking

alternative options for advocates, ensuring the continuity of emotional support services in addition to advocates from the Northwest Human Service Center.

| 115.54 | Third-party reporting |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The agency has established a method for receiving third-party reports of sexual abuse and harassment of confined persons. Information on how to report is made public on the agency's website: https://www.williamsnd.com/prea/ |

115.61 Staff and agency reporting duties Auditor Overall Determination: Meets Standard **Auditor Discussion** Facility policy #606.4 underscores the crucial role that every employee, agency representative, volunteer, or contractor plays in maintaining the safety of our confined persons. It outlines the procedures and expectations that anyone aware of an incident of sexual abuse, sexual harassment, or retaliation shall immediately report the information to a supervisor. This policy emphasizes that sexual abuse and sexual harassment reports shall only be made available to those who have a legitimate need to know and by this policy and applicable law. The twelve staff interviewed would report information to a Sergeant and follow the chain of command if a Sergeant is unavailable. The medical staff interviewed confirmed confined persons are made aware of their duty to report and the limits of confidentiality. If a confined person reports victimization in a confinement setting, the information is reported directly to the PREA Coordinator. If the victimization reported happened in a community setting, consent by the confined person must be given before medical staff can report the allegation. The medical staff interviewed reported not having any reports from a confined person of sexual abuse or harassment in a facility or the community. Facility policy prohibits holding juvenile offenders under the age of eighteen. The Jail Captain and PREA Coordinator confirmed juveniles under eighteen are not held in the facility. Reports from a confined person considered a vulnerable adult would be reported to the Sheriff's Office. The Jail Captain confirmed that any allegation, including third-party reports of sexual

abuse and harassment, is immediately reported to Sheriff's Office investigators for

investigation.

| 115.62 | Agency protection duties |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The facility reported in the PAQ that there had been zero instances where the facility determined a confined person was subject to a substantial risk of imminent sexual abuse in the past twelve months. |
| | The Sheriff, Jail Captain, and twelve staff interviewed said the safety of the confined persons is the priority and immediate action would be taken to keep the confined person safe. |

| 115.63 | Reporting to other confinement facilities |
|--------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The facility reports on the PAQ has received zero allegations of sexual abuse or harassment from another confinement facility in the past twelve months. The Sheriff and Jail Captain confirmed that Williams County has not recently received any reports from another agency. The Jail Captain confirmed that a confined person has not reported to Williams County being sexually abused or harassed in another agency. |
| | Facility policy #606.4 outlines the reporting requirements of this standard. |
| | The Sheriff and Jail Captain confirmed the facility would contact the appropriate agency if a confined person reported being sexually abused or harassed. |
| | The Sheriff and Jail Captain confirmed that any allegation received from another agency that a confined person reported they were sexually abused in the Williams County Detention Center would immediately be forwarded to an investigator. |

| 115.64 | Staff first responder duties |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The facility reports in the PAQ that there have been zero allegations of a confined person being sexually abused in the facility in the past twelve months. |
| | Facility policy #606.6 details the duties of the first responder: |
| | |

- Separate the parties;
- Request medical assistance as appropriate;
- If appropriate, request that the alleged victim not destroy evidence (as detailed in this standard);
- If appropriate, ensure the alleged abuser does not destroy evidence (as detailed in this standard);
- Secure the scene until investigators arrive.

The twelve staff members interviewed were able to explain their duties as first responders. During the interviews, staff said they would contact a Sergeant and medical staff.

Facility policy #606.6 requires a first responder who is not a corrections deputy to request the alleged victim to refrain from any actions that could destroy physical evidence and immediately notify a corrections deputy. The medical staff member interviewed was previously certified as a SANE nurse and had extensive knowledge of victim-centered care and the proper handling of usable physical evidence.

Auditor Overall Determination: Meets Standard Auditor Discussion The Agency has developed a comprehensive Coordinated Response Plan to coordinate actions taken in response to an incident of sexual abuse. The plan outlines the responsibilities of staff first responders, medical staff, investigators, and facility leadership. The response plan includes assembling a Sexual Assault Response Team (SART) that includes members from outside of the Sheriff's Office, for example, medical and mental health providers, the investigating law enforcement agency, a Sexual Assault Nurse Examiner (SANE), and the Victim Witness Coordinator from the district attorney's office.

| 115.66 | Preservation of ability to protect inmates from contact with abusers |
|--------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | North Dakota is a right-to-work State. There are no collective bargaining units. |

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility reported on the PAQ that zero incidents of retaliation were reported, known, or suspected in the past twelve months.

