PREA Facility Audit Report: Final

Name of Facility: North Central Correctional Complex

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/05/2021

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.		V
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.		V
Auditor Full Name as Signed: Robert Manville Date of Signature: 12/05/2021		

AUDITOR INFORMATION	
Auditor name:	Manville, Robert
Email:	robertmanville9@gmail.com
Start Date of On-Site Audit:	11/01/2021
End Date of On-Site Audit:	11/04/2021

FACILITY INFORMATION	
Facility name:	North Central Correctional Complex
Facility physical address:	670 Marion-Williamsport Rd E , Marion , Ohio - 43302
Facility Phone	
Facility mailing address:	PO Box 1812, Marion, Ohio - 43302

Primary Contact	
Name:	David Catanese
Email Address:	david.catanese@mtctrains.com
Telephone Number:	(740)387-7040

Warden/Jail Administrator/Sheriff/Director	
Name:	James Craig
Email Address:	james.craig@mtctrains.com
Telephone Number:	(740) 704-4026

Facility PREA Compliance Manager		
Name:	David Catanese	
Email Address:	david.catanese@mtctrains.com	
Telephone Number:	O: 440-453-9033	

Facility Health Service Administrator On-site	
Name:	Polly Schmalz
Email Address:	polly.schmalz@mtcmedical.com
Telephone Number:	(520) 682-2077

Facility Characteristics	
Designed facility capacity:	2426
Current population of facility:	2312
Average daily population for the past 12 months:	2346
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-85
Facility security levels/inmate custody levels:	1(Minimum), 2(Medium)
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	260
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	50
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	378

AGENCY INFORMATION	
Name of agency:	Management & Training Corporation, Inc.
Governing authority or parent agency (if applicable):	
Physical Address:	500 N. Marketplace Drive, Centerville, Utah - 84014
Mailing Address:	
Telephone number:	801-693-2600

Agency Chief Executive Officer Information:		
Name:	Scott Marquardt	
Email Address:		
Telephone Number:		

Agency-Wide PREA Coordin	ator Information		
Name:	Heather Manuz	Email Address:	heathermanuz@gmail.com

AUDIT FINDINGS

Narrative:

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

Management and Training Corporation entered a contract for the Prison Rape Elimination Act (PREA) auditing services with Corrections Management and Communication Group. The primary sole auditor is Robert Manville, and no conflict of interest exists between the two parties. The contract explained the efforts toward transparency, the role of third parties and support staff, compliance considerations regarding the PREA Standards, Department of Justice certification requirements, enough time to conduct the audit, and planning for any corrective action phases. The agency and contracting staff determined that the agency would utilize Online Audit System portal for completion of the audit. The agency documents and the auditor documentation were uploaded on the PREA OAS system. The OAS system is a secure software platform that will prevent the transfer of personally identifiable information and provide the user to have the ability to upload documents and retain the documentation for future use. Prior to the on-site visit, the PREA Coordinator and facility staff uploaded agency and institution policies and supporting documentation, including the completed Pre-Audit Questionnaire, administrative reports, contracts, incident reports, memorandums, brochures, staff rosters, staffing plans, training information, and other reference materials for examination on the OAS system. Policies and documentation are in the form of agency directives and policies. Institution Supplements (IS) are provided in the form of Facility Directives. Updates of the Pre audit questionnaire, investigations and Institutional Supplements were also discussed prior to the beginning of the audit. The auditor reviewed the agency website for PREA reports and updated policies. The facility posted the notice of upcoming audit and auditor address on September 9. 2021 This is the second posting as the original date of the audit was changed due to the pandemic.

The auditor reviewed the September 2018 and September 2015 Audit Report posted on the Agency website and notated all previously recommended corrective action responses. The website also included data collection reports from 2018 through 2020 and the auditor noted all statistical data throughout the review. A search of any litigations, facility information was also reviewed on a Google Search. A discussion was conducted by the PREA coordinator, CMCG and two auditors on the time expected to complete the audit and corrective. Upon arrival at the facility, an in-briefing meeting was held with the Warden, several department heads and support staff, facility PREA compliance manager and PREA Coordinator for Ohio Department of Rehabilitation and Corrections. The standards used for this audit became effective August 20, 2012.

A total of 24 randomly selected correctional staff members were interviewed, to include employees from the day and night shift. Lieutenants from all shifts were included in the interview process as part of the specialized staff. Each officer was able to articulate training they have received documented in the PREA questionnaire. All staff have been trained on Cross Gender searches. All staff indicated while they have been trained, they have not conducted a pat down search on persons of the other gender. Most staff could explain exigent circumstances when they may be required to conduct a cross gender pat search. Specialized staff not assigned to the facility were interviewed. This includes MTC Director and MTC PREA Coordinator and a community based Victim Advocates were interviewed. On site interviews included the Warden, Major, Institutional PREA Compliance Manager (PCM), Investigator, Human Resource Specialist, Intake staff, Health Services Administrator, Mental Health Director, Chaplain, Screening staff, Training officer, Grievance Coordinator, contractor, staff responsible for monitoring for retaliation, and screening staff. Two contracting nurses were also interviewed. All interviewed staff and contractors demonstrated an understanding of the PREA and their responsibilities under this program, relative to their position or roles with the organization and employment status. During the tour and when moving about the facilities 4 non uniformed staff were asked about their reporting duties and how to respond to a sexual assault. All indicated they would staff with the offender and notify to closes correctional staff. Inmate random interviewed inmates included inmates housed in every dormitory in each program. The below offenders were determined to be a target population:

The facility provided a list of all inmates at the facility by living units on the first day of the audit. The auditor randomly selected inmates from all living units. The facility provided a list of residents that documented in the PREA auditor's Hanbook as the targeted population. Identified were; Transgender 7 Allegation of Sexual Abuse 2 Allegation of Sexual Harassment 0 Victimization 3 Gay 4 Segregation for PREA 0 Disabled 1 Deaf 2 LEP 3 Random Inmates 24 Total Interviews 48 The inmates were interviewed using the Department of Justice protocol interview questions. Overall, the inmates interviewed were well informed about the PREA reporting process, their rights to be free from sexual abuse, and how to report sexual abuse or sexual harassment. No inmates refused during the inmate interview process.

Staff File Review: The auditor requested random personnel background checks and reviewed 12 employee training records two contractor files and two volunteer files. The employee records included 4 of the staff were promoted and 4 of the staff were employed in the last 12 months and 4 staff that had 5 year tenure at the facility. Employment background checks are completed, and documentation is maintained on file at the facility. The contractor files had the same email indicating background clearance and contained PREA training documentation. Volunteer files were also reviewed and had the same background clearance and PREA training documentation.

Resident Files: Twenty two offender files were reviewed. The file contained documentation of Intake Screening, Intake PREA orientation, rescreening, initial PREA information and formalized PREA education. The facility updates or completes rescreening throughout the

offender stay at the facility.

Staff Training: The auditor requested specific and some random training files for employees. Including in the specific list was training staff, Superintendent, PCM, Medical staff, Mental Health staff and five random officers. All training records contained yearly training. Specialized staff had received yearly training specific to their duties.

Investigations: During the audit period, there were 7 allegations of sexual abuse or sexual harassment investigations conducted at the facility. All were referred to the Ohio State Patrol and returned to the facility for investigations.

AUDIT FINDINGS

Facility Characteristics:

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

The NCCC Main Unit is a 70 acre, open campus plan of 17 buildings which include: entry, control, administration, visitation, medical, food service, segregation (TPU), programs, a Chapel, and inmate housing units. Housing for the inmate's included ten (10), 224 bed dorms and a segregation unit (TPU).

The showers, located in the housing units, have privacy screens/half walls This facility has a significant number of cameras which is unusual for this level of custody. Also, to mitigate blind spots the facility has installed mirrors. Mirrors have been placed in areas enabling staff to see around corners. Showers also had half walls and an angled partition to restrict viewing. Phones were in each living unit. There were PREA information boards in each of the housing unit.

Security staff mainly make up two shifts, day shift works from 6:00am[1]6:00pm and evening shift works from 6:00pm-6:00am. A review of staffing rosters indicates that each shift has a shift supervisor, an assistant shift supervisor and at least one officer per housing unit. Additional officers are assigned to other areas to include central control, utility, relief, recreation, yard, food service, visitation, intake and work detail to assist with monitoring. Each housing unit also has non[1]security unit management staff that assist with supervision and monitoring. There are 260 correctional staff, 50 contracting staff and 378 volunteers that provide services to the inmate population. During the last 12 months there were 138 staff hired at the facility.

NCCC has been accredited by the American Correctional Association for a number of years. Offender programming is designed to help reduce recidivism. Correctional Officers provide the security supervision.

This facility has a significant number of cameras which is unusual for this level of custody. Also, to mitigate blind spots the facility has installed mirrors. Mirrors have been placed in areas enabling staff to see around corners. Showers also had half walls and an angled partition to restrict viewing. Phones were in each living unit. PREA Posters were located throughout the facility.

The intake reception center contains holding cells, offices and open space. Strip searches are conducted on the back wall. A large partition was constructed to be placed in front of the wall when conducting searches. Holding cells contain restrooms with wall barriers as well as benches/chairs. There are private rooms available for medical, mental health and staff to conduct victim screening instrument in private. PREA reporting information and advocacy information was posted on the board in intake and the staff member indicated that they provide the PREA information and briefly go over it upon arrival.

The Health Services Department contains medical and dental. Dental is chairs and work space while medical contains an x-ray room, pharmacy, a waiting room, a records room, exam rooms and observation areas. Medical records are mostly electronic but the older paper files are behind a locked door. The waiting room is open with chairs. The restroom has a door with privacy film. Exam rooms are private with a solid door containing a small security window. There are observation rooms and suicide observation cells located in health services. The observation rooms can be double bunked and contain a sink, toilet, desk, stool and shower. The entrance doors are solid with a raised small security window. Additionally, the showers are not visible from the entrance doors. The suicide observation cells are similar with the exception of the showers. Showers are behind a locked door and cannot be accessed by the inmate without a staff member.

There are recreation areas located on this compound. These recreational areas include a gymnasium, activity center, exercise equipment, hobby craft rooms, music rooms and an outside recreation area. Zero-tolerance posters are located throughout the recreation area. The bathroom areas in each of the recreational areas include partitions and doors to provide privacy. There were PREA information boards in each of the recreational areas.

