# **PREA Facility Audit Report: Final**

Name of Facility: McLean County Jail Facility Type: Prison / Jail Date Interim Report Submitted: 08/09/2021 Date Final Report Submitted: 01/21/2022

# 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: Candace L. Snyder

| AUDITOR INFORMATION          |                 |
|------------------------------|-----------------|
| Auditor name:                | Snyder, Candy   |
| Email:                       | Snyder@gwtc.net |
| Start Date of On-Site Audit: | 06/02/2021      |
| End Date of On-Site Audit:   | 06/03/2021      |

| FACILITY INFORMATION       |   |
|----------------------------|---|
| Facility name:             | McLean County Jail  |
| Facility physical address: | 709 6th Avenue, Washburn, North Dakota - 58577              |
| Facility Phone             |   |
| Facility mailing address:  | PO Box 1108, 709 6th Avenue, Washburn, North Dakota - 58577 |

| Primary Contact   |                 |
|-------------------|-----------------|
| Name:             | Wade Krohmer    |
| Email Address:    | wkrohmer@nd.gov |
| Telephone Number: | 7014628103      |

| Warden/Jail Administrator/Sheriff/Director |                 |
|--|-----------------|
| Name:                                      | Wade Krohmer    |
| Email Address:                             | wkrohmer@nd.gov |
| Telephone Number:                          | 7014628103      |

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

| Facility Characteristics  |                            |
|---|----------------------------|
| Designed facility capacity:   | 30                         |
| Current population of facility:   | 22                         |
| Average daily population for the past 12 months:  | 25                         |
| Has the facility been over capacity at any point in the past 12 months?                                     | Yes                        |
| Which population(s) does the facility hold?   | Both females and males     |
| Age range of population:  | 18-60                      |
| Facility security levels/inmate custody levels:   | Minimum, Moderate, Maximum |
| Does the facility hold youthful inmates?  | No                         |
| Number of staff currently employed at the facility who may have contact with inmates:                       | 13                         |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 1                          |
| Number of volunteers who have contact with inmates,<br>currently authorized to enter the facility:          | 0                          |

| AGENCY INFORMATION                                       |  |
|--|--|
| Name of agency:  | McLean County Sheriff's Office                 |
| Governing authority or parent<br>agency (if applicable): |  |
| Physical Address:  | 709 6th Avenue, Washburn, North Dakota - 58577 |
| Mailing Address:   | PO Box 1108, Washburn, North Dakota - 58577    |
| Telephone number:  | 701-462-8103                                   |

| Agency Chief Executive Officer Information: |                  |
|---|------------------|
| Name:                                       | JR Kerzmann      |
| Email Address:                              | jkerzmann@nd.gov |
| Telephone Number:                           | 701-462-8103     |

| Agency-Wide PREA Coordinator Information |              |                |                 |
|--|--------------|----------------|-----------------|
| Name:                                    | Wade Krohmer | Email Address: | wkrohmer@nd.gov |
|  |              |                |                 |

#### 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: 2021-06-02 2. End date of the onsite portion of the audit: 2021-06-03

## Outreach

| 10. Did you attempt to communicate with community-based<br>organization(s) or victim advocates who provide services to<br>this facility and/or who may have insight into relevant<br>conditions in the facility? | © Yes<br>C No  |
|--|--|
| a. Identify the community-based organization(s) or victim advocates with whom you communicated:  | Unity Point Health Emergency Room Supervising Nurse regarding<br>SANE staff available for forensic exams.<br>McLean County Family Resource Center regarding advocacy<br>services |

# AUDITED FACILITY INFORMATION

| 14. Designated facility capacity:  | 30   |
|--|--|
| 15. Average daily population for the past 12 months:                             | 22   |
| 16. Number of inmate/resident/detainee housing units:                            | 6  |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | © Yes  |
| youthunjuvenne uetamees?   | © No   |
|  | C Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) |

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

| Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit   |    |
|--|----|
| 36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:  | 24 |
| <b>38.</b> Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:  | 0  |
| <b>39.</b> Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit: | 0  |
| 40. Enter the total number of inmates/residents/detainees who<br>are Blind or have low vision (visually impaired) in the facility<br>as of the first day of the onsite portion of the audit:   | 0  |

| 41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:  | 0   |
|--|---|
| 42. Enter the total number of inmates/residents/detainees who<br>are Limited English Proficient (LEP) in the facility as of the first<br>day of the onsite portion of the audit:   | 0   |
| 43. Enter the total number of inmates/residents/detainees who<br>identify as lesbian, gay, or bisexual in the facility as of the first<br>day of the onsite portion of the audit:  | 0   |
| 44. Enter the total number of inmates/residents/detainees who<br>identify as transgender or intersex in the facility as of the first<br>day of the onsite portion of the audit:  | 0   |
| 45. Enter the total number of inmates/residents/detainees who<br>reported sexual abuse in the facility as of the first day of the<br>onsite portion of the audit:  | 0   |
| 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<br>were ever placed in segregated housing/isolation for risk of<br>sexual victimization in the facility as of the first day of the<br>onsite portion of the audit:                                     | 0   |
| 48. Provide any additional comments regarding the population<br>characteristics of inmates/residents/detainees in the facility as<br>of the first day of the onsite portion of the audit (e.g., groups<br>not tracked, issues with identifying certain populations): | There were no inmates within these categories as stated by the<br>PREA Coordinator. I was unable to corroborate through screening<br>documents as the facility did have screenings completed for the<br>current population. This was added as a corrective action to be<br>addressed during the corrective action period. |
| Staff, Volunteers, and Contractors Population Characteris  | stics 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:  | 12  |
| 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:  | 0   |
| 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:   | 1   |
| 52. Provide any additional comments regarding the population<br>characteristics of staff, volunteers, and contractors who were<br>in the facility as of the first day of the onsite portion of the<br>audit:   | No text provided.   |
| INTERVIEWS   |   |
| Inmate/Resident/Detainee Interviews  |   |
|  |   |

| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:   | 10  |
|--|---|
| 54. Select which characteristics you considered when you<br>selected RANDOM INMATE/RESIDENT/DETAINEE<br>interviewees: (select all that apply)  | <ul> <li>Age</li> <li>Race</li> <li>Ethnicity (e.g., Hispanic, Non-Hispanic)</li> <li>Length of time in the facility</li> <li>Housing assignment</li> <li>Gender</li> <li>Other</li> <li>None</li> </ul>  |
| 55. How did you ensure your sample of RANDOM<br>INMATE/RESIDENT/DETAINEE interviewees was<br>geographically diverse?   | I interviewed 10 of the 24 inmates at the facility.   |
| 56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?   | © Yes<br>© No   |
| 57. Provide any additional comments regarding selecting or<br>interviewing random inmates/residents/detainees (e.g., any<br>populations you oversampled, barriers to completing<br>interviews, barriers to ensuring representation):   | Many of the characteristics needed for selection were not identified.   |
| Targeted Inmate/Resident/Detainee Interviews   |   |
| 58. Enter the total number of TARGETED<br>INMATES/RESIDENTS/DETAINEES who were interviewed:  | 0   |
| 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<br>inmates/residents/detainees with a physical disability using<br>the "Disabled and Limited English Proficient Inmates"<br>protocol:  | 0   |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>inmates/residents/detainees in this category:  | <ul> <li>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.</li> <li>The inmates/residents/detainees in this targeted category declined to be interviewed.</li> </ul> |

| b. Discuss your corroboration strategies to determine if this<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees).                          | Characteristics needed for selection by the auditor was not possible as the facility was unable to provide a list or documentation.   |
|---|---|
| 61. Enter the total number of interviews conducted with<br>inmates/residents/detainees with a cognitive or functional<br>disability (including intellectual disability, psychiatric<br>disability, or speech disability) using the "Disabled and<br>Limited English Proficient Inmates" protocol: | 0   |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>inmates/residents/detainees in this category:   | <ul> <li>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.</li> <li>The inmates/residents/detainees in this targeted category declined to be interviewed.</li> </ul> |
| b. Discuss your corroboration strategies to determine if this<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees).                          | Characteristics needed for selection by the auditor was not<br>possible as the facility was unable to provide a list or<br>documentation.   |
| 62. Enter the total number of interviews conducted with<br>inmates/residents/detainees who are Blind or have low vision<br>(i.e., visually impaired) using the "Disabled and Limited<br>English Proficient Inmates" protocol:   | 0   |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>inmates/residents/detainees in this category:   | <ul> <li>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.</li> <li>The inmates/residents/detainees in this targeted category declined to be interviewed.</li> </ul> |
| b. Discuss your corroboration strategies to determine if this<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees).                          | Characteristics needed for selection by the auditor was not possible as the facility was unable to provide a list or documentation.   |
| 63. Enter the total number of interviews conducted with<br>inmates/residents/detainees who are Deaf or hard-of-hearing<br>using the "Disabled and Limited English Proficient Inmates"<br>protocol:  | 0   |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>inmates/residents/detainees in this category:   | ✓ Facility said there were "none here" during the onsite portion of<br>the audit and/or the facility was unable to provide a list of these<br>inmates/residents/detainees.  |
|   | The inmates/residents/detainees in this targeted category declined to be interviewed.   |