Facility policy #606 requires all confined persons and staff who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation.

The Sheriff, Jail Captain, and PREA Coordinator are unwavering in their commitment to the safety of all. They have confirmed that reports of retaliation will be taken seriously and not tolerated. The PREA Coordinator will actively monitor the inmate grievance system for discipline reports on confined persons, specifically looking for unnecessary lockdowns and the source of the discipline reports. To ensure the safety of confined persons, housing unit and cell changes will be implemented as a protective measure. If necessary, staff would be reassigned or placed on leave pending an investigation. The PREA Coordinator would monitor the staff members' behavior and how other staff are treating the staff member being monitored for retaliation. Review any disciplinary reports filed against the staff member to confirm validity. The designated PREA Coordinator is the Jail Lieutenant, who has an opendoor policy for any staff member, and his office is located adjacent to the main staff work area.

The PREA Coordinator would monitor a confined person for a minimum of ninety days or as long as necessary. The PREA Coordinator would visit the confined person in person every seven days.

The Sheriff and Jail Captain confirmed that anyone cooperating with an investigation who fears retaliation will be protected from retaliation.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

The PAQ report reveals significant compliance with the policy on involuntary protective custody. No confined persons were placed in involuntary protective custody for one to twenty-four hours, and there were zero instances of such custody lasting over thirty days in the past twelve months.

As outlined in facility policy #508, confined persons at high risk for sexual victimization shall not be placed in involuntary protective custody unless alternative housing is not available. The Jail Captain confirmed facility policy prohibits placing

confined persons at high risk for sexual victimization unless alternative housing is not available. The facility has segregated housing but has not used it as protective custody to segregate a person at increased risk of sexual victimization.

Facility policy #606.11 inmates placed in temporary protective custody shall continue to have access to programs, privileges, education, and work opportunities. If restrictions are put in place, the Jail Commander shall document the following:

The opportunities that have been limited;

The duration of the limitation:

The reason for such limitations.

The Jail Captain and intake staff interviewed confirmed that a confined person would only be in involuntary protective custody until other arrangements can be made to keep the person safe.

Facility policy #606.11 mandates a thorough review of the status of confined persons in involuntary protective custody every thirty days. This review, conducted by the Jail Commander, is designed to assess the continuing need for protective custody and ensure the rights and access of confined persons are maintained.

Facility policy #606, interviews with the Jail Commander and segregated housing staff, and compliance with standards #95 and #98 in the December 27, 2023, facility inspection report conducted by the ND Department of Corrections and Rehabilitation Office of Facility Inspections demonstrate compliance with this standard.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Facility policy #600.7 requires an administrative, criminal, or both investigation to be completed for all allegations of sexual abuse and sexual harassment. The investigator explained that an on-call detective was on duty and that an investigation would be initiated as soon as possible. The Sheriff, Jail Captain, and Jail Lieutenant would be contacted, and a trained deputy would be dispatched to the jail right away to preserve the scene.

The licensed Sheriff's Office investigator who conducts sexual abuse investigations and the detention deputy who conducts administrative investigations have received specialized training. Facility staff secures the scene until the trained deputy or investigator arrives. The investigator conducts interviews, collects evidence, reviews staff reports, audio and video recordings of the incident, and any other pertinent evidence.

When the investigation is completed, the case is forwarded to the State Attorney, responsible for deciding on potential charges. All criminal sexual misconduct cases are referred to the State Attorney's Office, which shows the seriousness with which these cases are handled.

The investigator bases the credibility of an alleged victim, suspect, and witnesses by following the facts of the case. The investigator would not use a polygraph during the investigation.

Administrative investigations will include determining whether staff actions or inaction contributed to the abuse. Administrative and criminal investigations are documented in writing, outlining the investigation process and the description of the evidence collected.

Facility policy #600.14 requires all written reports about administrative and criminal investigations of sexual abuse and harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The investigator said that an investigation would be completed regardless of the departure of the alleged abuser or victim from employment or control of the facility.

The Sheriff's Office conducts its investigations. If an investigation involves a staff member, the Bureau of Criminal Investigations (BCI) will conduct it. The investigator would be the liaison between the Sheriff's Office and BCI. The Jail Captain would stay in contact with the BCI as the investigation proceeds.