The Education area contains classrooms and support services. The Education department provides various programs for the inmates, including:

- · General Educational Development (GED)
- Adult Continuing Education (ACE)
- Advanced Occupational Education
- English as a Second Language
- Release Readiness Program
- · Law Library
- Leisure Library

The Religious Services Department consists of a chapel area, group rooms, music area and offices. There were PREA posters located in the religious services hallway and in the front entrance area. There were no blind spots noted in this area.

The Food Service Department has a large dining room with a food service preparation area attached. Except for the staff dining room, all areas of food service are under constant surveillance with cameras, mirrors or staff supervision. There are zero-tolerance posters in all food service areas. At the present time inmate come to the dining room and pick up a tray and utilize the open area of the dormitory to provide food services.

The Laundry is supervised by correctional staff and employs inmate workers. The laundry is under continuous supervision and is monitored by cameras and mirrors. There were no blind spots noted in the laundry. The laundry area had a bulletin board with PREA information including zero-tolerance and PREA audit notices.

The maintenance areas contains numerous small spaces for each trade, including carpentry, welding, plumbing and caustics. A locked tool room and a locked parts area is located in the space. The inmate restroom is equipped with a door containing privacy.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). 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:	2
Number of standards met:	43
Number of standards not met:	0

The facility had two corrective action plans. Each were completed during the audit onsite review.

The facilit did not have an active lanuguage services contract. The facility contacted MTC cooperate office and the problem was resolved in time for the auditor to utilze the service to interview LEP offenders.

There was a blind area located in the food service area The facilty installed a mirror to resolve the issude during the onsite audit.

The facility had two (2) standards that exceeds expectation:

115.65 Coordinated response

Exceed compliance was determined through the review of policy, interviews with the non-correctional staff, correctional staff, medical staff, victim advocate; mental health and conversations with classification manager, PCM and Warden

115.34 Specialized training: Investigations

Based on a review of the PAQ, 79-ISA-10, the NIC training curriculum, the Moss Group training curriculum, investigator training records as well as the interview with the two facility investigators, indicates the facility exceeds this standard.

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

POLICY AND DOCUMENT REVIEWED:

Pre-Audit Questionnaire

Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination

Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

Policy Directive 903E.02 Sexual Safety in Prisons (PREA)

Organizational Char

Policy Directive (PD) 03.03.140

Management & Training Corporation (MTC) published the agency policy serial # 903E.02, and. Ohio Department of Rehabilitation & Corrections 79-ISA-02.

The polices mandates a zero tolerance toward all forms of sexual abuse and sexual harassment. The policies outlines procedures and expectations related Ohio Department of Rehabilitation & Corrections and Management and Training Corporation approaches to preventing, detecting, and responding to sexual abuse and sexual harassment. These policies were developed to mandate compliance with the PREA standards for adult prisons and jails and includes definitions of prohibited behaviors regarding sexual assault and sexual harassment for staff and inmates.

The policies also included sanctions for staff and inmates found to have participated in prohibited behaviors. Staff members who are found to have perpetrated sexual abuse or sexual harassment are disciplined in accordance with Employee Discipline policy and Facility Rule of Conduct and subject to employment termination. Employees are subject to criminal prosecution.

The policies includes a description of the agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.

Inmates who are found to have perpetrated sexual abuse or sexual harassment are disciplined in accordance with sanctions outlined in the facility's inmate handbook.

MTC memorandum, warden memorandum and a facility organizational chart meet the requirements of this standard. The agency's zero tolerance against sexual abuse is clearly established and the policy outlines the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment allegations. The agency memorandum establishes a position of PREA compliance manager with the responsibility to oversee the implementation and management of Prison Rape Elimination Act of 2003. MTC issued a memorandum to establish a PREA compliance manager to coordinate with the Agency PREA coordinator to oversee the implementation and management of the Prison Rape Elimination Act of 2003 in all correctional facilities.

While MTC has a fulltime PREA coordinator that has responsibility for compliance with all PREA standards, by contract the facility operates under the Ohio Department of Rehabilitation & Corrections private facilities umbrellas and is mandated to follow their polices and procedures for the operation of the facility. The PREA coordinator for Ohio and the PREA compliance manager at North Central Correctional Complex (NCCC) work as a team to carry out the duties of the PREA compliance Managers under the supervision and support of the MTC PREA coordinator. The PREA compliance Manager and PREA coordinator for MTC indicated they have the time and resources to carry out their role in complying with PREA standards and meeting their responsibilities as a contracting facility under the Ohio Department of Rehabilitation & Corrections (ODRC).

The agency and institution policies outline a zero-tolerance policy for all forms of sexual abuse and sexual harassment. Inmates are informed orally about the zero-tolerance policy and the PREA program during in-processing and additional admission and orientation presentations. The orientation is offered in English and in Spanish. Additional program information is contained in the A&O Handbook, and postings distributed throughout the facility (observed during the tour). All written documents are available in English and Spanish. Additional interpretive services are available for inmates who do not speak or read English. Both institution staff and inmates are provided with a wealth of opportunities to become aware of PREA policies s and procedures. All employees receive initial training and annual training, as well as updates throughout the year. The institution meets the standards with all the programs they have implemented to ensure the inmates and staff understand its position on zero tolerance. Compliance was determined by review of orientation power point presentations, posters, A&O

 $handbook\ and\ interviews\ with\ staff,\ contractors,\ volunteers,\ and\ inmates.$

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	Pre-Audit Questionnaire
	Memo: MTC PREA Coordinator
	Memo Ohio Contract through 2021
	The PAQ indicated that the agency has entered into or renewed a contract for the confinement of inmates on or after August 20, 2021, or since the last PREA audit, whichever is later. MTC is a private for profit corrections and detention management company and does not contract with other entities for the confinement of inmates. The agency does not have a Contract Administrator because it does not contract with other agencies for the confinement of its inmates and as such an interview was not conducted PAQ indicated that all contracts require the agency to monitor the contractor's compliance with PREA standards. The agency and facility meet the mandates of this standard.NCCC does not contract with external entities for the confinement of offenders.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination
	NCCC Staffing Plan
	Daily Shift Roster
	Exception Reports (Deviations from Staffing Plan)
	Annual PREA Staffing Plan Assessment
	Documentation of Unannounced Rounds
	MTC Policy 903E.02 Sexual Safety in Prison (PREA)
	PREA- Annual Staffing Plan Review Certification
	Camera Locations
	Program Performance Work Statement
	Staffing Plan re: Adequate Levels of Staffing
	Security Roster & Activity Log re: Supervisor Rounds & Staffing Deviations (All Shifts) MTC Annual Reviews & Audits
	Copies of officers' logbooks showing unannounced rounds by supervisors on all shifts
	Unannounced Rounds
	Policy 903E.02 Sexual Safety in Prison mandates that the facility will complete a staffing plan prior to opening a facility and will continue to review a minimum of once a year utilizing the following criteria;
	- Generally accepted detention and correctional practices;
	- Judicial findings of inadequacy;
	- Findings of inadequacy from Federal investigative agencies;
	- Findings of inadequacy from internal or external oversight bodies;
	- All components of the facility's physical plant;
	- The composition of the inmate population;
	- The number and placement of supervisory staff;
	- Institution programs occurring on a particular shift;
	- Applicable State or local laws, regulations, or standards;
	- The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and - Other relevant factors.
	Interviews with the Warden and executive staff revealed compliance with the PREA, and that other safety and security issues are always a primary focus when they consider and reviewing their respective staffing plans. The facility has a Staffing Report that is developed for each pay period. The Warden meets weekly with his executive staff with operational needs including addressing staffing issues as they relate to the PREA.

from 6:00pm-6:00am. A review of staffing rosters indicates that each shift has a shift supervisor, an assistant shift supervisor and at least one officer per housing unit.

The PAQ indicated that the current staffing is based off of 2376 inmates. The facility present population is 2375 The facility employs 260 staff. Security staff mainly make up two shifts, day shift works from 6:00am-6:00pm and evening shift works

The institution has been provided with all necessary resources to support the programs and procedures to ensure compliance with the PREA standards. The audit included an examination of all video monitoring systems; staff interviews; and rosters. Supervisory and Administrative staff members routinely make unannounced rounds covering all shifts and these rounds are documented. PREA rounds are documented in operations lieutenants' logs and at the officer's stations logs for housing units.

There have been no judicial findings of inadequacy from federal investigative agencies or findings of inadequacy from internal or external oversight bodies relevant to this standard. All essential posts are filled each shift and no essential posts are kept open for salary savings. When programs are offered, staffing is increased to provide additional supervision. The review of Institution Duty Officer (IDO) unannounced PREA rounds logs confirmed that intermediate level or higher-level supervisors, including shift supervisors and department heads, conduct and document such visits throughout the institution, during the day, at night and on the weekends. The Warden, deputy wardens and Major serves as IDO. The IDO works weekend at the facility to provide overview. Staff members are prohibited from alerting other employees regarding unannounced rounds. Interviews with inmates and housing unit officers also confirmed that random, unannounced rounds are conducted by Institution Duty Officers daily, including nights and weekends. PREA rounds are documented in operations logs and at the officer's stations logs for housing units. An examination of policy and supporting documentation and all interviews confirms compliance with this standard. Compliance was determined by staff interviews conducted during the tour of all areas of the facility, including human resource manager and correctional staff; reviews of documented staffing rosters, daily supervisory checks and facility workforce quarterly meeting records; pay period staffing reports and the examination of the video monitoring system. A comprehensive tour of the facility was conducted during the audit that included looking for blind spots, reviewing cameras coverage and available staff in areas that inmates are assigned.

Subsequently, tours of each area of the facility was also reviewed while going throughout the facility to meet with staff and to interview inmates.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02 Sexual Safety in Prison
	Statement of Fact- No Youthful Inmates
	MTC Policy 903E.02 mandates that NCCC does not house youthful offenders. Further compliance was provided through Statement of Non Applicability, and interviews with Warden and Staff Conducting Unannounced Rounds and OCRD Monitor.