| b. Discuss your corroboration strategies to determine if this<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees). | Characteristics needed for selection by the auditor was not<br>possible as the facility was unable to provide a list or<br>documentation.                                  |
|--|--|
| 64. Enter the total number of interviews conducted with<br>inmates/residents/detainees who are Limited English<br>Proficient (LEP) using the "Disabled and Limited English<br>Proficient Inmates" protocol:  | 0  |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>inmates/residents/detainees in this category:  | ✓ Facility said there were "none here" during the onsite portion of<br>the audit and/or the facility was unable to provide a list of these<br>inmates/residents/detainees. |
|  | The inmates/residents/detainees in this targeted category declined to be interviewed.  |
| b. Discuss your corroboration strategies to determine if this<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees). | Characteristics needed for selection by the auditor was not<br>possible as the facility was unable to provide a list or<br>documentation.                                  |
| 65. Enter the total number of interviews conducted with<br>inmates/residents/detainees who identify as lesbian, gay, or<br>bisexual using the "Transgender and Intersex Inmates; Gay,<br>Lesbian, and Bisexual Inmates" protocol:  | 0  |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>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<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees). | Characteristics needed for selection by the auditor was not<br>possible as the facility was unable to provide a list or<br>documentation.                                  |
| 66. Enter the total number of interviews conducted with<br>inmates/residents/detainees who identify as transgender or<br>intersex using the "Transgender and Intersex Inmates; Gay,<br>Lesbian, and Bisexual Inmates" protocol:  | 0  |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>inmates/residents/detainees in this category:  | Facility said there were "none here" during the onsite portion of<br>the audit and/or the facility was unable to provide a list of these<br>inmates/residents/detainees.   |
|  | The inmates/residents/detainees in this targeted category declined to be interviewed.  |

| b. Discuss your corroboration strategies to determine if this<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees).   | Characteristics needed for selection by the auditor was not<br>possible as the facility was unable to provide a list or<br>documentation.  |
|--|--|
| 67. Enter the total number of interviews conducted with<br>inmates/residents/detainees who reported sexual abuse in this<br>facility using the "Inmates who Reported a Sexual Abuse"<br>protocol:  | 0  |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>inmates/residents/detainees in this category:  | ✓ Facility said there were "none here" during the onsite portion of<br>the audit and/or the facility was unable to provide a list of these<br>inmates/residents/detainees.   |
|  | The inmates/residents/detainees in this targeted category declined to be interviewed.  |
| b. Discuss your corroboration strategies to determine if this<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees).   | The facility stated there were no sexual abuse or sexual<br>harassment investigations. This is also reflected in their aggregate<br>data within their annual reports. It was corroborated by asking<br>directly of the inmates who were interviewed. |
| 68. Enter the total number of interviews conducted with<br>inmates/residents/detainees who disclosed prior sexual<br>victimization during risk screening using the "Inmates who<br>Disclosed Sexual Victimization during Risk Screening"<br>protocol:  | 0  |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>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<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees).   | Characteristics needed for selection by the auditor was not<br>possible as the facility was unable to provide a list or<br>documentation.  |
| 69. Enter the total number of interviews conducted with<br>inmates/residents/detainees who are or were ever placed in<br>segregated housing/isolation for risk of sexual victimization<br>using the "Inmates Placed in Segregated Housing (for Risk of<br>Sexual Victimization/Who Allege to have Suffered Sexual<br>Abuse)" protocol: | 0  |
| a. Select why you were unable to conduct at least the<br>minimum required number of targeted<br>inmates/residents/detainees in this category:  | Facility said there were "none here" during the onsite portion of<br>the audit and/or the facility was unable to provide a list of these<br>inmates/residents/detainees.   |
|  | The inmates/residents/detainees in this targeted category declined to be interviewed.  |

| b. Discuss your corroboration strategies to determine if this<br>population exists in the audited facility (e.g., based on<br>information obtained from the PAQ; documentation reviewed<br>onsite; and discussions with staff and other<br>inmates/residents/detainees). | There have been no reported incidents of sexual abuse or sexual<br>harassment at this jail. Inmates confirmed this during their<br>interviews. Staff stated isolation has not been used for this purpose.   |
|--|---|
| 70. Provide any additional comments regarding selecting or<br>interviewing targeted inmates/residents/detainees (e.g., any<br>populations you oversampled, barriers to completing<br>interviews):  | As stated in many of the previous questions, characteristics<br>needed for selection of inmates by the auditor for the targeted<br>interviews was not possible as the facility was unable to provide a<br>list or screening documents to aid in selection. The PREA<br>Coordinator stated there were no known inmates with these<br>characteristics at the time of the audit. |

# Staff, Volunteer, and Contractor Interviews

### **Random Staff Interviews**

| 71. Enter the total number of RANDOM STAFF who were interviewed:   | 6   |
|--|---|
| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)   | <ul> <li>Length of tenure in the facility</li> <li>Shift assignment</li> <li>Work assignment</li> <li>Rank (or equivalent)</li> <li>Other (e.g., gender, race, ethnicity, languages spoken)</li> <li>None</li> </ul>  |
| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews?  | © Yes<br>⊙ No   |
| a. Select the reason(s) why you were unable to conduct the<br>minimum number of RANDOM STAFF interviews: (select all<br>that apply)  | <ul> <li>Too many staff declined to participate in interviews.</li> <li>Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility or not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles).</li> <li>Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews.</li> <li>Other</li> </ul> |
| 74. Provide any additional comments regarding selecting or<br>interviewing random staff (e.g., any populations you<br>oversampled, barriers to completing interviews, barriers to<br>ensuring representation): | No text provided.   |
| Specialized Staff, Volunteers, and Contractor Interviews   |   |

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

| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors): | 4  |
|--|--|
| 76. Were you able to interview the Agency Head?  | • Yes  |
|  | C No   |
| 77. Were you able to interview the Warden/Facility<br>Director/Superintendent or their designee?                             | ⊙ Yes  |
| Director/Superintendent of their designee?   | C No   |
| 78. Were you able to interview the PREA Coordinator?   | ⊙ Yes  |
|  | C No   |
| 79. Were you able to interview the PREA Compliance Manager?  | © Yes  |
|  | C No   |
|  | NA (NA if the agency is a single facility agency or is otherwise<br>not required to have a PREA Compliance Manager per the<br>Standards) |

| 80. Select which SPECIALIZED STAFF roles were interviewed<br>as part of this audit from the list below: (select all that apply) | <ul> <li>Agency contract administrator</li> <li>Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</li> <li>Line staff who supervise youthful inmates (if applicable)</li> <li>Education and program staff who work with youthful inmates (if applicable)</li> <li>Medical staff</li> <li>Mental health staff</li> <li>Administrative (human resources) staff</li> <li>Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</li> <li>Investigative staff responsible for conducting administrative investigations</li> <li>Investigative staff responsible for conducting criminal investigations</li> <li>Staff who supervise inmates in segregated housing/residents in isolation</li> <li>Staff on the sexual abuse incident review team</li> <li>Designated staff member charged with monitoring retaliation</li> <li>First responders, both security and non-security staff</li> <li>Other</li> </ul> |
|---|---|
| 81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?                        | © Yes<br>⊙ No   |
| 82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?                       | ⊙ Yes<br>⊙ No   |
| a. Enter the total number of CONTRACTORS who were interviewed:  | 1   |

| b. Select which specialized CONTRACTOR role(s) were<br>interviewed as part of this audit from the list below: (select all<br>that apply) | Security/detention  |
|--|---|
|  | Education/programming   |
|  | ✓ Medical/dental  |
|  | Food service  |
|  | Maintenance/construction  |
|  | C Other   |
| 83. Provide any additional comments regarding selecting or<br>interviewing specialized staff.  | This is a small jail with very few staff. Staff work in multiple roles therefore one or more staff were interviewed using multiple interview protocols. |

# 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: discussions related to testing critical functions are expected to be included in the relevant Standard-specific overall determination narratives.

| 84. Did you have access to all areas of the facility?   | © Yes   |
|---|---|
|   | C No  |
| Was the site review an active, inquiring process that inclu   | uded the following:   |
| 85. Reviewing/examining all areas of the facility in accordance with the site review component of the audit instrument?       | © Yes   |
|   | C No  |
| 86. Testing and/or observing all critical functions in the facility in accordance with the site review component of the audit | ⊙ Yes   |
| instrument (e.g., intake process, risk screening process, PREA<br>education)?   | C No  |
| 87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?                | Yes   |
|   | C No  |
| 88. Informal conversations with staff during the site review (encouraged, not required)?                                      | © Yes   |
|   | C No  |
| 89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of  | I had complete access to the facility throughout the onsite portion of the audit. There was no intake to observer during my time on |
| critical functions, or informal conversations).   | site.   |
| 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?                     | © Yes<br>© No   |
|--|---|
| 91. Provide any additional comments regarding selecting<br>additional documentation (e.g., any documentation you<br>oversampled, barriers to selecting additional documentation,<br>etc.). | Much of the documentation was missing for this audit as discussed<br>in the corrective actions. |

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

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

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

# Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

| 94. Criminal SEXUAL | ABUSE investigation   | outcomes during  | the 12 months | preceding the audit: |
|---------------------|-----------------------|------------------|---------------|----------------------|
|                     | . ABOOL INVESTIGATION | i outoomes uurmi |               | preceding the dualt. |

|                                  | Ongoing |   | Indicted/Court Case<br>Filed | Convicted/Adjudicated | Acquitted |
|----------------------------------|---------|---|------------------------------|-----------------------|-----------|
| Inmate-on-inmate<br>sexual abuse | 0       | 0 | 0                            | 0                     | 0         |
| Staff-on-inmate sexual abuse     | 0       | 0 | 0                            | 0                     | 0         |
| Total                            | 0       | 0 | 0                            | 0                     | 0         |