115.72 Evidentiary standard for administrative investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The Jail Commander or Sheriff, recognizing the seriousness of sexual abuse or harassment, facility policy #606.7 requires a review of the investigation to determine whether a preponderance of the evidence has substantiated any allegations. Facility policy #600.5.7 further emphasizes this seriousness by stating that disciplinary decisions in administrative hearings are based on the preponderance of evidence presented during the disciplinary hearing. The investigator verified that the standard used to substantiate allegations of sexual abuse and harassment is no higher than a preponderance of the evidence. Every criminal sexual misconduct case, a serious matter, is forwarded to the State Attorney for a determination of prosecution.

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Facility policy #606.7.2 requires the Jail Commander or authorized designee to inform a victim inmate in writing whether an allegation of sexual abuse has been substantiated, unsubstantiated, or unfounded. In the past twelve months, there were two allegations of sexual abuse reported to have occurred in the facility.

Trained, licensed investigators from the Williams County Sheriff's Office conduct criminal investigations. The Criminal Bureau of Investigation (CBI) investigates investigations involving staff. The Jail Captain maintains contact with the CBI throughout the investigation until completion.

Facility policy #606.7.2 outlines the information that would be provided to the confined person on the status of the accused staff member (as detailed in this standard.)

Facility policy #606.7.2 outlines the information that would be provided to the confined person on the status of the alleged abuser if another confined person is accused (as detailed in this standard.)

The agency would notify the alleged victim in writing of the final disposition of the allegation. The facility had an unfounded inmate-on-inmate sexual abuse complaint and an unsubstantiated staff-on-inmate sexual abuse complaint. Based on the allegation filed, the allegations were investigated administratively, and based on the evidence, there wasn't any physical contact between the alleged victim and the alleged abuser. The alleged victims in the allegations reported were advised of the final disposition. Notifications were reviewed.

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility reports that zero staff members have been disciplined, terminated, or resigned before termination for violating agency sexual abuse and harassment policies. Facility policy #606.7.1 outlines the disciplinary sanctions up to and including termination for violating sexual abuse and harassment policies. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

Facility policy #606.7.1 outlines the progressive discipline of staff members for violations of policies related to sexual abuse or harassment (other than engaging in sexual abuse.)

Staff terminations for violations of sexual abuse or harassment policies or resignations by staff who would have been terminated if not for their resignation will be reported to the law enforcement agency responsible for the investigation and to any relevant licensing bodies.

The agency didn't have any employee files to review that have been disciplined, terminated, or resigned for violating sexual abuse and harassment policies.

Based on my observations in the facility and interviews with the administration, I am confident that the discipline policy would be enforced and the appropriate actions would be taken against a staff member who violated the agency's sexual abuse and harassment policies.

Auditor Overall Determination: Meets Standard Auditor Discussion The facility reports zero contractors or volunteers reported to law enforcement or relevant licensing bodies for engaging in sexual abuse. The facility reports not having to enforce remedial measures and consider whether to prohibit further contact with confined persons in the case of any other violation of agency sexual abuse and harassment policies. Facility policy #606.8.1 immediately prohibits any contractor or volunteer who engages in sexual abuse within the facility from having contact with confined persons. The contractor or volunteer would be reported to the law enforcement agency responsible for the investigation and reported to the attention of any relevant licensing bodies.

| 115.78 | Disciplinary sanctions for inmates |
|--------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The facility reported on the PAQ that, during the specified period, no confined persons were disciplined for violating the agency's sexual abuse and harassment policies. |
| | The facility has a comprehensive and fair discipline plan for confined individuals, as outlined in facility policy #600 and the inmate handbook. The discipline plan ensures |

jail for any violation of agency sexual abuse and harassment policies.

The Jail Captain said the volunteer would immediately lose their privilege to enter the

due process, with an impartial hearing officer conducting a fair hearing and an option to appeal the hearing office's decision to the Jail Captain or authorized designee for review.

Disciplinary decisions are based on the nature and circumstances of the rule violated, the confined person's disciplinary history, and the sanctions imposed on other persons for comparable offenses. The discipline plan outlines examples of major and minor violations and explains sanctions that may be imposed. Importantly, the Jail Captain ensures that a person's mental disability or illness and how it may have contributed to the behavior is carefully considered when determining sanctions.

The facility does not offer therapy, counseling, or other interventions to address and correct underlying reasons for abuse.