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MTC Policy 903E.02 Sexual Safety in Prison

Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination

Ohio Department of Rehabilitation & Corrections 79-ISA-01 - Prison Rape Elimination

Ohio Department of Rehabilitation & Corrections 310-SEC-01 – Incarcerated Individual and Physical Plant Searches

Ohio Department of Rehabilitation & Corrections 79-ISA-05 - Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) Policy

Ohio Department of Rehabilitation & Corrections 310-SEC-01 - Incarcerated Individual and Physical Plant Searches

Search Logs

Ohio Department of Rehabilitation and Correction's Prison Rape Elimination Act (PREA) Training

Staff Training Records

Observation of Cross Gender Announcement

Observation of Cross Gender Announcement

Statement of Fact- No Females housed at MCCC

Photo of Staff Announcement

Ohio Department of Rehabilitation & Corrections 310-SEC-01 – Incarcerated Individual and Physical Plant Searches and Ohio Department of Rehabilitation & Corrections 79-ISA-05 - Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) Policy mandates that Cross-gender strip or cross-gender body cavity searches are prohibited, except in emergency situations or when performed and documented by a medical practitioner. 310-SEC-01, states employees must always display the highest degree of professionalism when conducting searches. The institution shall document all cross-gender strip searches, crossgender visual body cavity searches and all cross-gender pat down searches of female incarcerated individuals on an incident report Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the inmates of the opposite sex except in exigent circumstances and never for the purpose of examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Staff interviews also confirmed that all officers have been trained to conduct cross-gender pat searches. Staff interviews indicated they received cross-gender pat search training during initial and annual training. The facility allows transgender offenders to determine staff gender for pat searches. The facility does not allow cross gender pat searches accept in emergency situations. In cases when a cross gender pat search occurs staff must document the incident on pat search logbook. The auditor observed that each unit has individual stalls for privacy in utilizing the toilets. The facility has implemented a policy that all opposite gender staff working the units will announce themselves prior to walking the range to allow inmates the opportunity to prepare themselves from a privacy perspective. Control room will document announcement were made and will also make announcement with person of the other gender enter the housing units. Inmates interviewed acknowledged they were allowed to shower, dress and use the toilet without being viewed by staff of the opposite gender. Staff and inmates interviewed indicated employees of the opposite gender announce their presence before entering a housing unit. Unit staff also announce the possibility of opposite gender staff entering the housing units at the beginning of each shift. Additionally, the auditor observed written notifications which clearly stated the possibility of opposite gender staff routinely entering the units posted in the unit common areas. The postings were written in both English and Spanish. Staff members were aware of the policy prohibiting the search of a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. During the past 12 months, there were no exigent circumstances that required cross-gender viewing of an inmate by a staff member. The living areas have showers with partitions that provides for inmate privacy while showering. Some toilet areas have partitions with door to allow inmates to use the restroom without being viewed by staff. Other bathroom areas have routine doors with a sink.

Officers would be required to document all cross-gender strip searches and cross-gender visual body cavity searches. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the inmates of the opposite sex except in exigent circumstances and never for the purpose of examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Staff interviews also confirmed that female officers had been trained to conduct cross-gender pat searches. Staff interviews indicated they received cross-gender pat search training

during initial and annual training. The PREA training states that transgender and intersex inmates are seen by the institutional PREA Accommodation Strategy Team shortly after arrival at reception centers and anytime they are transferred to another prison. During the team meeting, the members will determine the gender of staff who shall be permitted to pat down and strip search the inmate and how it will be conducted. Inmates wishes and request for housing, pat down and strip search is taken into consideration before the PREA accommodation Strategy Team makes a final decision on each area of the accommodation of transgender or intersex inmates.

Staff and inmates interviewed indicated employees of the opposite gender announce their presence before entering a housing unit. Unit staff also announce the possibility of opposite gender staff entering the housing units at the beginning of each shift. During the tour the auditor observed that the facility utilizes a buzzer and flasher system for the opposite gender announcement. The female staff member initiates the flasher and buzzer upon entry into the housing unit. The auditor observed the buzzer and flasher system being utilized upon entry into each housing unit during the tour. The auditor observed written notifications which clearly stated the possibility of opposite gender staff routinely entering the units posted in the unit common areas. The postings were written in both English and Spanish. Staff members were aware of the policy prohibiting the search of a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. During the past 12 months, there were no exigent circumstances that required cross-gender viewing of an inmate by a staff member. Based on the review of policies and notices regarding the presence of female staff in the units, observation of the showering/dressing areas, modification that were completed during the audit and interviews with staff and inmates, it has been determined that NCCC is in compliance with this standard. Seven Transgender offenders were interviewed. Each stated they are allowed to shower separate from general population and were allowed to discuss housing assignment during the initial classification committee meeting. One offender stated that his dormitory knows that she is transgender and allow her to shower by herself whenever she wishes, and other offenders assigned to housing unit respect her privacy and other offenders do no come in the showering area when she showers.

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MTC - 903E.02 Sexual Safety in Prison

Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination

Ohio Department of Rehabilitation & Corrections 64-DCM-02 - Inmates with Disabilities

Ohio Department of Rehabilitation and Correction's Prison Rape Elimination Act (PREA) Training

Language Line Service, Inc. Agreement

Inmate Handbook - Spanish

Staff Training Records

Corrective Action Plan

Ohio Department of Rehabilitation & Corrections 64-DCM-02 – Inmates with Disabilities mandate that inmates with disabilities and inmates who are limited English shall not be discriminated against and the facility shall provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act and the provisions established in this Directive.

Ohio Department of Rehabilitation & Corrections 64-DCM-02 – Inmates with Disabilities establishes local facility to respond to needs of inmates with Disabilities or Limited English Proficiency: Upon identification of an inmate with a disability which prevents them from reading or understanding inmate PREA educational materials, staff conducting initial intake screenings coordinate with other staff as needed to obtain appropriate accommodations addressing the inmate's disability (i.e. referral to medical as appropriate).

Through policy and practice, the facility staff ensures that inmates with all disabilities listed in 115.16a have an equal opportunity to participate in and benefit from all aspects of the facilities efforts to prevent, detect and respond to sexual abuse and sexual harassment. The disabled inmates interviewed stated they were instructed about PREA compliance and felt safe from sexual abuse. All PREA related information (written information), including postings, brochures and handouts are available in English, and Spanish and other languages. Staff also may read information to inmates when necessary. The facility does not rely on inmate interpreters, inmate readers or other types of inmate assistants in the performance of first responder duties or during the investigation of an inmate's sexual abuse/sexual harassment allegations.

Interviews with first responders, medical, mental health and investigative staff confirmed their awareness of the prohibition of using inmate interpreters for PREA compliance functions. Interviews with two (2) non-English proficient inmates identified that the facility did not have a current contract for language services. The PREA compliance manager confirmed the contract had not been revised as mandated. A corrective action plan was required. Within 2 hours the facility had corrected the problem and was able to provide language services for the two Hispanic inmates. The compliance manager placed the new contract and code in each housing unit and sent an email to all shift supervisors with the new contract information during the onsite audit.

The PAQ expressed that there were zero instances where an inmate was utilized to interpret, read or provide other types of assistance. All staff indicated that they were not aware of a time that an inmate was utilized for these purposes. Interviews inmates indicated that none had an inmate assist them in any way related to sexual abuse or sexual harassment.

One inmate that was deaf indicated he could not hear when female staff came on the unit. The unit staff escorted the auditor to the housing unit housing the hard of hearing inmate and verified that each dormitory is equipped with a buzzer and strobe light for female staff to announce their present in the living units.

Compliance of this standard was confirmed by review of Agency Policies, institutional corrective action for contracting services for language interpretation services and interviews with staff, Spanish speaking inmate and disabled inmates.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MTC-201.3 Background Check

Ohio Department of Rehabilitation & Corrections 34-PRO-07 - Background Investigations

Ohio Department of Rehabilitation & Corrections 79-ISA-01 - Prison Rape Elimination

Prison Rape Elimination Act (PREA) Questionnaire for Prior Institutional Employers

Personnel Files of Staff

Contractor Background Files

Pre-Audit Questionnaire

Ohio Department of Rehabilitation & Corrections 34-PRO-07 - Background Investigations and MTC policy 903E.02 Sexual Safety in Prison - Hiring and promotion decisions requires all employees, contractors and volunteers have had criminal background checks completed. The facility does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor or volunteer that may have contact with inmates, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 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, or if the person has been civilly or administratively adjudicated to have engaged in the activity. Incidents of sexual harassment are considered in determining whether to hire or promote anyone or to enlist the services of any contractor or volunteer, who may have contact with inmates. MTC Policy 203.1 Rules of Conduct, MTC-201.3 Background Check, MTC Employee Handbook, and MTC Interview Questions mandates that employees, contractors and volunteers are required to receive background check including NCIC check every two years. The facility staff asked applicants and employees who may have contact with inmates directly about previous misconduct; they use a form to document. The facility also imposes upon employees a continuing affirmative duty to disclose any misconduct related to PREA. MTC policy prohibits staff from material omissions and the provision of materially false information. This may result in grounds for termination. Interviewed HR staff confirmed that the facility will provide information on past PREA Substantiated sexual abuse or sexual harassment if request. The staff would require the hiring authority send documented evidence that the past employee is applying for a position at the agency.

Policies and staff interviewed stated that the facility requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates Policy requires that before hiring new employees who may have contact with inmates, the agency performs a criminal background check; and consistent with Federal, State and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of inmates or detainee sexual abuse or harassment or any resignation pending an investigation of such allegations. MTC requires the facility not to hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor who may have contact with inmates as listed in this standard to include the following provisions as stated in the PREA standards:

- 1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; to include persons who are mentally ill or disabled or retarded or chronically ill or handicapped, or institution providing skilled nursing or intermediate or long-term care or custodial or immaterial care.
- 2. 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; or
- 3. Has been civilly or administratively adjudicated to have engaged in the activity described in subsection

During the last 12 months the facility has conducted background checks on 138 new staff or staff with five year tenure at the facility and 11 new contractors.