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

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

#### **Sexual Harassment Investigation Outcomes**

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

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

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

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

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

#### Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

| 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:  | 0   |
|---|---|
| a. Explain why you were unable to review any sexual abuse investigation files:  | There have been no reported sexual abuse incidents at this jail.  |
| 99. Did your selection of SEXUAL ABUSE investigation files<br>include a cross-section of criminal and/or administrative<br>investigations by findings/outcomes? | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any sexual abuse investigation files)</li> </ul>                  |
| Inmate-on-inmate sexual abuse investigation files   |   |
| 100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:  | 0   |
| 101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE<br>investigation files include criminal investigations?   | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</li> </ul> |
| 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE<br>investigation files include administrative investigations?   | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</li> </ul> |
| Staff-on-inmate sexual abuse investigation files  |   |
| 103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:   | 0   |
| 104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?   | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li> </ul>  |
| 105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE<br>investigation files include administrative investigations?  | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li> </ul>  |
| Sexual Harassment Investigation Files Selected for Revie  | •<br>•  |
| 106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:  | 0   |
|   |   |

| a. Explain why you were unable to review any sexual harassment investigation files:   | There have been no reported sexual harassment incidents at this jail.   |  |  |
|---|---|--|--|
| 107. Did your selection of SEXUAL HARASSMENT<br>investigation files include a cross-section of criminal and/or<br>administrative investigations by findings/outcomes? | O Yes<br>O No   |  |  |
|   | <ul> <li>NA (NA if you were unable to review any sexual harassment<br/>investigation files)</li> </ul>                  |  |  |
| Inmate-on-inmate sexual harassment investigation files  |   |  |  |
| 108. Enter the total number of INMATE-ON-INMATE SEXUAL<br>HARASSMENT investigation files reviewed/sampled:  | 0   |  |  |
| 109. Did your sample of INMATE-ON-INMATE SEXUAL   | O Yes   |  |  |
| HARASSMENT files include criminal investigations?   | C No  |  |  |
|   | <ul> <li>NA (NA if you were unable to review any inmate-on-inmate<br/>sexual harassment investigation files)</li> </ul> |  |  |
| 110. Did your sample of INMATE-ON-INMATE SEXUAL   | O Yes   |  |  |
| HARASSMENT investigation files include administrative<br>investigations?  | O 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<br>HARASSMENT investigation files reviewed/sampled:   | 0   |  |  |
| 112. Did your sample of STAFF-ON-INMATE SEXUAL  | © Yes   |  |  |
| HARASSMENT investigation files include criminal investigations?   | C No  |  |  |
|   | <ul> <li>NA (NA if you were unable to review any staff-on-inmate sexual<br/>harassment investigation files)</li> </ul>  |  |  |
| 113. Did your sample of STAFF-ON-INMATE SEXUAL  | © Yes   |  |  |
| HARASSMENT investigation files include administrative investigations?   | © 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.  | No text provided.   |  |  |
| SUPPORT STAFF INFORMATION   |   |  |  |
|   |   |  |  |

| 115. Did you receive assistance from any DOJ-CERTIFIED<br>PREA AUDITORS at any point during this audit? REMEMBER:<br>the audit includes all activities from the pre-onsite through the<br>post-onsite phases to the submission of the final report. Make<br>sure you respond accordingly. | © Yes<br>⊙ No  |
|---|--|
| Non-certified Support Staff   |  |
| 116. Did you receive assistance from any NON-CERTIFIED<br>SUPPORT STAFF at any point during this audit? REMEMBER:<br>the audit includes all activities from the pre-onsite through the<br>post-onsite phases to the submission of the final report. Make<br>sure you respond accordingly. | © Yes<br>© No  |
| a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT<br>who provided assistance at any point during this audit:   | 1  |
| AUDITING ARRANGEMENTS AN  | D 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<br>as part of a consortium or circular auditing arrangement, select this<br>option) |
|   | <ul> <li>A third-party auditing entity (e.g., accreditation body, consulting firm)</li> <li>O Other</li> </ul>                                     |
|   | O Otter  |

#### 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 McLean County Jail (MCJ) policy PREA Policy 605 states the MCJ has zero tolerance of sexual abuse and sexual harassment (605.2). One of the Assistant Jail Administrators is also the PREA Coordinator and therefore has the authority to develop and oversee the efforts of the facility to prevent, detect, and respond to sexual abuse and sexual harassment (605.3). The facility has employed a second Assistant Jail Administrator to assist in jail operations and helps to ensure all PREA duties are completed. In interviewing both jail administrators and observing the work they have done to come into compliance with PREA standards leads the auditor to believe that the PREA Coordinator has sufficient time to oversee the MCJ's PREA compliance efforts. |

| 115.12 | Contracting with other entities for the confinement of inmates  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | Standard 115.12 Contracts with other facilities for the confinement of inmates  |
|        | The MCJ contracts with Burleigh County and Mercer County for the confinement of McLean County inmates. The facility provided the Burleigh County contract. However, the contract did not have a PREA clause with language that outlines their obligation to adopt and comply with the PREA standards; does not provide for contract monitoring; and the contract date had expired. There was no contract for Mercer County provided.                |
|        | <b>CORRECTIVE ACTION:</b> The auditor required current contracts for Burleigh County and Mercer County with the required PREA clauses. On June 15, 2021, the MCJ provided the current contracts for Burleigh and Mercer Counties. However, the PREA clause was outdated and needed to be corrected as it was not between the correct counties. On January 20, 2022, the facility provided the correct contracts which did include the PREA clauses. |

| 115.13 | Supervision and monitoring  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor reviewed the MCJ PREA policy, verified the staffing levels through the schedule and verified through direct observation while on the facility tour. The McLean County Jail has a staffing plan that was created in 2018. The paragraph regarding the average daily population covered the calendar year of 2017. The document stated it was reviewed on 9/28/20. There was no documentation of a review completed in 2019 or 2021. The second paragraph of the staffing plan should have been updated during the 9/28/20 review to include the average daily population for calendar year 2019. A review should be completed in 2021 that includes the average daily population for calendar year 2020. The MCJ staffing plan requires a minimum of correctional officer for every 10 inmates. The population at the time of the audit was 22 inmates and the annual average daily population was 25 inmates. According to the staffing plan, the MCJ would require a third staff on when the population exceeded 20 inmates. There were no documented deviations from the staffing plan. The auditor reviewed the jail log which included unannounced supervisory rounds. However, the PREA Coordinator had not completed these rounds in the last few months. The Assistant Jail Administrator has completed some supervisory rounds as well as one of the correctional officers. The auditor recommends that the PREA Coordinator increase his rounds and the rounds the correctional officer completes not be recorded under the category "supervisory rounds". The correctional officers |
|        | are not in the management structure required by this standard. The standards state intermediate-level or higher-level supervisors should conduct these rounds. For your facility that would include the Sheriff, the Chief Deputy, and the two Assistant Jail Administrators.   |
|        | <b>CORRECTIVE ACTION:</b> The auditor required documented evidence of a 2021 annual assessment which includes the data for calendar year 2020 to determine whether adjustments are needed to the management of the jail in relation to staffing levels, assignments, and monitoring technology. If the staffing plan remains the same at 1 staff to every 10 inmates, the jail must provide the auditor a log for calendar year 2020 for each day that they deviated from their staffing plan. On December 3, 2022, the PREA Coordinator provided an annual assessment that outlined that the minimum staff is one but preferably two during waking and sleeping hours and that there will at least one female on each shift with the ability to perform pat searches. Due to the start of a new calendar year, the auditor required the information regarding the inmate population be updated with the 2021 information and the document be signed.   |

| 115.14 | Youthful inmates  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard           |
|        | Auditor Discussion                                      |
|        | The McLean County Jail does not house youthful inmates. |

| 115.15   | Limits to cross-gender viewing and searches   |
|--|---|
|  | Auditor Overall Determination: Meets Standard   |
|  | Auditor Discussion  |
| The MCJ prohibits cross gender searches of inmates. Many staff are certified corrections officers an Correctional Officer Basic School in which cross-gender search training was taught. When staff are a participate in hands-on pat search training at the facility and this is documented on their Field Trainin Staff were able to demonstrate the correct search techniques to the auditor during the interview process staff available to conduct searches of new female admissions in booking. The facility prohibits examine purpose of determining gender and staff are knowledgeable of correct search procedures for transger inmates. If the offender's genital status is unknown, it is determined during conversations with the offender are cords, or, if necessary, by learning that information as part of a broader medical examinate by a medical practitioner. The facility does not conduct cross gender strip or pat down searches, but is to occur to document it with justification. The facility has policies and procedures and physical contareas that enable offenders to shower, perform bodily functions, and change clothing without nonme gender viewing them in a state of undress with the exception of viewing Isolation 1 and Isolation 2 from the staff of the s | The MCJ prohibits cross gender searches of inmates. Many staff are certified corrections officers and have been through the Correctional Officer Basic School in which cross-gender search training was taught. When staff are newly hired, they participate in hands-on pat search training at the facility and this is documented on their Field Training Officer training log. Staff were able to demonstrate the correct search techniques to the auditor during the interview process. There are female staff available to conduct searches of new female admissions in booking. The facility prohibits examination for the sole purpose of determining gender and staff are knowledgeable of correct search procedures for transgender or intersex inmates. If the offender's genital status is unknown, it is determined during conversations with the offender, 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. The facility does not conduct cross gender strip or pat down searches, but policy requires that if this is to occur to document it with justification. The facility has policies and procedures and physical construction of housing areas that enable offenders to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing them in a state of undress with the exception of viewing Isolation 1 and Isolation 2 from the control room camera monitors. The toilet is clearly visible with no black box or blurred portion over the toilet. |
|  | <b>CORRECTIVE ACTION:</b> To be compliant with this standard the auditor required the image of Isolation 1 and Isolation 2 be modified to obscure the inmate while using the toilet. The auditor required photographic evidence of the monitor of Isolation 1 and Isolation 2 in which the toilet is obscured. On November 24, 2021, the PREA Coordinator provided photographic evidence of installed jail security curtains covering the toilet areas of Isolation 1 and Isolation 2.  |