As outlined in facility policy #600.7, confined persons are not disciplined for sexual contact with a staff member unless there is a finding that the staff member did not consent to such contact. The facility prohibits any sexual activity between confined persons, which is listed as a major violation of the discipline plan. The facility would only consider the activity sexual abuse after determining the activity was coerced. A confined person will only be disciplined for false reports or lying that were found to be made in bad faith.

The facility did not have any inmate-on-inmate sexual abuse cases to review. The Jail Captain ensured the policy outlined would be followed.

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility reported on the PAQ that there had been zero confined persons who disclosed prior sexual victimization during the risk screening in the past twelve months. Staff interviewed confined persons who disclosed any prior sexual victimization during the risk screening would be immediately referred to medical. The general practice is to forward screening information from intake to medical for review. Staff and nursing staff interviewed could not identify the name of a specific person who reported prior abuse during the risk screening.

Nursing staff are limited from disclosing information related to sexual abuse that occurred in an institutional setting to the PREA Coordinator, Sergeant, or administration.

The nursing staff discloses the limitations of confidentiality and their duty to report during the initiation of services. Informed consent is obtained before disclosing prior

victimization that did not occur in an institutional setting. The facility does not hold juveniles. If a vulnerable adult made a report, the information would be reported to law enforcement.

115.82 Access to emergency medical and mental health services Auditor Overall Determination: Meets Standard **Auditor Discussion** Victims of sexual abuse will be transported to CHI Saint Alexius Health (CHI) in Williston, North Dakota, for timely, unimpeded access to emergency medical treatment, evidence collection, and crisis intervention services. The nature and scope of services provided will be determined by the professional judgment of the SANE staff member performing the forensic medical examination. Facility policy #606.10 outlines the duties of the first responders. It requires staff first responders to take preliminary steps to protect the victim and immediately notify the appropriate qualified health care and mental health care professionals. Victims would be offered timely access to emergency contraception and sexually transmitted prophylaxis as part of the forensic medical examination. Medical staff would be responsible for follow-ups and ongoing medical and mental health care. Facility policy #606.10 states ongoing treatment services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The facility's medical provider is contracted through CHI Saint Alexius Health (CHI) in |

Williston, North Dakota, and the nursing staff are Williams County employees. The facility's medical provider determines the nature and scope of services.

As confirmed, the nursing staff plays a crucial role in ensuring that follow-up services, treatment plans, and referrals to specialty appointments are scheduled appropriately for the victim. They are also responsible for sending information for continued care after the confined person leaves the facility.

An alleged victim of sexual abuse will receive forensic medical treatment in the emergency department at the local hospital. The nursing staff confirmed medical and mental health services would be available in the facility. The nursing staff and peer support specialists meet weekly to discuss medication management and crisis intervention services a confined person may need. Medical and mental health services are consistent with community-level services.

Victims of sexual abuse would be offered comprehensive information about all lawful pregnancy-related medical services through the nursing staff. The nursing staff would contact Social Services for additional information. Pregnancy tests would be provided to the victim.

The nursing staff verified that the victim would be provided testing, treatment, and information for transmitted infections as part of the forensic medical examination. The facility nursing staff would ensure the victim received all treatment recommendations from the SANE nurse.

Facility policy #606.10 states ongoing treatment services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility reported on the PAQ that three administrative or criminal investigations (excluding unfounded investigations) were conducted in the past twelve months. Facility policy #606.12 states an incident review shall be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded and should occur within thirty days of the conclusion of the investigation.

The incident review team consists of the Jail Captain, Lieutenant, PREA Coordinator, Investigator, and Sergeant and allows for input from custody staff.

The Jail Captain confirmed that the review team would consider items (1) - (6) outlined in paragraph (d) of this standard.

The Jail Captain confirmed that any recommendations for improvement would be implemented or documented as the reasons for not implementing them.

The facility has not had any reported allegations of assault in the facility.

| 115.87 | Data collection |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The facility collects accurate, uniform data for every allegation of sexual abuse and harassment using a standardized instrument and a set of definitions. Sexual abuse data is reviewed annually and includes the data necessary to answer all the questions on the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. |
| | The facility maintains, reviews, and collects data from incident-based documents. The Agency does not contract for the confinement of its confined persons. |
| | The Department of Justice did not request Agency data for 2022. |

| 115.88 | Data review for corrective action |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The administrative team reviews sexual abuse data annually for ongoing improvement and any corrective action that should be implemented. An annual report approved by the Sheriff and published on the Agency's website: https://www.williamsnd.com/prea/ |
| | The facility redacts all personal identifying information from the report. |

| 115.89 | Data storage, publication, and destruction |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Incident-based sexual abuse data is securely maintained electronically, and access is limited to the Administration and the PREA Coordinator.