Employees have a duty to disclose such misconduct. Material omissions regarding this type of misconduct would be grounds for termination. The submission of false information by any applicant is grounds for not hiring the applicant. The human resource manager confirmed that the agency attempts to contact prior employers for information on substantiated allegations of sexual abuse or resignations which occurred during a pending investigation of sexual abuse. Interviews with staff and a

review of documentation (PREA Screening Form) confirm compliance with this standard. Four new staff member, four promoted staff personnel files and foue staff with over five year tenure in the facility were reviewed and found to have completed prior to employment, after five years of tenure and promotion. Compliance was determined by interviews with human resources staff and reveiw of ODRC and MTC policy as well as background checks for random staff and contractors.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02 Sexual Safety in Prisons
	PREA Annual Assessment Meeting
	Physical Plant Diagrams Indicating Camera Placement
	Statement of Fact
	MTC Policy 903E.02 Sexual Safety in Prison requires that when designing or acquiring any new facility and in planning and substantial expansion or modification of existing facilities, the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. Interviews with the PREA Compliance Manager and Warden indicated that was no major expansion during the past four years. The facility Management Team indicated when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the plan will consider how the technology may enhance the facility's ability to protect inmates from sexual abuse. Compliance was determined by review of camera system, interviews with Warden and reviewing yearly staffing and upgrade plan.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

Memorandum of Understanding with Marion County Counseling Center

Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

OSHP Investigator Protocol

OSHP Evidence Protocol

Memorandum of Understanding with the Ohio State Highway Patrol

PREA Victim Support Victim Support Person Training

Victim Support Staff

Medical Staff Safe Prisons Training

Sexual Assault Brochures

MTC Policy 903E.02 Sexual Safety in Prisons

The PAQ indicated that the agency/facility is responsible for conducting administrative and criminal investigations and the Ohio State Highway Patrol (OSHP) is also responsible for conducting criminal investigations. Additionally, the PAQ stated that when conducting sexual abuse investigations, the agency investigators follow a uniform evidence protocol. Policy requires the agency/facility to initiate and/or conduct administrative and criminal sexual abuse investigations to include inmate-on-inmate sexual abuse or staff sexual misconduct. The facility has designated a facility Investigator. The state PREA Investigation Unit and the State Police can investigate administrative and criminal sexual abuse based on the nature of the case. Interview with the Facility investigator indicated that policy requires and give them guidelines to follow a uniform evidence protocol. The facility utilizes the internal and external offices to conduct investigations regarding all felony related crimes to include alleged sexual violence that occurred at the facility. Both the facility and the external office follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The facility offer all victims of sexual abuse access to forensic medical examinations at an outside facility, the local hospital without financial cost. The local hospital provides a Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). If one is not available, the examination is performed by a qualified medical staff. The facility provides emails for efforts to provide SANE or SAFE staff.

The facility makes available to the victim a victim advocate. If not available to provide victim advocate services, the facility makes available (to provide services) a qualified staff member from a community-based organization or a qualified facility staff member. When PREA allegation is investigated by an outside agency, the facility request that the investigator follow the PREA requirements. The preponderance of Evidence is defined as proof by evidence that, compared with evidence opposing it, leads to the conclusions that the fact at issue is more probably true than not. Policy also states that as a result of the preponderance of the evidence, the investigator may determine whether the allegation is substantiated.

A review of training records confirmed that internal investigative unit staff have received appropriate investigator training on the investigation of sexual abuse and harassment in a confinement setting. Interviews with staff, local hospital nurse, local rape crisis center advocate and an examination of documentation confirmed compliance with this standard. Correctional and medical staff members were interviewed concerning this standard and all were knowledgeable of the procedures required to secure and obtain usable physical evidence when sexual abuse is alleged. Staff members were also aware of the staff responsible for conducting PREA investigations. Staff carry a First Responder card to provide reminders and expected responses to sexual abuse.

The hospital representative indicated in our telephone interview that the hospital works with a victim advocacy group located at the hospital to provide advocacy services including staff to accompany inmates that have been sexually abused. There were no forensic examinations conducted during the past 12 months.

Compliance was determined through review of policy, documentation of training records, Memo from advocacy program and interviews with NCCC staff and inmates. NCCC investigators interviews also confirmed that the investigative staff uniform evidence protocol.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MTC Policy 903E.02 Sexual safety in Prison

Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

Ohio Administrative Code, Rule 5120-9-24 - Incident Reporting and Investigation

Investigative Reports

Report of Alleged Sexual Abuse

MTC Policy 903E.02 Ensuring Safe Prisons Ohio Administrative Code, Rule 5120-9-24 – Incident Reporting and Investigation requires all allegations of sexual misconduct shall be referred for investigation to the Ohio State Highway Patrol unless the allegation does not involve potentially criminal behavior. A review of the DRC website (https://drc.ohio.gov/prea) confirmed that 79-ISA-01 is available for the public to review.

The institutional investigator shall forward sexual harassment reports to the institution Operational Compliance Manager (OCM) for investigation only after reviewing the evidence and determining that the case is actually a sexual harassment case. All allegations of sexual misconduct shall be referred for investigations to the Ohio State Highway Patrol unless the allegation does not involve potentially criminal behavior. The PAQ indicated that there were 26 allegations of sexual abuse and/or sexual harassment reported within the previous twelve months, six of the allegations were considered PREA related and all 6 resulted in an administrative investigation. None of the allegation were considered criminal in nature and none were forwarded of prosecution or SANE evaluations.

Ohio Administrative Code, Rule 5120-9-24, states that incidents that may involve the commission of a criminal offense shall be reported to the Ohio State Highway Patrol for their review. 79- ISA-02 states that all allegations of sexual misconduct shall be referred for investigation to the Ohio State Highway Patrol unless the allegation does not involve potentially criminal behavior. A review of the ODRC website (https://drc.ohio.gov/prea) confirmed that 79-ISA-01 is available for the public to review.

When required, the facility investigators refer sexual abuse investigations (criminal violations)

A review of documentation and staff interviews confirmed compliance with this standard. A review of training documents confirmed that all investigators received instruction in conducting sexual assault investigations in confined spaces/prisons. Interviews with staff, as well as an examination of policy/supporting documentation, confirm compliance with this standard.

The Investigating staff was interviewed and proved very knowledgeable concerning the protocols for conducting investigations of alleged sexual abuse/sexual harassment. There were five allegation of sexual abuse and one allegation of sexual harassment during the auditing period. All allegations were referred to the OSHP for investigations. All allegations were referred back to the facility for investigations. Interviews with NCCC investigators, as well as an examination of supporting documentation, confirm the facility's compliance with this standard.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PREA – Appropriate Supervision of LGBTI and Sex Offenders
	Prison Rape Elimination Act (PREA) Training
	Ohio Department of Rehabilitation & Corrections 39-TRN-10 – Employee Orientation Training
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination
	Pre-Audit Questionnaire
	Prison Rape Elimination Act - Training Acknowledgement In-service Pre-Service Summary Review Test re: PREA Knowledge
	PREA Posters
	All staff is provided an Employee Manual which includes information on all areas of PREA training and protocol for sexual abuse prevention, intervention, reporting, protecting the inmates, and preserving the possible crime scene. Training includes:
	A zero-tolerance policy for sexual abuse and sexual harassment
	How to fulfill staff responsibilities under agency sexual abuse and sexual
	harassment prevention, detection, reporting, and response policies and procedures.
	Inmates' right to be free from sexual abuse and sexual harassment.
	Employees' right to be free from retaliation for reporting sexual abuse and sexual harassment.
	Dynamics of sexual abuse and sexual harassment in confinement.
	Common reactions to sexual abuse and sexual harassment victims.
	How to detect and respond to signs of threatened and actual sexual abuse.
	How to avoid inappropriate relationships with inmates.
	How to communicate effectively and professionally with inmates, including lesbian,
	gay, bisexual, transgender, intersex, or gender nonconforming inmates.
	How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
	Newly hired employees receive training relative to the PREA standards during their initial training in a classroom setting. Bi yearly refresher training is required for all staff, utilizing a Computer-Based PREA training program. Contractors and volunteers are provided training relative to their duties and responsibilities by the facility PREA Compliance Manager. A review of the training curriculum, training sign-in sheets, and other related documentation, as well as staff interviews, confirmed staff is required to acknowledge, in writing, not only that they received PREA training, but that they understood it. A review of documentation and staff interviews confirmed that the facility is compliant with this standard.
	A sampling of staff annual training files (15) was reviewed and found to contain documentation supporting compliance with this standard. All staff interviewed indicated that they had received the required PREA training initially and annually. Officers receive additional PREA training/updates when needed and officers assigned to the restrictive housing unit also receive additional training, transportation officers, specialized housing such as mental health and supervisory training. The extensive

training provided and the staff's knowledge of the PREA requirements confirmed that the facility is compliant with this standard. Shift supervisor's and staff provided documentation of shift briefing training that is provided on an ongoing basis.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED PREA – Appropriate Supervision of LGBTI and Sex Offenders
	Prison Rape Elimination Act (PREA) Training
	Ohio Department of Rehabilitation & Corrections 39-TRN-10 – Employee Orientation Training
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination
	Pre-Audit Questionnaire
	Prison Rape Elimination Act - Training Acknowledgement In-service Pre-Service Summary Review Test re: PREA Knowledge
	Contractor/Volunteer/Intern Training Acknowledgement Form
	Training outline for NCCC Volunteer Training on PREA
	Statement of Fact
	Contractors and volunteers are provided training relative to their duties and responsibilities. The chaplain provided files for volunteers that documented the annual training. The chaplain indicated the facility updated training quarterly which included training for volunteers after background checks are cleared prior to having contact with inmates. Contracting staff that are full time receive the same training a MTC employees and usually specialized staff based on their role at the facility. The facility maintains documentation confirming that volunteers and contractors understand the training they received. NCCC documents volunteer and contractor training using the Training Acknowledgement form and rosters, which requires the volunteers, contractors and instructor signature and date. An interview with contractor confirmed they had received PREA training, understood the zero-tolerance policy and how to report allegations or reports of sexual abuse or sexual harassment. An interview with a Coordinator indicated all contractors receive PREA training based on their role at the facility.
	Due to the pandemic volunteer training was discontinued. However, training has restarted doing Zoom training for all volunteers prior to resuming programs.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED MTC Policy 903E.02 Sexual safety in Prison
	Ohio Department of Rehabilitation & Corrections 52-RCP-10 – Inmate Orientation
	Ohio Department of Rehabilitation & Corrections 64-DCM-02 – Inmates with Disabilities
	PREA Education Video
	Inmate Handbook (English and Spanish)
	PREA Posters (English and Spanish)
	Jpay PREA Continuous Education Announcement
	Inmate Training Records
	Inmate File Review
	PAQ
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination; Offender handbook; and Offender Orientation Training establishes the standard required training. Inmates receive information during the intake process that includes an Offender Handbook, printed in both English and Spanish. There are PREA posters throughout the facility and in each housing unit, and a PREA "Report Line" telephone number which may be called to report sexual abuse or sexual harassment, is posted on the unit bulletin boards. There is an interpretive language service available for limited English

Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination; Offender handbook; and Offender Orientation Training establishes the standard required training. Inmates receive information during the intake process that includes an Offender Handbook, printed in both English and Spanish. There are PREA posters throughout the facility and in each housing unit, and a PREA "Report Line" telephone number which may be called to report sexual abuse or sexual harassment, is posted on the unit bulletin boards. There is an interpretive language service available for limited English proficient inmates. A review of A&O Checklists verified that inmates received Sexual Assault/Sexual Abuse Prevention & Intervention education and relevant written materials. All inmates are required to acknowledge in writing they have received PREA education. A staff member conducts an additional education program regarding the PREA for all inmates within 30 days of their arrival at the facility. If an inmate is transferred to another facility, policy requires that this training process be repeated at the new institution, as confirmed through interviews with newly arrived inmates. The program includes definitions of sexually abusive behavior and sexual harassment, prevention strategies and reporting modalities.

There is a translation language line available to LEP inmates. The auditor was provided a random sampling of A&O Checklists/Signature Sheets to verify that inmates, admitted during the auditing period, received the Sexual Abuse and sexual harassment (PREA) education and relevant written materials. Forty four inmates were interviewed by one of two auditors. Forty two inmates acknowledged completion of PREA education. All acknowledged they received orientation and an offender handbook upon arriving at the facility. All inmate indicated they were advised about their right not to be sexually abused/sexually harassed, how to report sexual abuse/sexual harassment and their right not be punished for reporting sexual abuse/sexual harassment. There are PREA posters displayed throughout the facility. JPay system that inmates can access to order commissary items, to check on account balance and other day to day information includes a PREA training component for inmates' education including Emotional support and ways to access the PREA compliance Manager. The facility provided orientation and comprehensive education to 1187 inmates during the last 12 months. Inmate and staff confirmed that PREA training is provided during the initial intake at the facility and during the orientation phase which occurs within the first 14 days of arriving at the facility.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination
	National Institute of Correction (NIC): Investigating Sexual Abuse in a Confinement Setting
	Moss Group Specialized investigator training
	Investigator Training Certificates
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 states that prior to conducting a PREA investigation, all investigators shall receive specialized training which shall include, but not be limited to, conducting investigations in confinement settings, interviewing techniques for sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The training was received through the NIC and the Moss Group. A review of the training indicates that it covers definitions, conducting investigations in confinement, techniques for interviewing victims, Miranda and Garrity use, evidence collection in confinement and requirements for substantiating a case and referring for prosecution. A review of documentation indicated that three facility staff are documented with the NIC and Moss Group specialized investigator training. The interview with two facility investigators indicated they received the specialized training through the NIC training curriculum and attended a program sponsored by the Moss Group. The investigators indicated the training included interviewing techniques, remaining sensitive when speaking to the inmate. The auditor reviewed specialized training documentation to include the Investigator Training Instructor Guide and the course completion list for Investigating Sexual Abuse in a Confinement Setting training.
	Based on a review of the PAQ, 79-ISA-10, the NIC training curriculum, the Moss Group training curriculum, investigator training records as well as the interview with the two facility investigators, indicates the facility exceeds this standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MTC 903E.02
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination
	Prison Rape Elimination Act Specialized Medical and Mental Health Training
	Medical and Mental Health Staff Specialized Training Records
	Medical and Mental Health Training Staff or Contractor PREA Training
	Prison Rape Elimination Act Specialized Medical and Mental Health Training mandates specialized training for medical and mental health staff. The facility has full-time medical and mental health staff on site. All mental health and medical staff have received the required specialized training on how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment, victim identification, interviewing, reporting and clinical interventions. Medical and mental health care staff acknowledged, in writing, that they both received and understood the training, as it relates to the PREA. Interviews with medical and mental health staff confirmed awareness of their responsibilities regarding the PREA. Twenty Six medical and mental health staff have attended specialized training during the last 12 months. Medical staff interviewed were extremely knowledgeable of sexual abuse and sexual harassment and responses to reporting and identifying sexual abuse or sexual harassment. Compliance was determined by review training curriculum, interviews with medical administrator and mental health director.

115.41 Screening for risk of victimization and abusiveness Auditor Overall Determination: Meets Standard Auditor Discussion

POLICY AND DOCUMENT REVIEWED

MTC 903E.02

Risk Assessment Process/ Electronic Form

PREA Assessment Instrument

PREA Assessment 30 Day Review

PREA Assessment Process – 30 Days Review Screen

Inmate Assessment and Reassessment Documents

Inmate Reassessments Utilizing 14-2B Tool

The facility uses the agency Screening form and the Screening for Risk of Victimization and Abusiveness as the objective screening instruments. Staff interviews for conducting Screening for Risk of Victimization and Abusiveness indicated that the facility uses the agency form and the PREA Intake Objective Screening Instrument to document this process. The PREA Intake Objective Screening Instrument has all of the required criteria. The results of the assessment are documented on the Intake Screening Form whether the inmate is vulnerable or sexually aggressive. These screenings is initiated in the PREA risk assessment system by medical personnel during intake medical screenings conducted pursuant to ORCD policy 52-RCP-06. Unit management shall complete the remaining areas of the screening instrument within 72 hours of the inmate's arrival at the facility. Policy further states that inmates returning from out to court or another criminal justice entity shall be taken to inmate health services upon arrival at the institution. Medical staff shall initiate a 72 hour risk assessment and select the box signifying the risk assessment is being conducted for an inmate return from out to court or another criminal justice entity. The unit team will complete the screening instrument utilizing any additional information.

Agency policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmates' arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. This assessment is completed by the unit team. The agency has a data base that prompts the unit team and classification team that a inmate is nearing 30 days in order to complete the reassessment.

Interviews with 43 inmates provided that 41 indicated they received a screening upon arrival at the facility and 35 indicated they were reassessed within 30 days. A random sample a screening and rescreening of 20 inmate files utilizing the auditor's work sheet found 100 % compliance on the screening and rescreening of randomly selected inmates.

The agency implements appropriate controls on the dissemination within the facility of responses to questions asked under this standard to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates as descript above.

Compliance was determined by review of the screening instrument, review of inmate records with screening and rescreening instrument, review of company inmate data to manage screening instruments. Compliance was further determined by interviews with classification supervisor, PREA compliance manager, inmates and medical staff.

115.42 Use of screening information Auditor Overall Determination: Meets Standard

Auditor Discussion

MTC Policy 903E.02 Ensuring Safe Prisons (A1, B1, C1, F1

Pre-Audit Questionnaire

Ohio Department of Rehabilitation & Corrections 79-ISA-04 - PREA Risk Assessment and Accommodation Strategies

Ohio Department of Rehabilitation & Corrections 79-ISA-05 - Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) Policy

Sample of Housing Determination Documents (PREA Assessment)

14-9A Transgender/Intersex Assessment and Treatment Plan Form

Memorandum from the PREA Compliance Manager

Memorandum from the PREA Compliance Manager

Transgender/Intersex Inmate Biannual Reviews

LGBTI Inmate Housing Documents

Statement of Fact

The facility provided the auditor with the housing assignments for all inmates who were classified as high risk victims or high risk abusers. A review of the documentation determined that high risk victims were not placed in the same housing unit as high risk abusers. The interview with the PREA Compliance Institution Manager indicated that information is utilized to compile a list of high risk inmates and that list is sent out to the department heads and job supervisors to make sure that inmates at high risk of victimization and inmates at high risk of abusiveness are not housed together, not scheduled on a job assignment on the same shift, and to the extent possible, kept apart during any programming. The interview with the staff responsible for the risk screening indicated that the risk screening information is utilized to determine if the inmate is at risk of victimization or abusiveness and then that information is used to determine specific housing units.

Ohio Department of Rehabilitation & Corrections 79-ISA-04 – PREA Risk Assessment and Accommodation Strategies states that LGBTI inmates shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification unless placement in a dedicated facility, unit, or wing has been established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protection such inmates. A review of housing assignments for LGBTI inmates confirmed that they were not assigned to one housing unit based on their sexual preference or gender identity. The documentation showed that LGBTI inmates were placed in numerous housing units across the facility. The interviews with the PC and PCM confirmed that the agency does not have a consent decree.

Ohio Department of Rehabilitation & Corrections 79-ISA-05 – Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) Policy 79-ISA-05, states that transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. The interviews with the seven transgender inmates indicated that all have been afforded the opportunity to shower separately.

The facility's classification procedures provides that risk screening information is used to determine housing, bed, work, and education and program assignments, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Determinations for these assignments are made on a case-bycase basis. Staff members assigned to conduct intake screening have been provided additional training and resource materials to complete this task. NCCC conducts a classification committee meeting within 72 hours of the offender arrival at the facility. The committee is chaired by the Compliance Manager. The committees review all documents including the screening instrument to determine the appropriate program or job room assignment. ORCD decides whether to assign a transgender or intersex inmate to a facility for male or female inmates. ORCD has no dedicated facilities for transgender or intersex inmates. The facility determines other housing and programming assignments for transgender or intersex inmates on a case-by-case basis, to include whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems. Placement and programming assignments for each transgender or intersex inmate are reassessed at least once every six months. Policy states that a transgender or intersex inmate's own view with respect to his own safety should be given serious consideration when making these assignments. MTC policy mandates that transgender and intersex inmates are given the opportunity to shower, dress and use the toilet facilities separately from other inmates. The facility has seven transgender inmates assigned during the last 12 months. The interview with the Agency's PREA Coordinator confirmed that a transgender inmate's genital status is not the sole criteria for

placement in a specific facility. Interviews with staff and inmates, observations of housing assignments and unit activities, as
well as an examination of documentation/policy, confirm that the facility is in compliance with this standard.