| 115.16 | Inmates with disabilities and inmates who are limited English proficient   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The MCJ uses the Language Line for interpretive services for inmates who do not speak English. In addition, as Spanish is primarily the language they encounter, they utilize both the border patrol agent and an administrative staff from the office of the State's Attorney. The staff will assist visually impaired or those with intellectually impairments by verbally going over the material or providing assistance in a manner they are able comprehend. During staff interviews they identified all these methods – a number to call, a Spanish speaking staff from the State's Attorney's office and the use of the border patrol agent. |

| 115.17 | Hiring and promotion decisions   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed upper-level staff and reviewed employee files. Not all employees background checks could be located. Some Correctional Officers/Dispatchers are also North Dakota Criminal Justice Information System (CJIS) operators. A fingerprint-based criminal history records check is required for access to the North Dakota CJIS portal. Also, every five years, the CJIS system will initiate a criminal history records check on all users with active application types that require a criminal history records check. Upon completion, the Sheriff receives a copy of the email notice to the user stating the result of that records check. |
|        | The auditor did not locate in the employment file any documentation regarding asking applicants about previous sexual misconduct nor asking again asked directly during the annual reviews of current employees about previous sexual misconduct and the employees continuing affirmative duty to disclose any such misconduct.  |
|        | The auditor was only able to view one application for employment. That applicant did not have previous institutional employment that would require documentation of a reference check regarding any substantiated sexual misconduct during previous institutional employment.  |
|        | <b>CORRECTIVE ACTION:</b> To comply with section (f) of this standard the auditor required the MCJ provide the auditor verification that they have again asked directly during the annual reviews of current employees about previous sexual misconduct and the employees continuing affirmative duty to disclose any such misconduct. On June 22, 2021, the PREA Coordinator provided documentation signed by each employee satisfying this requirement.  |
|        | The auditor required either a current law enforcement background check ran upon hiring or every five years, or the email notice that states the CJIS law enforcement background check was ran with the date and the results. The PREA Coordinator determined it would be simpler if they just ran everyone's background check again and then they would know that every five years from 2021 they run them again (as well upon hiring of new staff). On June 22, 2021, the PREA Coordinator provided background checks for all current employees.  |
|        | The auditor requires verification of their hiring processes to include a reference check of previous institutional employment.<br>If any employees are hired during the corrective action period, the auditor requires the reference check if they had previous institutional employment. On December 3, 2021, the PREA Coordinator provided reference checks for two newly hired employees that had previous institutional employment.  |

| 115.18 | Upgrades to facilities and technologies   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor reviewed the MCJ policy, video monitoring systems, directly observed the facility and conducted interviews with the Sheriff and PREA Coordinator. The facility considers protection of inmates and the standards when contemplating upgrades to the facility or in the application of technology. Best practice is to alleviate any area where an inmate can be in a one-on-one situation with another inmate or with a staff member. Cameras cover all areas. Storerooms and restrooms do not have cameras, but cameras cover the entrance to these rooms and all staff are aware that inmates are not allowed into these areas and that staff are never to be in an area one-on-one with inmate in areas without a camera. Almost all doors throughout the facility have windows within the doors to deter sexual misconduct. The MCJ has not substantially modified its facility since the last audit. The MCJ has not installed or updated its video monitoring system or intercom system since the last audit. |

| 115.21 | Evidence protocol and forensic medical examinations   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor reviewed the PREA policy and interviewed the investigators assigned to conduct investigations, the PREA Coordinator and the nurse. Inmates who have been sexually assaulted would be transported the Coal Country Community Health Clinic in Beulah where the SANE nurse has an examination room set up specifically for sexual assault examinations. The SANE nurse for McLean and Mercer Counties is contracted by this jail and is a part of the sexual assault response team for both counties. She has trained providers at the hospital to conduct forensic exams in her absence. The nurses at the clinic are not SANE certified, but they do know to how to assist the doctor and how to collect evidence the proper way through this training. Dependent on the situation, either the Women's Action and Resource Center or the McLean County Resource Center provides advocacy services. When law enforcement responds to a sexual assault case within the jail, evidence protocol is followed, and they work cooperatively with the SANE to ensure all usable physical evidence is gathered. |

| 115.22 | Policies to ensure referrals of allegations for investigations   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The facility refers all allegations for investigation. The MCJ investigations are completed by qualified investigators and required documentation and reporting occurs. Investigators include the PREA Coordinator, an investigator from the sheriff's office as well as a BCI agent available to investigate allegations of sexual misconduct within the jail. The PREA Coordinator and the investigator from the Sheriff's office have completed the North Dakota Department of Corrections and Rehabilitation's course Investigation of Sexual Misconduct: Training for Correctional Investigators. As required by North Dakota Department of Corrections and Rehabilitation jail standards, staff criminal sexual misconduct is investigated through an independent investigation conducted by the North Dakota Bureau of Criminal Investigations and this is clearly outlined in policy. The investigative policy published on the county website at https://www.mcleancountynd.gov/image/cache/Investigation_Policy.pdf.p> |

| 115.31 | Employee training  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed the Sheriff, the PREA Coordinator and staff and reviewed the training documentation provided by the Assistant Jail Administrator. The facility uses a combination training of a video and materials provided from the National Institute of Corrections and a PowerPoint from the North Dakota Department of Corrections and Rehabilitation (NDDOCR). The training covers all required subject matter as outlined within the standard. The auditor confirmed through interviews that staff were knowledgeable in the required competencies of the standard such as the correct first responder response – separate, provide care, protect evidence, call for assistance, notify the PREA Coordinator and provide a written report as well as the inmates right to be free from sexual abuse and harassment. The staff reaffirm their basic training each year and sign acknowledging training with a statement that also acknowledges understanding of the training. The MCJ also implemented a Field Training Officer program that covers PREA training with all new employees. |

| 115.32 | Volunteer and contractor training   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | Standard 115.32 Volunteer and contractor training   |
|        | The auditor interviewed the Sheriff and the PREA Coordinator. There is only an occasional volunteer for religious services and the contracted nurse. There was no documentation confirming training for the contracted medical staff or the chaplain. The facility provided a blank volunteer and contractor training form that outlines what is specifically contained in the training and includes an acknowledgment of understanding. The form requires a signature and date. On July 23, 2021, the Assistant Jail Coordinator provided documentation confirming training for the jail nurse and the volunteer chaplain. |
|        | CORRECTIVE ACTION: To be compliant with this standard the auditor requires MCJ provide documentation confirming that the volunteer chaplain and the medical contracted nurse has been trained.  |

| 115.33 | Inmate education   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed the PREA Coordinator, the Assistant Jail Administrator and inmates. The MCJ provides basic information to all inmates during the intake process about the jail's zero tolerance policy and how to report. The information is verbally presented during the booking process and the inmate is informed that the information is readily available on the kiosl in the library. Although the facility provides a training video for inmate education which meets the standard for more comprehensive information within 30 days, most of the inmates refuse to participate in this training and sign a refusal form or the day of booking. Of 24 inmates present during the audit, 18 signed refusals to watch the video and the auditor had no training documentation for the remaining six (6) inmates. It should be noted three of these six inmates have been at the facility for more than 30 days. This auditor has completed numerous audits and although she has seen a few refusals, she has not seen this many refusals at one facility. This leads the auditor to believe that the nature or the format at which the information is presented to the inmates is resulting in a large percentage of refusals. The auditor suggests a change in the inmate education signature form to remove the check box for inmate refusals. Also, the more comprehensive information should not be given during the booking process. It should be offered after the inmates have had an opportunity to acclimate to the facility, but within the first 30 days. There were no intakes during the auditor's on-site visit to witness the intake process. There is information available on posters and on the kiosk for continuous and readily available information in the housing units. |
|        | <b>CORRECTIVE ACTION:</b> To be compliant with this standard, the auditor required the MCJ provide documentation of the initial training that the facility completes upon booking. Regarding the more comprehensive education, as most of the inmates  |
|        | are signing a refusal to watch the video, the auditor requires a modification to the method this education is presented to gain<br>more inmate involvement rather than refusals. Documentation of both the initial intake training and the more comprehensive<br>training with inmate participation rather than refusal through the corrective action period is required. During the corrective<br>action period the auditor and the PREA Coordinator discussed various methods of presenting inmate education. On January<br>20, 2022, the PREA Coordinator provided documentation of their renewed inmate training program with signed and dated<br>documentation for both the initial training that includes a brochure and the documentation from the more comprehensive   |

| 115.34 | Specialized training: Investigations   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The investigators have received specialized training as facility investigators through the North Dakota Department of Corrections and Rehabilitation's course Investigation of Sexual Misconduct: Training for Correctional Investigators and the certificates were provided to the auditor. The auditor interviewed the investigator from the McLean County Sheriff's Department and found him to be well trained. Specialized training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Allegations of staff sexual misconduct are referred to the North Dakota Bureau of Investigations. |

| 115.35 | Specialized training: Medical and mental health care   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The MCJ does not have any full or part time medical staff, but contracts with a medical provider. The nurse completed an NIC course in 2018. The certificate printed was titled for a course unrelated to the one required for medical and mental health care providers, but she provided a copy of the test questions she answered, and it is from the required course. |