The facility makes all aggregated sexual abuse data available on the Agency's website: https://www.williamsnd.com/prea/

Facility policy #606.14 states the Agency shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Agency, plus five years.

115.401 Frequency and scope of audits Auditor Overall Determination: Meets Standard **Auditor Discussion** The Agency operates one facility. This is the Williams County Detention Center's third PREA Audit. I was granted full access to the facility during the comprehensive on-site audit. I had the opportunity to privately meet with staff and confined persons without any form of interference. Additionally, I engaged in informal conversations with staff and confined persons. On the first day of the on-site audit, seventy-four confined persons were in custody. The PREA audit notices, a crucial part of the process, were prominently displayed in English and Spanish throughout the facility six weeks before the audit. The auditor's contact information was readily available on these notices, ensuring that confined persons, staff, and visitors were well-informed. The PREA Coordinator confirmed the notices' posting via email, and thirteen confined persons interviewed verified that the notices were posted. Two letters and one email from a third party on behalf of a confined person in the facility were received during the audit. The Williams County Sheriff's Office has proactively committed to institutionalizing zero tolerance for sexual abuse and sexual harassment. During the interview with the Jail Captain, his evident pride in the staff and facility was a testament to all involved's hard work and dedication. Based on our

| 115.403 | Audit contents and findings |
|---------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

commitment to enhancing safety and security.

conversation, he is making improvements to the building, demonstrating a shared

The Agency has its previous PREA audits listed on its website:

https://www.williamsnd.com/prea/

The signed contract includes the requirement to post the final audit report within ninety days after receipt. The email with the final report attached will consist of a reminder to post the final audit report within ninety days of receipt.

| Appendix: Provision Findings | | |
|------------------------------|---|-----------|
| 115.11 (a) | Zero tolerance of sexual abuse and sexual harassment coordinator | nt; PREA |
| | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? | yes |
| | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? | yes |
| 115.11 (b) | Zero tolerance of sexual abuse and sexual harassmer coordinator | nt; PREA |
| | Has the agency employed or designated an agency-wide PREA Coordinator? | yes |
| | Is the PREA Coordinator position in the upper-level of the agency hierarchy? | yes |
| | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? | yes |
| 115.11 (c) | Zero tolerance of sexual abuse and sexual harassment coordinator | nt; PREA |
| | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) | no |
| | Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) | yes |
| 115.12 (a) | Contracting with other entities for the confinement o | f inmates |
| | If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | na |
| 115.12 (b) | Contracting with other entities for the confinement o | f inmates |
| | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure | na |

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

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

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

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

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

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| | 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 | |
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| | 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 |
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| 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 |
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| 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 investig | ations |

| | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? | yes |
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| | 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 |

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| | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? | yes |
| | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? | yes |
| | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? | yes |
| | Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? | yes |
| | Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? | yes |
| 115.31 (b) | Employee training | |
| | Is such training tailored to the gender of the inmates at the employee's facility? | yes |
| | Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? | yes |
| 115.31 (c) | Employee training | |
| | Have all current employees who may have contact with inmates received such training? | yes |
| | Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? | yes |
| | In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? | yes |
| 115.31 (d) | Employee training | |
| | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? | yes |
| 115.32 (a) | Volunteer and contractor training | |
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| | Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? | yes |
| 115.32 (b) | Volunteer and contractor training | |
| | Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? | yes |
| 115.32 (c) | Volunteer and contractor training | |
| | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? | yes |
| 115.33 (a) | Inmate education | |
| | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? | yes |
| | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? | yes |
| 115.33 (b) | Inmate education | |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? | yes |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? | yes |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? | yes |
| 115.33 (c) | Inmate education | |
| | Have all inmates received the comprehensive education referenced in 115.33(b)? | yes |
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| | 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 |
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| 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 |
| 445 00 (0) | | |
| 115.33 (f) | Inmate education | |
| 115.33 (†) | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? | yes |
| | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written | yes |
| | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? | yes |
| 115.34 (a) | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? Specialized training: Investigations In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See | |
| 115.34 (a) | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? Specialized training: Investigations In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | |

| | Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | |
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| | 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 |
| | | |