Auditor Overall Determination: Meets Standard Auditor Discussion POLICY AND DOCUMENT REVIEWED: MTC 903E.02 - Sexual Safety in Prisons (PREA) - Pg. 1, 12

Housing Assignments of Inmates at High Risk of Victimization

Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

Observations in the Segregation Unit

Statement of Fact Statement of Fact

Memo re: Inmates Detained Solely for Immigration Purposes (N/A)

ODRC 79-ISA-02 meets the mandates of this standard. TPU (Transitional Program Unit) assignments shall only be until alternative means of separation from likely abusers can be arranged and shall not ordinarily exceed 30 calendar days. TPU houses both administrative (protective custody) and disciplinary cases. Policy states inmates at high risk for sexual victimization shall not be placed in involuntary status unless an assessment of all available alternatives has been made and there is no available means of separating the victim from the abuser. No inmates were placed in this status within the last year. In practice, victims would almost never be placed in involuntary protective custody. If necessary, placement would only be for a very short time for protection only and only to determine the facts of the incident. A review of use of the segregation unit during the last 12 months validated that no inmate was housed in segregation for a PREA investigation or allegation. Inmates placed in TPU for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If access is restricted, staff shall document opportunities that have been limited, duration of limitations and reasons for such limitations. The interview with the staff who supervise inmates in segregated housing indicated that any inmate who is at high risk of sexual victimization that is placed in involuntary segregated housing would be provided access to programs, privileges, education and work opportunities to the extent possible. The staff member confirmed that if the facility restricts any programs or privileges that the restrictions would be documented by Unit Management and investigator. There were no inmates in segregated housing for their risk of victimization and as such no interviews were completed. The Warden indicated if they have to do an emergency transport to ensure he/she does not remain in involuntary segregated housing, they can do that. The interview with the staff member who supervise inmates in segregated housing indicated that the inmate would only be involuntarily segregated until they could find alternative means of separation from likely abusers. The staff member stated that they have not ever placed an inmate at high risk of victimization in involuntary segregated housing and as such he was unable to provide an estimated time. There were no inmates in segregated housing for their risk of victimization and as such no interviews were completed. Compliance was determined through review of policy, segregation logs, and interviews with Warden and PREA compliance manager. ODRC 79-ISA-02, requires that every 30 calendar days, unit management shall afford each inmate a review to determine whether there is a continuing need for separation from general population. The interview with the staff member who supervise inmates in TPU confirmed that any inmates placed in involuntary segregated status would be reviewed at least every 30 days for their continued placement in involuntary segregation. Based on a review of the PAQ, ODRC 79-ISA-02, housing assignments for inmates at high risk of victimization, observations from the facility tour related to segregation areas as well as information from the interviews with the Warden and staff who supervise inmates in segregated housing indicates that this standard appears to be compliant.

115.51 Inmate reporting Auditor Overall Determination: Meets Standard **Auditor Discussion** POLICY AND DOCUMENT REVIEWED: MTC 903E.02 - Sexual Safety in Prisons (PREA) - Pg. 1, 12 A & 0 Booklet re: PREA Reporting Options Reporting- Family and Friends - Spanish PREA Restrictive Housing Poster Spanish-English

Ohio Department of Rehabilitation & Corrections 79-ISA-02

Offender Handbook (Appendix)

Office of Inspector General Information

Memo re: Inmates Detained Solely for Immigration Purposes (N/A)

ODRC Memorandum of Understanding Ohio Department of Youth Services

PREA Signage

MTC Website re: PREA Contact Representative Data

MOU - Marion County Counseling Center

Outside Agency MOU Ohio Department of Youth Services

Staff Handbook

Inmates are provided with information on how to report sexual abuse or harassment to facility staff as well as public and/or private agencies not affiliated with NCCC; and procedures for permitting third-party reports of sexual abuse/harassment on behalf of an inmate. Information is given during intake, orientation, and is made available through posters, handbooks, and pamphlets. Inmates may privately report sexual abuse, sexual harassment, retaliation by other inmates or staff, and staff neglect or violation of responsibilities that may have contributed to such incidents in several ways. Inmates may speak with any staff member, contact their family or friends, or utilize an Inmate Request to All staff will accept reports made verbally, in writing, anonymously, and from third parties. Staff will promptly document any verbal reports and will immediately report any such information to the shift supervisor. A review of supportive documentation and staff/inmate interviews indicated that there are multiple ways (verbally, in writing, anonymously, privately, and from a third party) for inmates to report sexual abuse/sexual harassment. The facility has procedures in place for staff to document all allegations. Throughout the facility, there are posters and other documents on display which also explain reporting methods. There are posters for telephone reporting to Marion County Counseling Center for reporting sexual abuse.

Staff members promptly accept and document all verbal, written, anonymous, private and third-party reports of alleged abuse/sexual harassment. NCCC provides to the inmates a third party line to the National Sexual Assault hotline for reporting any abuse or harassment and contact the Ohio Department of Youth Services for an outside of the agency contact phone number.

During the tour, it was observed that information pertaining to how to report PREA allegations was posted in all housing units on posters and the information was painted above the phones. The auditor tested the hotline and reached the DRC Hotline. The hotline was accessible in all housing units while the auditor was on-site. The auditor also tested the outside reporting mechanism while on-site. The phone line did not require a pin number but did require the inmate to leave a message.

Compliance of this standard was validated by review of the inmate handbook, posters throughout the facility, company policies on inmate reporting sexual abuse or sexual harassment and interviews with staff and inmates.

The inmate JPAY has reporting telephone numbers and access to making a PREA allegation. MTC maintains a Email for reporting allegations directly to the MTC PREA coordinators office.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MTC 903E.02 - Sexual Safety in Prisons (PREA) - Pg. 1, 12, 13
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination Statement of Fact
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 provides documentation and does not utilize the inmate grievance system for allegation of sexual abuse or sexual harassment.
	MTC 903E.02 clarifies that when the agency contract does not utilize the Offender grievance system MTC shall It states that should a report of sexual abuse or sexual harassment be submitted and received as an inmate/detainee grievance, whether inadvertently or due to contracting agency requirements, it will immediately be referred to the facility investigator or Administrative Duty Officer for investigation and reporting in accordance with this policy.
	Based on a review of ODRC and MTC policies indicating the provisions of this standard are not applicable and MTC would immediately notify the client and begin and investigations if a grievance was submitted the facility is in compliance with this standard.

115.53 Inmate access to outside confidential support services Auditor Overall Determination: Meets Standard

Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination

Inmate Handbook

Auditor Discussion

Inmate Handbook Appendix

Memorandum Related to Calls to the Marion County Counseling Center

Interview with Marion County Counseling Center

Memo to Inmates Prior to Hotline

Ohio Department of Rehabilitation & Corrections 79-ISA-0 mandates that facilities provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. The facility has established a memo with Marion County Counseling Center to provide counseling and emotional support services related to sexual abuse (confirmed through a telephone interview with a victim advocate from the agency). The facility enables reasonable communication between inmates and these organizations and agencies in as confidential a manner as possible.

The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by; giving inmates mailing addresses and phone numbers for local, state or national victim advocacy or rape crisis organizations; giving inmates mailing addresses and telephone numbers for immigration services agencies for person detained solely for civil immigration purpose; and enabling reasonable communication between inmates and these organizations in as confidential a manner as possible. ODRC 79-ISA-01, page 11 states that the institutional PCM and the victim support person shall compile mailing addresses and telephone numbers including toll-free hotline numbers of local, state or national victim advocacy or rape crisis organizations. In addition, the agency PREA Coordinator, with assistance from the OVS, shall maintain or attempt to enter into memoranda of understandings or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The inmate handbook states that victims shall be given access to victim advocates for emotional support, if needed, by providing them with mailing addresses and telephone numbers, including toll-free hotline numbers of local, state or national victim advocacy or rape crisis organizations. This information shall be provided to the unit staff for communication to the inmates. Telephone calls to outside support services shall be provided in as confidential a manner as possible. A review of the PREA poster confirmed that inmates are provided the mailing address to the Marion County Counseling Center. Inmates are advised that they can contact the Marion County Counseling Center via phone through unit staff. The memo related to calls to the Marion County Counseling Center stated that staff will dial the number, step out of the office and visually observe the inmate while they are on the phone through the window. Most of the inmates who were aware of the victim advocacy information advised they could contact them for free anytime the phones are available. Most inmates stated that the call would be confidential. Interviews with inmates who reported sexual abuse indicated that four of the seven were provided a mailing address and telephone numbers but that they did not contact them.