| 115.41 | Screening for risk of victimization and abusiveness   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed the PREA Coordinator, the Assistant Jail Administrator, staff who perform screenings and the inmates, and reviewed the screening documents on the computer screen. The MCJ completes a screening process upon intake. However, they were not able to print out the screenings from the system. Staff reassess an inmate's status if a referral or request was made by any staff, or if there was an incident of sexual abuse or receipt of additional information that has bearing on their risk of sexual victimization or abusiveness. They do not have nor document a formal follow-up screening process within 30 days following an inmate's arrival. |
|        | <b>CORRECTIVE ACTION:</b> To be compliant with this standard, the auditor required MCJ to reassess the inmate's risk of victimization or abusiveness within 30 days of the inmate's arrival. The auditor required documentation of both the initial screening and of a dated reassessment of all current inmates within the McLean County Jail. At the conclusion of the corrective action period the PREA Coordinator provided current risk assessments and reassessments for all inmates within the facility.   |

| 115.42 | Use of screening information   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The MCJ has a PREA screening process and uses that along with other classification methods to determine placement within their housing. MCJ staff state all housing assignment are done on a case-by-case basis considering the inmate's own views of safety. All inmates shower separately from other offenders. The MCJ implements appropriate controls on the dissemination of responses to screening questions asked pursuant to this standard to ensure that sensitive information is not exploited to the offender's harm by staff or other offenders. During the interviews staff were knowledgeable of this PREA standard. |

| 115.43 | Protective Custody  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The MCJ has extremely limited use of protective custody. If a need arises, and they do not have adequate housing options, they may transfer an inmate to the Burleigh Morton Detention Center or the Mercer County Jail. Their typical response would be to house the suspected perpetrator in involuntary segregated housing. Inmates at risk are only placed in involuntary segregated housing until other accommodations can be made but less than 24 hours while they assess the situation. |

| 115.51   | Inmate reporting  |
|--|---|
|  | Auditor Overall Determination: Meets Standard   |
|  | Auditor Discussion  |
| provides multiple internal<br>offenders or staff for repor-<br>have contributed to such<br>third parties and promptly<br>was utilizing McLean Cou<br>Department of Justice leg<br>dated 6Feb2020 states th<br>purpose. They have a mi<br>are funded at least in par<br>identifying information ab<br>an informed, written, time<br>confidential identifying in<br>immediately forward repo | The auditor interviewed administrators, staff, and inmates, reviewed policy and toured the facility. The McLean County Jail provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other offenders or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Staff accepts reports made verbally, in writing, through the kiosk, anonymously, and from third parties and promptly document any verbal reports. At the time of the on-site portion of the audit the McLean County Jail was utilizing McLean County Resource Center as its external reporting entity. The auditor informed the facility that the Department of Justice legal interpretation of this standard through a FAQ posted on the PREA Resource Center website dated 6Feb2020 states that typically a rape crisis center and other victim service providers should not be used for this purpose. They have a mission of providing support and services to victims. Under federal law, if such centers and providers are funded at least in part, either as a direct recipient or as a subrecipient of certain federal grants they are required to keep identifying information about victims conflicts with the requirement of PREA Standard 51(b) to be able to immediately forward reports of sexual abuse and sexual harassment to agency officials. The auditor discussed different options that they should pursue to find an alternate external reporting agency for inmates. |
|  | <b>CORRECTIVE ACTION:</b> The auditor required an alternate way for inmates to report external to the McLean County Jail. The facility immediately pursued an alternate reporting mechanism and entered into an agreement with a neighboring county, the Mercer County Sheriff's Department. On June 28, 2021, the facility provided the auditor an agreement that states that dispatch at the Mercer County Sheriff's Department has agreed to receive calls from inmates at the McLean County Jail. The Mercer County Sheriff's office will immediately forward any reports of sexual abuse or sexual harassment to the McLean County PREA Coordinator and allow the inmate to remain anonymous upon request. The Mercer County Sheriff's Department has agreed and the McLean County Jail has updated their educational material to  |

| 115.52 | Exhaustion of administrative remedies  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor reviewed the Inmate Grievance policy 608 regarding Inmate Grievances and conducted staff interviews. The MCJ does not impose a time limit on when an offender may submit a grievance regarding an allegation of sexual abuse. In their employee grievance policy 110.1 they specifically state the complaints related to alleged sexual harassment or employee volunteer or contractor misconduct are exceptions to the employee grievance policy. They do not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. They ensure that an offender who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. They issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. |
|        | Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, are permitted to assist offenders in filing requests for grievances relating to allegations of sexual abuse, and are also be permitted to file such requests on behalf of offenders. They have established procedures for the filing of an emergency grievance when the offender is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging a substantial risk of imminent sexual abuse, the MCJ immediately forwards the grievance to the PREA Coordinator for immediate corrective action.   |
|        | There have been no grievances alleging sexual abuse within this auditing period.   |

| 115.53 | Inmate access to outside confidential support services  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed the PREA Coordinator and inmates, reviewed posters throughout the facility and on the kiosk, spoke with the Executive Director of the McLean Family Resource Center and reviewed the Memorandum of Understanding with the McLean Family Resource Center. The MCJ provides a poster in housing areas that lists the address of Just Detention International. In addition, they intended for inmates to have access to outside confidential support services by posting the National Sexual Assault Hotline. Although when calling the National Sexual Assault Hotline the call is routed to the local areas rape crisis center, the auditor recommend the posted information just list the name and local number of the McLean Family Resource Center. On June 29, 2021, the PREA Coordinator provided updated posters that listed the McLean Family Resource Center. The McLean County Jail does hold persons detained solely for civil immigration purposes. The auditor did not witness any resources posted for mailing addresses and telephone, including toll-free hotline numbers where available of local, State, or national immigrant services agencies. |
|        | <b>CORRECTIVE ACTION:</b> The auditor required photographic evidence of any resources posted for mailing addresses and telephone, including toll-free hotline numbers where available, of local, State, or national immigrant services agencies. At the conclusion of the corrective action period, the PREA Coordinator provided photographic evidence of posted notices throughout the housing areas.   |

| 115.54 | Third-party reporting  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The facility has Third Party Reporting information in their policy. This information is also posted in their lobby and on their website at https://www.mcleancountynd.gov/image/cache/Visitor_and_Lobby_Poster.pd f. |

| 115.61 | Staff and agency reporting duties  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The facility requires all staff to immediately report any knowledge, suspicion or information received related to sexual abuse/harassment incidents, retaliation and staff negligence that may have contributed to such incidents. Staff are required to make such reports to the PREA Coordinator, or the Sheriff and a report is submitted to the investigator. Staff interviews confirmed their responsibility to report and to maintain that information in confidence. The PREA policy requires that outside investigators be informed when there is suspected criminal activity. Medical practitioners are required to inform inmates of their duty to report and the limits of confidentiality at the initiation of services. |

| 115.62 | Agency protection duties   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The facility requires all staff to take immediate action to protect the inmate from imminent sexual abuse. All staff understand that "immediate" means when the response is needed – that could mean within minutes if the abuse was recent, or it could mean before the end of the shift for incidents in which an abuse was reported that occurred in the distant past. There have been no reported instances that an inmate was subject to a substantial risk of imminent sexual abuse during this auditing period. |

| 115.63 | Reporting to other confinement facilities  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | Interviews with staff confirm that action will be taken upon receiving an allegation of sexual abuse while an inmate was at another facility. Such action will be initiated no later than 72 hours and actions will be documented. These steps were also noted in the review of the policy. There have been no instances of these allegations received regarding other facilities. |

| 115.64 | Staff first responder duties   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | Interviews with staff verified their process to provide assistance; separate alleged victim/abuser; preservation and protection of evidence by securing the scene including that the victim does not take any actions that could destroy any physical evidence. Once the PREA Coordinator or Sheriff are notified, the coordinated response takes over with the individual being taken to the hospital, an advocate provided, and the investigator notified. |

| 115.65 | Coordinated response   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The MCJ has coordinated actions to be taken when an incident occurs that are outlined within their PREA policy. This plan coordinates actions among first responders, investigators, and facility administrators. Staff interviews and interviews with the PREA Coordinator indicate that staff are aware of their responsibilities to coordinate responses within the facility. Once the PREA Coordinator or Sheriff are notified, the coordinated response includes the individual being taken to the hospital for a forensic examination, an advocate is provided for emotional support services and the investigator is notified so that the victim does not have to portray the circumstances of the assault repeatedly to multiple people. |

| 115.66 | Preservation of ability to protect inmates from contact with abusers   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The MCJ staff will remove alleged staff sexual abusers from contact with inmates pending the outcome of the investigation.<br>The facility is not restricted in any way from protecting inmates from contact with abusers. |

| 115.67 | Agency protection against retaliation   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The PREA Coordinator is charged with monitoring for retaliation. Should any person who cooperates with a sexual misconduct investigation express fear of retaliation; appropriate protective measures will be taken. Retaliation monitoring will be discontinued should the allegation be unfounded. Measures include housing changes, removing contact of alleged staff/inmate abusers and emotional support services for those who fear retaliation. Interviews with the PREA Coordinator confirmed his duties and responsibilities. These steps are properly documented in the PREA policy. There have been no reported incidents and therefore no incidents of retaliation for reporting. |

| 115.68 | Post-allegation protective custody   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The MCJ has extremely limited use of protective custody. If a need arises, and they do not have adequate housing options, they may transfer an inmate to Burleigh Morton Detention Center or Mercer County. Their typical response would be to house the suspected perpetrator in involuntary segregated housing. Inmates at risk are only placed in involuntary segregated housing until other accommodations can be made but less than 24 hours while they assess the situation. |