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

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

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

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

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

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

| | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? | yes |
|------------|---|-----|
| | Does such an assignment not ordinarily exceed a period of 30 days? | yes |
| 115.43 (d) | Protective Custody | |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? | yes |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? | yes |
| 115.43 (e) | Protective Custody | |
| | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? | yes |
| 115.51 (a) | Inmate reporting | |
| | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? | yes |
| 115.51 (b) | Inmate reporting | |
| | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? | yes |
| | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? | yes |
| | | 1 |
| | Does that private entity or office allow the inmate to remain | yes |

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

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

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| | including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) | |
| | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? | yes |
| 115.53 (b) | Inmate access to outside confidential support service | :S |
| | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? | yes |
| 115.53 (c) | Inmate access to outside confidential support service | :S |
| | 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? | no |
| 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 |
| 1 | | 1 |

| | 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? | no |
| 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 |
| | suspect, or witness on an individual basis and not on the basis of | yes |
| 115.71 (f) | suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition | |
| 115.71 (f) | suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? | |

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

| 115.73 (b) | Reporting to inmates | |
|------------|--|-----|
| | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) | 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? | no | |
| 115.78 (e) | Disciplinary sanctions for inmates | | |
| | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? | yes | |
| 115.78 (f) | Disciplinary sanctions for inmates | | |
| | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish | yes | |

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

| | sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? | | |
|------------|---|------|--|
| 115.82 (a) | Access to emergency medical and mental health services | | |
| | Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? | yes | |
| 115.82 (b) | Access to emergency medical and mental health serv | ices | |
| | 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 serv | ices | |
| | Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? | yes | |
| 115.82 (d) | Access to emergency medical and mental health serv | ices | |
| | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? | yes | |
| 115.83 (a) | Ongoing medical and mental health care for sexual a victims and abusers | buse | |
| | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? | yes | |
| 115.83 (b) | Ongoing medical and mental health care for sexual a victims and abusers | buse | |
| | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? | yes | |
| 115.83 (c) | Ongoing medical and mental health care for sexual a | buse | |
| | | | |

| | 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 al victims and abusers | buse |
| | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | yes |
| 115.83 (e) | Ongoing medical and mental health care for sexual al victims and abusers | buse |
| | If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | yes |
| 115.83 (f) | Ongoing medical and mental health care for sexual al victims and abusers | buse |
| | 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 al victims and abusers | buse |
| | 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 al victims and abusers | buse |
| | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) | na |

| 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.) | na |
| 115.87 (f) | Data collection | |
| | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) | na |
| 115.88 (a) | Data review for corrective action | |
| | Does the agency review data collected and aggregated pursuant | 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: Identifying problem areas? | |
| | sexual abuse prevention, detection, and response policies, | yes |

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

| 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.) 115.401 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.) 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, 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 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.) 115.401 Frequency and scope of audits Did the auditor have access to, and the ability to observe, all areas of the audited facility? 115.401 Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? 115.401 Frequency and scope of audits Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? Frequency and scope of audits Was the auditor permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? | | 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 | yes |
| response does not impact overall compliance with this standard.) 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, 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? (N/A if this is not the third year of the current audit cycle.) 115.401 Frequency and scope of audits Did the auditor have access to, and the ability to observe, all areas of the audited facility? Frequency and scope of audits Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Frequency and scope of audits Was the auditor permitted to conduct private interviews with imates, residents, and detainees? 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? | | Frequency and scope of audits | |
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| 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.) 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? Frequency and scope of audits Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Frequency and scope of audits Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? 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? | | 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 | na |
| (h) Frequency and scope of audits Did the auditor have access to, and the ability to observe, all areas of the audited facility? Frequency and scope of audits Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Frequency and scope of audits Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? 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? | | 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? | na |
| areas of the audited facility? 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)? 115.401 (m) Frequency and scope of audits Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? 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? | | Frequency and scope of audits | |
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| relevant documents (including electronically stored information)? 115.401 (m) Frequency and scope of audits Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? 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? | | Frequency and scope of audits | |
| Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? 115.401 Frequency and scope of audits | | · | yes |
| inmates, residents, and detainees? 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? | | 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 |
| correspondence to the auditor in the same manner as if they were communicating with legal counsel? | | Frequency and scope of audits | |
| 115.403 Audit contents and findings | | correspondence to the auditor in the same manner as if they were | yes |
| | 115.403 | Audit contents and findings | |

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