Inmates in Segregation or provided access to the Ohio Youth Services for private uncensored call for reporting and for emotional support. This information is included in an appendix to the inmate handbook. Interviews with staff and inmates, auditor observation of postings in the housing unit, interviews with the local victim advocates and an examination confirmed compliance with this standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MTC Website Indicating 3rd Party Reporting
	ODRC Website
	Family and Friends Posters
	PREA Posters
	The facility provides a method to receive third-party reports of sexual abuse and sexual harassment and publicly distributes that information on how to report sexual abuse and sexual harassment on behalf of an inmate. The PAQ indicated the method is through the phone or email. The PREA poster states that family and friends can report allegations of sexual abuse, sexual harassment and retaliation by calling 614-995-3584 or by emailing DRC.ReportSexualMisconduct@odrc.state.oh.us. The agency website has a link that can be clicked on in order to report sexual misconduct on behalf of an offender via email. The agency website and third party reporting information (including the PREA poster) is found at https://drc.ohio.gov/prea. Additionally, the facility website has information on third party reporting methods including through the phone number above, the email above, and MTC Website meet the requirements of this standard
	The inmates interviewed indicated they were aware of third-party reporting. Compliance was determined by review of policy, posters, MTC website and ODRC websites and interviews with staff and inmates

115.61 Staff and agency reporting duties Auditor Overall Determination: Meets Standard

POLICY AND DOCUMENT REVIEWED:

Auditor Discussion

MTC 903E.02 - Sexual Safety in Prisons (PREA) - Pg. 1, 14

Ohio Department of Rehabilitation & Corrections 79-ISA-04 – PREA Risk Assessment and Accommodation Strategies

Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation

Sexual Assault Investigation Packet

Ohio Department of Rehabilitation & Corrections 79-ISA-02 meets the mandates of this standard. Staff, contractors and volunteers must report and respond to allegations of sexually abusive behavior, regardless of the source of the report. Interviewed staff members were aware of their duty to immediately report all allegations of sexual abuse, sexual harassment and retaliation relevant to the PREA standards. The reporting is ordinarily made to the Shift Supervisor but could be made privately or to a third party. Policy requires the information concerning the identity of the alleged inmate victim and the specific facts of the case be shared with staff on a need-to-know basis, because of their involvement with the victim's welfare and/or the investigation of the incident. The facility does not house inmates under the age of 18. ODRC states that unless otherwise precluded by federal, state, or local law, medical and mental health professionals shall be required to report sexual abuse pursuant to this section and to inform inmates of practitioner's duty to report and the limitations of confidentiality. Interviews with medical and mental health care staff confirm that they disclose limitations of confidentiality and their duty to report to inmates at the initiation of services. All four staff stated they are required to report any knowledge, suspicion or information regarding an allegation of sexual abuse and/or sexual harassment Medical and Mental Health staff interviews confirmed that unless otherwise precluded by Federal, State, or local law, medical and mental health practitioner's shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

ODRC policy 79-ISA-04, states that the only exception where the Informed Consent is not necessary is if the alleged victim is under the age of eighteen or is considered a vulnerable adult as defined by this policy, the institution shall report the allegation on an incident report and send it to the institutional investigator who will then report the allegation to the OSHP. The interview with the PCM indicated that each State has its own law and reporting requirements. In most of the facilities a notification to law enforcement and a partner agency triggers the notification to any other agency as required. The Warden stated that they would treat the allegation like all the others and would immediately notify the Ohio State Highway Patrol. A review of established policy and interviews with staff members support the finding that the facility is in compliance with this standard. All staff interviewed indicated they would report all allegations of sexual abuse or sexual assault to the shift supervisor, PRM or Warden. The warden was interviewed and stated that the facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the ODRC, Ohio State Patrol and MTC cooperate office

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MTC 903E.02 -Sexual Safety in Prisons (PREA) - Pg. 1, 14
	Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation
	Statement of Fact
	MTC and ODRC policies and operational plans mandates that offenders will immediately be protected from imminent danger. ODRC 79-ISA-01, states that all reports of substantial risk of imminent sexual abuse shall immediately be forwarded to the institutional investigator, institution PCM, UMC and shift supervisor. Upon receipt of a report, security staff shall take immediate action to employ protective measures to ensure the inmate's safety. When considering the protection of staff or inmates, staff shall consider housing changes, transfer of inmate victims or abusers and removal of alleged staff or inmate abusers from contact with the victim. The PAQ stated that there have been zero inmates who were subject to substantial risk of imminent sexual abuse within the previous twelve months. Interviewed staff members were aware of their duties and responsibilities when they become aware or suspect an inmate is being or has been sexually abused or sexually harassed. All staff indicated they would act immediately to protect the victim, to include separating the victim/predator, securing the
	scene to protect possible evidence, preventing the destruction of potential evidence and contacting the shift supervisor and medical staff. Staff carry PREA information cards which includes what to do if staff members determine that an inmate in responding to inmate protection if he was subject to a substantial risk of imminent sexual abuse. In the past 12 months there was no instance in which agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse. Compliance was determined by review of the facility operating policies and procedures along with secondary documentation submitted with the pre-audit questionnaire; review of data and documentation provided by the facility staff; and interviewed inmates and staff during an onsite visit and tour of the facility.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MTC 903E.02 - Sexual Safety in Prisons (PREA) - Pg. 1, 14
	Screening Instrument
	PAQ
	Statement of Fact
	MTC Policy 903E.02 Ensuring Safe Prisons meet the requirements of this standard. Policy requires that any inmate allegation of sexual abuse that occurred while confined at another facility be reported to the head of the facility where the alleged abuse occurred within 72 hours of receipt of the allegation. There were eight (8) allegation that were received during the intake screening or during their incarceration at NCCC that they had been sexual assaulted at another facility. The Warden made notification to the sending facility, ODRC and MTC within 72 hours. The Policy also requires that an investigation be initiated unless the investigation has been completed prior to arriving at the facility. This information is maintained on the agency reporting system. The alleged victims were seen by medical and mental health staff. There were two allegations made by receiving institutions within the last 12 months. The Policy also requires that an investigation be initiated. Compliance was determined through review of the allegation notification emails and investigation, agency and company policy and interviews with IPCM and Warden.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC 903E.02 -Sexual Safety in Prisons (PREA) - Pg. 1, 14
	Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation
	Lesson Plan - PREA - Sexual Assault, Abuse Recognition & Prevention
	Statement of Fact
	Response Plan Cards
	MTC Policy 903E.02) and Ohio Department of Rehabilitation & Corrections 79-ISA-02 establishes mandates for staff, volunteer and contractor's role for inmate allegation of sexual abuse. Policy and several documents (such as the PREA card provided to all staff-interviewed on how to respond to allegations of sexual assaults) provide initial guidance to employees regarding the expected coordinated actions to take place in response to an incident of sexual abuse/sexual harassment. The policies and information provide direction to security staff, medical/mental health practitioners, investigators, staff and community victim advocates, the forensic examination service providers (SANE) and facility leadership. Upon learning of an allegation of sexual assault first responders will immediately notify the nearest correctional staff member. The facility will separate the victim and abuser; preserves and protects the crime scene; and if the incident occurred within the appropriate period for the collection of physical evidence, they would request that the alleged victim not take actions that could destroy physical evidence, to include washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. First Responder correctional staff should attempt to make notifications to shift supervisor or appropriate staff with as much confidentiality as possible. During the last 12 months there were 7 allegations of sexual abuse. One of the allegations was made to a non-correctional officers. An examination of policy/documentation, interview with all staff interviewed by auditor including education instructors, support staff and volunteer confirms compliance with this standard.

115.65	Coordinated response
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02 Ensuring Safe Prisons (A1, A2) Safe Prisons PREA Plan
	NCCC 79-ISA-01-01 Inmate Sexual Abuse Coordinated Response
	NCCC 79-ISA-01-01 Inmate Sexual Abuse Coordinated Response address the mandates of this standard. The policy specifies the guidelines and procedures that prevent sexual abuse/sexual assault and provide for prompt and effective intervention, in the event a case of abuse or assault occurs. Correctional staff carry a card that provides guideline for first responder or coordinated responses to sexual abuse.
	The coordinated response plan includes initial responses including reporting; Medical Responses; Mental Health Responses; Investigative Responses; and Facility Leadership Responses. For each of the above area there are components that include notification, SANE examinations, Victim Advocacy Services and Emotional Support Services.
	The auditor reviewed the facility operating policies, observed facility practices, reviewed data and documentation provided by the facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The facility provided the auditor with documentation confirming compliance with the standard. Exceed compliance was determined through the review of policy, interviews with the non-correctional staff, correctional staff, medical staff, victim advocate; mental health and conversations with classification manager, PCM and Warden

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MTC 903E.02 -Sexual Safety in Prisons (PREA)
	MTC 903E.02 – mandates that any collective bargaining agreement or other agreement must comply with PREA standards dated August 20, 2012. The facility has no collective bargaining agreements. The Warden and Human Resource Manager were interviewed and verified that NCCC does not have a collective bargaining agreement. There were no incidents requiring protection for inmates from staff during the last 12 months. Compliance was confirmed through review of the policy and interviews with administrative staff.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MTC Policy 903E.02 Ensuring Safe Prisons

Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation

Investigative Reports

Victim Inmate Protection Follow-Up

Retaliation Form for Offender

NCCC prohibits retaliatory behavior by inmates or staff in regard to the reporting of sexual abuse, sexual harassment or cooperation with investigators as it relates PREA related incidents and allegations. Inmate's rights documentation and staff policy establish expected conduct. The facility PREA Compliance Manager is responsible for monitoring retaliation along with supervisors to monitor inmates as it relates to PREA allegations and incidents. The facility has several protections and reporting measures, for inmates. The process is overseen by the facility PREA Compliance Manager who works in concert with the facility administrators and investigators to ensure privacy and policy compliance. The facility has the option to change inmate housing or transfer 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.

ODRC policy 79-ISA-02, states that the institution shall 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 the victims and emotional support services for inmates or staff who fear retaliation for reporting sexual misconduct or for cooperating with investigations. A review of investigative reports and monitoring documents indicated that there have been no allegations of retaliation nor any reported fear of retaliation.

ODRC policy 79-ISA-02, further states that the institution shall 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 the victims and emotional support services for inmates or staff who fear retaliation for reporting sexual misconduct or for cooperating with investigations. A review of investigative reports and monitoring documents indicated that there have been no allegations of retaliation nor any reported fear of retaliation. The interview with the staff designated for monitoring for retaliation stated that he completes all the monitoring for retaliation at the facility. He stated he meets with the individual every 30 days for up to 90 days. He indicated he checks the inmate's housing assignments, conduct reports (disciplinary reports), job changes and programming changes. The staff member further stated that he meets with the inmate face-to-face for status checks. He also stated that if the individual were a staff member, he and the warden would review whether the staff had a shift change or an assignment post change to determine if there is any retaliation occurring. There were three inmates that were monitored during the last 12 months.

Two inmates stated that the protocols the facility has in place makes them feel protected and another stated he feel protected from retaliation related to reporting PREA, but not other types of retaliation at the facility. The inmates who stated they did not feel protected indicated that they have problems with staff and inmates at the facility and that they are not treated appropriately by facility staff in general. A review of documentation indicated there was no reported retaliation by these inmates nor any evidence to support any retaliation has occurred.

Monitoring is managed by an ODRC data base that provides forms to be completed by the monitor and to document any changes in the inmates' daily programs. An inmate that was monitored indicated he was seen weekly by the monitored.