| 115.71 | Criminal and administrative agency investigations  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed staff and the investigator. Through the interview with the investigator, it was determined that investigations are not terminated should the source of the allegation recant. Should criminal prosecution be considered, the investigator coordinates with the state's attorney. Polygraph tests are not used during their investigations. All written reports are retained for as long as the alleged abuser is incarcerated or employed by the facility plus five years. Investigations will not be terminated due to the departure of an alleged abuser or victim. These steps are properly documented in the PREA policy. The investigators have completed specialized training. The investigations include efforts to determine whether staff actions/failures contributed to the abuse documented through written reports, which will include physical/testimonial evidence, credibility assessments and investigative facts and findings. There have been no investigations conducting during this auditing period. |

| 115.72 | Evidentiary standard for administrative investigations   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The investigator is knowledgeable as to his role as an administrative investigator. He was fully aware that the facility uses no standard higher than the preponderance of evidence in making final determinations of sexual abuse/harassment – meaning that the facility can take necessary actions when at the conclusion of the investigation the evidence leads them to believe the incident more than likely occurred (greater than 50%). |

| 115.73 | Reporting to inmates  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed the PREA Coordinator and the investigator. The PREA policy states following the investigation, the PREA investigator or a staff member designated by the PREA investigator will inform the inmate or inmates whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The MCJ has a form that will be used to report back the outcome to inmates. |

| 115.76 | Disciplinary sanctions for staff   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed the PREA Coordinator and the investigator and reviewed PREA policy. Staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.  |
|        | Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.  |
|        | All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have<br>been terminated if not for their resignation, are reported to law enforcement, unless the activity was clearly not criminal, and<br>to the North Dakota Department of Corrections and Rehabilitation. There have been no reported cases of staff misconduct<br>regarding sexual abuse or sexual harassment. |

| 115.77 | Corrective action for contractors and volunteers   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed the Sheriff and the PREA Coordinator. According to the Sheriff, should any violation of this type be substantiated, the facility has complete authority to administer remedial measures including prohibiting further contact with inmates. Contractors or volunteers who engage in sexual abuse will be reported to law enforcement agencies (unless the activity was clearly not criminal). These requirements are outlined in their policy. |

| 115.78 | Disciplinary sanctions for inmates  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed the Sheriff, the PREA Coordinator and reviewed policy. The facility prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred. The MCJ does not provide counseling or therapy to address and correct the underlying reasons or motivations for abuse. If findings of inmate-on-inmate sexual abuse are substantiated, administrative sanctions will be administered following the formal disciplinary processes and applied commensurate with the level of the infraction. Some examples given are loss of privileges or with more a serious infraction the discipline would be a transfer and/or additional criminal charges. |

| 115.81 | Medical and mental health screenings; history of sexual abuse   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed the nurse and reviewed policy. If inmates disclosed victimization on their screening, staff ensure the inmate is offered a follow-up meeting with the nurse within 14 days of intake. The nurse requires informed consent before reporting information about prior sexual victimization that did not occur with an institutional setting. |

| 115.82 | Access to emergency medical and mental health services  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed staff and reviewed the policy. Offender victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services through Sanford Health in Bismarck, Sakakawea Medical Center in Hazen or Coal Country Community Health Center in Beulah. The policy documents PREA requirements for access to emergency medical and mental health services. Emergency medical and mental health services are provided without charge to inmates. |

| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed the nurse, the PREA Coordinator and reviewed the PREA policy. MCJ will offer a medical evaluation and, as appropriate, offers treatment to all offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment will include 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. The MCJ provides such victims with medical and mental health services consistent with the community level of care. |
|        | Offender victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.  |

| 115.86 | Sexual abuse incident reviews   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed the Sheriff and the PREA Coordinator. The review process is outlined within policy. The MCJ will 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. This review will occur within 30 days of the conclusion of the investigation. The review team includes the Sheriff, the PREA Coordinator and the investigator. The facility has a form to guide them in their review process. There have been no incidents to review at this facility. |

| 115.87 | Data collection  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed the Sheriff and the PREA Coordinator and reviewed the policy. The auditor was not provided the aggregate data report although the facility did state there have been no incidents over this past auditing period. The auditor was not provided the aggregate data for the two facilities it contracts with for the confinement of McLean County inmates. The MCJ does participate in the Department of Justices Survey of Sexual Violence. |
|        | <b>CORRECTIVE ACTION:</b> To meet this standard the auditor required MCJ provide aggregated data as well as aggregate data from Mercer County and Burleigh County. On June 15, 2021, the MCJ provided their annual report. However, the aggregate data for Mercer County and Burleigh Counties was not provided. On January 19, 2022, the PREA Coordinator provided a corrected annual report that included aggregate data from Mercer and Burleigh Counties.      |

| 115.88 | Data review for corrective action  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed the Sheriff and the PREA Coordinator and reviewed the policy. The MCJ had not reviewed data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas; taking corrective action on an ongoing basis; nor had they prepared an annual report of its findings and corrective actions and posted the annual report on their website. |
|        | <b>CORRECTIVE ACTION:</b> To meet this standard the auditor required MCJ assess their efforts for effectiveness, prepare their annual report and post the annual report on their website. On June 15, 2021, the MCJ posted their annual report on their website at https://www.mcleancountynd.gov/departments/sheriffs-office/.  |

| 115.89   | Data storage, publication, and destruction  |
|--|---|
|  | Auditor Overall Determination: Meets Standard   |
|  | Auditor Discussion  |
| The auditor interviewed the Sheriff and the PREA Coordinator. The auditor reviewed the policy. The policy address storage, publication and destruction requirements. Data collected is retained via limited access and it is retained ten (10) years. The facility had not publicly posted its aggregate data, the data for the Mercer County Jail and the aggregate data for Burleigh County Jail (data is posted up to 2018) which it contracts with for confinement of McL inmates. |   |
|  | <b>CORRECTIVE ACTION:</b> To meet this standard the auditor required MCJ to publicly post their aggregate data and the current aggregate data of Mercer and Burleigh counties. On June 15, 2021, the MCJ posted their aggregate data with their annual report on their website at https://www.mcleancountynd.gov/departments/sheriffs-office/. However, the website did not include aggregate data for the facilities they contract with for the confinement of their inmates. On January 20, 2022, the auditor was notified that the updated annual report was posted on the McLean County website. The auditor verified that all information was now on the website as required by this standard to as the posted annual report now includes aggregate data for Mercer and Burleigh Counties. |

| 115.401 | Frequency and scope of audits   |
|---------|---|
|         | Auditor Overall Determination: Meets Standard   |
|         | Auditor Discussion  |
|         | This is the second audit for the McLean County Jail. The first audit was conducted on May 2 and 3, 2018 with the final audit report issued December 17, 2018, following a corrective action period. The facility provided access to all areas of the facility during the onsite audit. The facility was cooperative and provided all documentation that was requested. During the onsite audit, the facility provided a private area to conduct interviews with inmates and staff. The facility posted the auditors contact information at least 6 weeks prior to the audit and inmates were permitted to send confidential information or correspondence to the auditor. |

| 115.403 | Audit contents and findings   |
|---------|---|
|         | Auditor Overall Determination: Meets Standard   |
|         | Auditor Discussion  |
|         | The 2018 PREA Final Audit Report was completed on December 17, 2018 and was posted on the McLean County Jail's website at https://www.mcleancountynd.gov/departments/sheriffs-office/. This current audit report will be posted on the agency website once it is completed. |

| Appendix: Pro | Appendix: Provision Findings  |     |  |
|---------------|---|-----|--|
| 115.11 (a)    | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator  |     |  |
|               | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  | yes |  |
|               | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?   | yes |  |
| 115.11 (b)    | (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator  |     |  |
|               | Has the agency employed or designated an agency-wide PREA Coordinator?  | yes |  |
|               | Is the PREA Coordinator position in the upper-level of the agency hierarchy?  | yes |  |
|               | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?  | yes |  |
| 115.11 (c)    | 11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator   |     |  |
|               | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)   | na  |  |
|               | 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.)   | na  |  |
| 115.12 (a)    | Contracting with other entities for the confinement of inmates  |     |  |
|               | If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |  |
| 115.12 (b)    | Contracting with other entities for the confinement of inmates  |     |  |
|               | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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.)   | yes |  |

| 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?  | na  |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?  | yes |
| 115.13 (b) | Supervision and monitoring  |     |
|            | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  | yes |
| 115.13 (c) | Supervision and monitoring  |     |
|            | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?                       | yes |
|            | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?       | yes |
|            | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?   | yes |

| 115.13 (d) | Supervision and monitoring  |     |
|------------|---|-----|
|            | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-<br>level supervisors conduct and document unannounced rounds to identify and deter staff sexual<br>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 facility does not have female inmates.)  | yes |
| 115.15 (c) | Limits to cross-gender viewing and searches   |     |
|            | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  | yes |
|            | Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?   | yes |

| 115.15 (d) | Limits to cross-gender viewing and searches   |     |
|------------|---|-----|
|            | Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?   | yes |
|            | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
|            | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?   | yes |
| 115.15 (e) | Limits to cross-gender viewing and searches   |     |
|            | Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?  | yes |
|            | If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?          | yes |
| 115.15 (f) | Limits to cross-gender viewing and searches   |     |
|            | Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |
|            | Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |

| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient   |     |
|------------|--|-----|
|            | 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<br>effectively, accurately, and impartially, both receptively and expressively, using any necessary<br>specialized vocabulary?   | yes |
|            | Does the agency ensure that written materials are provided in formats or through methods that<br>ensure effective communication with inmates with disabilities including inmates who: Have<br>intellectual disabilities?   | 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: Have limited reading skills?  | yes |
|            | Does the agency ensure that written materials are provided in formats or through methods that<br>ensure effective communication with inmates with disabilities including inmates who: are blind or<br>have low vision?   | yes |
| 115.16 (b) | Inmates with disabilities and inmates who are limited English proficient   |     |
|            | Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?  | yes |
|            | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?   | yes |

| 115.16 (c) | Inmates with disabilities and inmates who are limited English proficient  |     |
|------------|---|-----|
|            | Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | yes |
| 115.17 (a) | Hiring and promotion decisions  |     |
|            | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?   | yes |
|            | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?                                | yes |
|            | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates<br>who has been civilly or administratively adjudicated to have engaged in the activity described in<br>the two bullets immediately above?   | yes |
|            | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  | yes |
|            | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?                     | yes |
|            | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?  | yes |
| 115.17 (b) | Hiring and promotion decisions  |     |
|            | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?   | yes |
|            | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?  | yes |
| 115.17 (c) | Hiring and promotion decisions  |     |
|            | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?   | yes |
|            | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?                    | yes |
| 115.17 (d) | Hiring and promotion decisions  |     |
|            | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?  | yes |
| 115.17 (e) | Hiring and promotion decisions  |     |
|            | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?  | yes |

| 115.17 (f) | Hiring and promotion decisions   |     |
|------------|--|-----|
|            | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?   | yes |
|            | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?  | yes |
|            | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?   | yes |
| 115.17 (g) | Hiring and promotion decisions   |     |
|            | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  | yes |
| 115.17 (h) | Hiring and promotion decisions   |     |
|            | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)   | yes |
| 115.18 (a) | Upgrades to facilities and technologies  |     |
|            | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)        | na  |
| 115.18 (b) | Upgrades to facilities and technologies  |     |
|            | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)                  | na  |
| 115.21 (a) | Evidence protocol and forensic medical examinations  |     |
|            | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  | yes |
| 115.21 (b) | Evidence protocol and forensic medical examinations  |     |
|            | Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  | yes |
|            | Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |

| 115.21 (c) | Evidence protocol and forensic medical examinations   |     |
|------------|---|-----|
|            | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?   | yes |
|            | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  | yes |
|            | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?  | yes |
|            | Has the agency documented its efforts to provide SAFEs or SANEs?  | yes |
| 115.21 (d) | Evidence protocol and forensic medical examinations   |     |
|            | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  | yes |
|            | If a rape crisis center is not available to provide victim advocate services, does the agency make<br>available to provide these services a qualified staff member from a community-based<br>organization, or a qualified agency staff member? (N/A if the agency always makes a victim<br>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) | 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<br>for the purposes of this section, has the individual been screened for appropriateness to serve in<br>this role and received education concerning sexual assault and forensic examination issues in<br>general? (N/A if agency always makes a victim advocate from a rape crisis center available to<br>victims.) | na  |
| 115.22 (a) | Policies to ensure referrals of allegations for investigations  |     |
|            | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  | yes |
|            | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?   | yes |

| 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<br>or sexual harassment are referred for investigation to an agency with the legal authority to<br>conduct criminal investigations, unless the allegation does not involve potentially criminal<br>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   |
| Policies to ensure referrals of allegations for investigations  |   |
| If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)  | yes   |
| Employee training   |   |
| Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?  | yes   |
| Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?  | yes   |
| Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment  | yes   |
| Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?   | yes   |
| Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?   | yes   |
| Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  | yes   |
| Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?  | yes   |
| Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?   | yes   |
| Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?  | yes   |
| Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  | yes   |
| 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   |
|   | Does the agency have a policy and practice in place to ensure that allegations of sexual abuse<br>or sexual harassment are referred for investigation to an agency with the legal authority to<br>conduct criminal investigations, unless the allegation does not involve potentially criminal<br>behavior?<br>Has the agency published such policy on its website or, if it does not have one, made the policy<br>available through other means?<br>Does the agency document all such referrals?<br><b>Policies to ensure referrals of allegations for investigations</b> , does the policy describe<br>the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is<br>responsible for criminal investigations. See 115.21(a).)<br><b>Employee training</b><br>Does the agency train all employees who may have contact with inmates on its zero-tolerance<br>policy for sexual abuse and sexual harassment?<br>Does the agency train all employees who may have contact with inmates on how to fulfill their<br>responsibilities under agency sexual abuse and sexual harassment prevention, detection,<br>reporting, and response policies and procedures?<br>Does the agency train all employees who may have contact with inmates on the right of inmates<br>and employees to be free from retaliation for reporting sexual abuse and sexual harassment?<br>Does the agency train all employees who may have contact with inmates on the dynamics of<br>sexual abuse and sexual harassment<br>Does the agency train all employees who may have contact with inmates on the dynamics of<br>sexual abuse and sexual harassment in confinement?<br>Does the agency train all employees who may have contact with inmates on the dynamics of<br>sexual abuse and sexual harassment victims?<br>Does the agency train all employees who may have contact with inmates on how to detect and<br>respond to signs of threatened and actual sexual abuse?<br>Does the agency train all employees who may have contact with inmates on how to detect and<br>respond to signs of threatened and actual sexual abuse?<br>Does the agency train all employees who may have contact with inma |

| 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<br>all employees know the agency's current sexual abuse and sexual harassment policies and<br>procedures?  | yes |
|            | In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?  | yes |
| 115.31 (d) | Employee training   |     |
|            | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?   | yes |
| 115.32 (a) | Volunteer and contractor training   |     |
|            | Has the agency ensured that all volunteers and contractors who have contact with inmates have<br>been trained on their responsibilities under the agency's sexual abuse and sexual harassment<br>prevention, detection, and response policies and procedures?   | yes |
| 115.32 (b) | Volunteer and contractor training   |     |
|            | Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? | yes |
| 115.32 (c) | Volunteer and contractor training   |     |
|            | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?   | yes |
| 115.33 (a) | Inmate education  |     |
|            | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?   | yes |
|            | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  | yes |
| 115.33 (b) | Inmate education  |     |
|            | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  | yes |
|            | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?  | yes |
|            | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?  | yes |
| 115.33 (c) | Inmate education  |     |
|            | Have all inmates received the comprehensive education referenced in 115.33(b)?  | yes |
|            | Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?  | yes |

| 115.33 (d) | Inmate education  |     |
|------------|---|-----|
|            | Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?   | yes |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?   | yes |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  | yes |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?   | yes |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  | yes |
| 115.33 (e) | Inmate education  |     |
|            | Does the agency maintain documentation of inmate participation in these education sessions?   | yes |
| 115.33 (f) | Inmate education  | I   |
|            | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?   | yes |
| 115.34 (a) | Specialized training: Investigations  |     |
|            | In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| 115.34 (b) | Specialized training: Investigations  |     |
|            | Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
|            | Does this specialized training include proper use of Miranda and Garrity warnings? (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 sexual abuse evidence collection in confinement settings?<br>(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<br>for administrative action or prosecution referral? (N/A if the agency does not conduct any form of<br>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<br>who work regularly in its facilities have been trained in how to detect and assess signs of sexual<br>abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or<br>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<br>who work regularly in its facilities have been trained in how to preserve physical evidence of<br>sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health<br>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<br>who work regularly in its facilities have been trained in how to respond effectively and<br>professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not<br>have any full- or part-time medical or mental health care practitioners who work regularly in its<br>facilities.) | yes |
|            | Does the agency ensure that all full- and part-time medical and mental health care practitioners<br>who work regularly in its facilities have been trained in how and to whom to report allegations or<br>suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or<br>part-time medical or mental health care practitioners who work regularly in its facilities.)         | yes |
| 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<br>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 screening instrument?   | yes |
|            |   |     |

| 115.41 (d) | Screening for risk of victimization and abusiveness  |     |
|------------|--|-----|
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?   | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?   | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?   | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?   | yes |
|            | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?  | yes |
| 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 information is not exploited to the inmate's detriment by staff or other inmates?   | yes |
| 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<br>the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's<br>health and safety, and whether a placement would present management or security problems?   | yes |

| 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 solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)                   | yes |
| 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<br>the facility document the opportunities that have been limited? (N/A if the facility never restricts<br>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   | I   |
|            | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?   | yes |
|            | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?  | yes |
| 115.43 (e) | Protective Custody   |     |
|            | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?            | yes |
| 115.51 (a) | Inmate reporting   |     |
|            | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?  | yes |
|            | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?  | yes |
|            | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?  | yes |
|            |  | •   |

| 115.51 (b) | Inmate reporting  |     |
|------------|---|-----|
|            | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?   | yes |
|            | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  | yes |
|            | Does that private entity or office allow the inmate to remain anonymous upon request?   | yes |
|            | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)   | yes |
| 115.51 (c) | Inmate reporting  |     |
|            | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?   | yes |
|            | Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  | yes |
| 115.51 (d) | Inmate reporting  |     |
|            | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?   | yes |
| 115.52 (a) | Exhaustion of administrative remedies   |     |
|            | Is the agency exempt from this standard?<br>NOTE: The agency is exempt ONLY if it does not have administrative procedures to address<br>inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply<br>because an inmate does not have to or is not ordinarily expected to submit a grievance to report<br>sexual abuse. This means that as a matter of explicit policy, the agency does not have an<br>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 this standard.)   | yes |
|            | 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<br>alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-<br>day time period does not include time consumed by inmates in preparing any administrative<br>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) |   |                                 |
| 110.02 (1) | Exhaustion of administrative remedies   |                                 |
|            | Exnaustion of administrative remedies         Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)   | yes                             |
|            | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from   | yes<br>yes                      |
|            | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)         After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which  |                                 |
|            | <ul> <li>Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).</li> <li>After receiving an emergency grievance described above, does the agency provide an initial</li> </ul>  | yes                             |
|            | <ul> <li>Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).</li> <li>After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance described above, does the agency issue a final agency</li> </ul>  | yes<br>yes                      |
|            | <ul> <li>Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).</li> <li>After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)</li> <li>Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt</li> </ul>   | yes<br>yes                      |
|            | <ul> <li>Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).</li> <li>After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)</li> <li>Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>Does the initial response document the agency's action(s) taken in response to the emergency</li> </ul>  | yes<br>yes<br>yes<br>yes        |
| 115.52 (g) | <ul> <li>Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).</li> <li>After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)</li> <li>Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)</li> </ul>   | yes<br>yes<br>yes<br>yes<br>yes |
|            | <ul> <li>Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).</li> <li>After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)</li> <li>After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)</li> <li>Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)</li> <li>Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)</li> <li>Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)</li> </ul> | yes<br>yes<br>yes<br>yes<br>yes |

| 115.53 (a) | Inmate access to outside confidential support services   |     |
|------------|--|-----|
|            | Does the facility provide inmates with access to outside victim advocates for emotional support<br>services related to sexual abuse by giving inmates mailing addresses and telephone numbers,<br>including toll-free hotline numbers where available, of local, State, or national victim advocacy or<br>rape crisis organizations?     | yes |
|            | Does the facility provide persons detained solely for civil immigration purposes mailing<br>addresses and telephone numbers, including toll-free hotline numbers where available of local,<br>State, or national immigrant services agencies? (N/A if the facility never has persons detained<br>solely for civil immigration purposes.) | yes |
|            | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?   | yes |
| 115.53 (b) | Inmate access to outside confidential support services   |     |
|            | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?   | yes |
| 115.53 (c) | Inmate access to outside confidential support services   |     |
|            | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?   | yes |
|            | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?   | yes |
| 115.54 (a) | Third-party reporting  |     |
|            | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  | yes |
|            | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?  | yes |
| 115.61 (a) | Staff and agency reporting duties  |     |
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?   | yes |
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?  | yes |
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?   | yes |
| 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-<br>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<br>member to respond to the report required to: Request that the alleged victim not take any actions<br>that could destroy physical evidence, including, as appropriate, washing, brushing teeth,<br>changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within<br>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<br>member to respond to the report required to: Ensure that the alleged abuser does not take any<br>actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth,<br>changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within<br>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 response to an incident of sexual abuse?   | yes |
| 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<br>the agency's behalf prohibited from entering into or renewing any collective bargaining<br>agreement or other agreement that limit the agency's ability to remove alleged staff sexual<br>abusers from contact with any inmates pending the outcome of an investigation or of a<br>determination of whether and to what extent discipline is warranted? | yes |
| 115.67 (a) | Agency protection against retaliation   |     |
|            | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?  | yes |
|            | Has the agency designated which staff members or departments are charged with monitoring retaliation?   | yes |
| 115.67 (b) | Agency protection against retaliation   |     |
|            | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?   | yes |

| 115.67 (c) | Agency protection against retaliation   |     |
|------------|---|-----|
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?          | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
|            | Except in instances where the agency determines that a report of 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?  | 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 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 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).)  | yes |
|            | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)   | yes |

| 115.71 (b) | Criminal and administrative agency investigations  |     |
|------------|--|-----|
|            | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?  | yes |
| 115.71 (c) | Criminal and administrative agency investigations  |     |
|            | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?   | yes |
|            | Do investigators interview alleged victims, suspected perpetrators, and witnesses?   | yes |
|            | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  | yes |
| 115.71 (d) | Criminal and administrative agency investigations  |     |
|            | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?   | yes |
| 115.71 (e) | Criminal and administrative agency investigations  |     |
|            | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?   | yes |
|            | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?   | yes |
| 115.71 (f) | Criminal and administrative agency investigations  |     |
|            | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?   | yes |
|            | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?  | yes |
| 115.71 (g) | Criminal and administrative agency investigations  |     |
|            | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?   | yes |
| 115.71 (h) | Criminal and administrative agency investigations  |     |
|            | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?   | yes |
| 115.71 (i) | Criminal and administrative agency investigations  |     |
|            | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?   | yes |
| 115.71 (j) | Criminal and administrative agency investigations  |     |
|            | Does the agency ensure that the departure of an alleged abuser or victim from the employment<br>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).) | yes |

| 115.72 (a) | Evidentiary standard for administrative investigations   |     |
|------------|--|-----|
|            | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?   | yes |
| 115.73 (a) | Reporting to inmates   |     |
|            | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  | yes |
| 115.73 (b) | Reporting to inmates   |     |
|            | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  | yes |
| 115.73 (c) | Reporting to inmates   |     |
|            | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  | yes |
|            | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?   | yes |
|            | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?      | yes |
|            | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes |
| 115.73 (d) | Reporting to inmates   |     |
|            | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?  | yes |
|            | Following an inmate's allegation that he or she has been sexually 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?   | yes |
| 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<br>underlying reasons or motivations for the abuse, does the facility consider whether to require the<br>offending inmate to participate in such interventions as a condition of access to programming<br>and other benefits?                                  | yes |
| 115.78 (e) | Disciplinary sanctions for inmates  |     |
|            | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?   | yes |

| 115.78 (f) | Disciplinary sanctions for inmates  |     |
|------------|---|-----|
|            | For the purpose of disciplinary action does a report of sexual abuse made in good faith based<br>upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an<br>incident or lying, even if an investigation does not establish evidence sufficient to substantiate<br>the allegation?  | yes |
| 115.78 (g) | Disciplinary sanctions for inmates  |     |
|            | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)  | yes |
| 115.81 (a) | Medical and mental health screenings; history of sexual abuse   |     |
|            | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).              | na  |
| 115.81 (b) | Medical and mental health screenings; history of sexual abuse   |     |
|            | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)                            | na  |
| 115.81 (c) | Medical and mental health screenings; history of sexual abuse   |     |
|            | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).                  | yes |
| 115.81 (d) | Medical and mental health screenings; history of sexual abuse   |     |
|            | Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? | yes |
| 115.81 (e) | Medical and mental health screenings; history of sexual abuse   |     |
|            | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?   | yes |
| 115.82 (a) | Access to emergency medical and mental health services  |     |
|            | Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?   | yes |
| 115.82 (b) | Access to emergency medical and mental health services  |     |
|            | If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?   | yes |
|            | Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  | yes |
|            |   |     |

| 115.82 (c) | Access to emergency medical and mental health services  |     |  |
|------------|---|-----|--|
|            | Are inmate victims of sexual abuse offered timely information about and timely access to<br>emergency contraception and sexually transmitted infections prophylaxis, in accordance with<br>professionally accepted standards of care, where medically appropriate?  | yes |  |
| 115.82 (d) | Access to emergency medical and mental health services  |     |  |
|            | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |  |
| 115.83 (a) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |  |
|            | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  | yes |  |
| 115.83 (b) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |  |
|            | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?  | yes |  |
| 115.83 (c) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |  |
|            | Does the facility provide such victims with medical and mental health services consistent with the community level of care?   | yes |  |
| 115.83 (d) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |  |
|            | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)   | yes |  |
| 115.83 (e) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |  |
|            | If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | yes |  |
| 115.83 (f) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |  |
|            | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?   | yes |  |
| 115.83 (g) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |  |
|            | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |  |
| 115.83 (h) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |  |
|            | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)   | 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   | I   |
|            | 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;<br>ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or<br>perceived status; gang affiliation; or other group dynamics at the facility? | yes |
|            | Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  | yes |
|            | Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  | yes |
|            | Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  | yes |
|            | Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?           | yes |
| 115.86 (e) | Sexual abuse incident reviews   |     |
|            | Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  | yes |
| 115.87 (a) | Data collection   |     |
|            | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?  | yes |
| 115.87 (b) | Data collection   |     |
|            | Does the agency aggregate the incident-based sexual abuse data at least annually?   | yes |
| 115.87 (c) | Data collection   |     |
|            | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?  | yes |
| 115.87 (d) | Data collection   |     |
|            | Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?  | yes |
| 115.87 (e) | Data collection   |     |
|            | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)  | yes |
| 115.87 (f) | Data collection   |     |
|            | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)  | yes |
|            |   |     |

| 115.88 (a)  | Data review for corrective action   |     |
|-------------|---|-----|
|             | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess<br>and improve the effectiveness of its sexual abuse prevention, detection, and response policies,<br>practices, and training, including by: Identifying problem areas?  | yes |
|             | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess<br>and improve the effectiveness of its sexual abuse prevention, detection, and response policies,<br>practices, and training, including by: Taking corrective action on an ongoing basis?   | yes |
|             | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess<br>and improve the effectiveness of its sexual abuse prevention, detection, and response policies,<br>practices, and training, including by: Preparing an annual report of its findings and corrective<br>actions for each facility, as well as the agency as a whole? | yes |
| 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<br>and private facilities with which it contracts, readily available to the public at least annually<br>through its website or, if it does not have one, through other means?   | yes |
| 115.89 (c)  | Data storage, publication, and destruction  |     |
|             | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  | yes |
| 115.89 (d)  | Data storage, publication, and destruction  |     |
|             | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?   | yes |
| 115.401 (a) | Frequency and scope of audits   |     |
|             | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)   | yes |

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