Compliance was determined by review of the policy, retaliation monitoring instrument and interviews with the Retaliation monitor, inmates, and warden.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MTC 903E.02 -Sexual Safety in Prisons (PREA)
	Ohio Department of Rehabilitation & Corrections 79-ISA-04 – PREA Risk Assessment and Accommodation Strategies
	ODRC Policy 79-ISA-04 – PREA Risk Assessment and Accommodation Strategies and MTC 903E.02 -Sexual Safety in Prisons (PREA) governs the use of segregation for protection of inmates that have made allegation of sexual abuse. Inmates at high risk for sexual victimization shall not be placed in protective safekeeping unless an assessment of all available alternatives has been made and it is determined there is no available alternative means of separation from likely abusers. If the assessment cannot be completed immediately, the unit may hold the inmate in involuntary segregated housing while completing the assessment, for no longer than 24 hours. Additionally, to the extent possible, access to programs, privileges, education and work opportunities are not limited to inmates placed in the protective custody. The facility would document the reasons for restricting access to programs and the length of time the restriction would last. In the past 12 months there were no inmates held in involuntary segregated housing awaiting completion of assessment and none held in involuntary segregated housing for longer than 30 days while awaiting alternative placement. Interviews with staff and review of policy and procedures confirmed compliance with this standard. Compliance with this standard was determined by a review of policy and documentation, as well as staff interviews including shift supervisor, PCM and Warden.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

MTC Policy 903E.02 Ensuring Safe Prisons

Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation

Memorandum of Understanding with the Ohio State Highway Patrol

Investigator Training Records

Investigative Reports

ODCR 79-ISA-02, indicates that when the institution conducts its own investigation into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations including third-party and anonymous reports. A review of the seven administrative investigations confirmed that all were completed within 30 days. One investigation included an interview with the victim, alleged perpetrator and when applicable, witnesses. The facility investigator provided appropriate information related to all investigative actions. All investigations reviewed were based on evidence and did not include any opinion. As such, all investigations reviewed were timely, thorough and objective. The interview with the facility investigator confirmed an investigation would be initiated immediately following an allegation of sexual abuse. She confirmed that all allegations would be investigated by policy, including those that were reported anonymously and through a third party. Prior to conducting a PREA investigation, all investigators shall receive specialized training which shall include, but not be limited to, conducting investigations in confinement settings, interviewing techniques for sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The training ay be received through the NIC and The Moss Group. Completion of the training shall be documented with a certificate of completion. A review of the training indicates that it covers definitions, conducting investigations in confinement, techniques for interviewing victims, Miranda and Garrity use, evidence collection in confinement and requirements for substantiating a case and referring for prosecution. The PAQ indicated there are three facility staff that conduct investigations and that all three have received specialized training.

ODRC Policy 79-ISA-02, states that when the evidence appears to support criminal prosecution, the ODRC shall conduct compelled interviews only after consulting with OSHP as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. A review of investigative reports indicated that none of the administrative investigations involved compelled interviews. The interview with the facility investigator indicated that they would not conduct compelled interviews. When the evidence appears to support criminal prosecution, the facility will notify the OSHP to conduct the investigation.

In those cases the facility will assist in gathering evidence, scheduling interviews and other duties as requested by the OSHP. Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. The PAQ indicated that there were 7 allegations referred for prosecution since the last PREA audit. There were no allegation referred for prosecution in the last 12 months. A review of documentation indicated that all investigation were referred to the OSHP to investigate, however in all instances they declined. As such there were zero allegations referred for prosecution. The interview with the facility investigators confirmed that all cases are referred to the OSHP and that the OSHP would be responsible for referring any cases for prosecution.

ODCR 79-ISA-02, states that administrative investigations shall include an effort to determine whether staff actions or failure to act contributed to the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reason behind the credibility assessments and investigative facts and findings. The interview with the facility investigators confirmed that administrative investigations would be documented in written reports and include an overview of the incident, information on the interviews conducted, the medical assessment, any consistencies or inconsistencies, a description of evidence and the outcome. They would determine during the investigation whether staff followed policy and procedure and if they did not they would be referred for discipline.

The departure of the alleged abuser or victim from the employment or control of the institution or ODRC shall not provide a basis for terminating an investigation. The facility investigator confirmed that an investigation would still continue regardless of the departure of the alleged staff member or inmate. If the staff terminated employment prior to interviews, the institution would request the OSHP conduct the investigations or assist in interviewing the staff. If the inmate transferred the facility would request interviews from invetigators at the receiving facility unless the investigation is be conducted by OSHP.

MTC policy mandates 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.

Ohio Administrative Code, Rule 5120-9-24, states that incidents that may involve the commission of a criminal offense shall be reported to the Ohio State Highway Patrol for their review. All allegations of sexual misconduct shall be referred for investigation to the Ohio State Highway Patrol unless the allegation does not involve potentially criminal behavior. The MOU with the Ohio State Highway Patrol confirms that the OSHP is required to follow all requirements under standards 115.21, 115.34 and 115.71. The interview with the Warden indicated that the facility has a close relationship with the Ohio State Highway Patrol and that they provide them information and access to the facility and in turn the OSHP provides them updates any time they ask. The interview with the PCM indicated she has a great relationship with outside law enforcement and that the OSHP would communicate with him verbally or in writing. The facility investigator stated she would provide them any information they needed and serve as their liaison.

Compliance was determined by review of policies, investigations, and interviews with two investigators, PREA compliance Manager and Warden.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02
	Ohio Department of Rehabilitation & Corrections 79-ISA-02
	MTC Policy 903E.02 and Ohio Department of Rehabilitation & Corrections 79-ISA-02 mandates In accordance with PREA standards, during the course of investigations, the facility shall impose no standard higher than a preponderance of the evidence when determining whether allegations of sexual abuse or harassment are substantiated.
	Investigator training programs provide in-depth clarification of this standard. When interviewed, the investigators were aware of the evidence standard. Compliance was determined by review of policy, investigator training curriculum, interview with investigators and PCM.

115.73 Reporting to inmates Auditor Overall Determination: Meets Standard **Auditor Discussion** POLICY AND DOCUMENT REVIEWED: MTC Policy 903E.02 Ohio Department of Rehabilitation & Corrections 79-ISA-02 Documented notification ODRC and MTC requires that any inmate who makes an allegation that he suffered sexual abuse at a MTC or ODRC facility be informed, in writing, whether the allegation has been determined to be unsubstantiated, substantiated or unfounded at the conclusion of the investigation. When an allegation involves staff, the inmate would be informed if the staff member is no longer posted within their housing unit, is no longer employed at the facility, if the staff member was indicted on a charge related to sexual abuse within the facility or the Agency learned that the staff member was convicted on a charge related to sexual abuse. These findings would also be communicated to the inmate if the investigation was completed by an outside agency (OSHP). When an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency will inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. When the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, the agency request the relevant information from the investigative agency in order to inform the inmate. When an inmate's allegation that he or she has been sexually abused by another inmate, the agency subsequently informs the alleged victim whenever the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility. When an inmate's allegation that he or she has been sexually abused by another inmate, the agency subsequently informs the alleged victim whenever the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. When the allegation involves staff, the inmate would be informed if the staff member is no longer posted within their housing unit, is no longer employed at the facility, if the staff member was indicted on a charge related to sexual abuse within the facility or the Agency learned that the staff member was convicted on a charge related to sexual abuse. Based on the PAQ and review of investigative files during this auditing period, there were five (5) administrative investigations of alleged sexual

abuse or sexual harassment that notification were made to the inmates Compliance with this standard was determined by a

review of policy, staff interviews and inmates and copy of inmate's notifications forms.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02
	Ohio Department of Rehabilitation & Corrections 79-ISA-01
	Ohio Department of Rehabilitation & Corrections 31-SEM-02 – Standards of Employee Conduct
	PAQ
	MTC Policy 903E.02 - Disciplinary Sanctions for Staff and Ohio Department of Rehabilitation & Corrections 79-ISA-01 mandates staff members are subject to disciplinary sanctions for violating Agency sexual abuse or sexual harassment policies. Discipline would be 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. Policy also indicates that termination is the presumptive disciplinary sanction for staff that has been found to have engaged in sexual abuse. All terminations for violations of agency inmate sexual abuse or harassment policies or resignations by staff that would have been terminated before their resignation, will be reported to law enforcement agencies, unless the activity was not criminal, and to any relevant licensing bodies. MTC Offender Data System (ODS) Generated Automated Email from ODS notifying the facility HR Manager that a determination has been made on a PREA investigation and the specific action which is required. Based on the PAQ and investigative files there have been no substantiated cases of staff engaging in sexual abuse or sexual harassment in the last twelve months. Staff member resigned prior to the investigation.
	Compliance with this standard was determined by a review of policy and investigator, warden and human resources staff interviews.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02
	Ohio Department of Rehabilitation & Corrections 71-SOC-01 – Recruitment, Training and Supervision of Volunteer
	Ohio Department of Rehabilitation & Corrections 79-ISA-01 – Prison Rape Elimination
	Standards of Conduct for Contractors, Volunteers and Interns
	MTC Policy 903E.02 - Corrective Action for Contractors and Volunteers address the mandates of this standard. Any contractor or volunteer who engages in sexual abuse/sexual harassment would be prohibited from contact with inmates and would be reported to the appropriate investigator and law enforcement or relevant professional/licensing/certifying bodies unless the activity was clearly not criminal in nature. The Standards of Conduct for Contractors, Volunteers and Interns states that engaging in unauthorized personal relationships with inmates or their families, including correspondence or phone communication with inmates and their families is prohibited. In cases that were not criminal in nature, the facility would take appropriate remedial measures and consider whether to prohibit further contact with inmates. During the previous year, there were no incidents where a contractor or volunteer was accused of, suspected or found guilty of sexual abuse or sexual harassment at the NCCC. The Warden indicated that any violation of the sexual abuse and sexual harassment policies would result in in information being provided to the Ohio State Highway Patrol for investigation. He stated they would restrict the contractor or volunteers' access to the facility until the investigation was completed. The Warden confirmed that there have not been any contractors or volunteers who violated the sexual abuse or sexual harassment policies over the audit period. Compliance with this standard was determined by a review of policy, volunteer/contractor training files, contractor and Warden interviews.

115.78 Disciplinary sanctions for inmates Auditor Overall Determination: Meets Standard Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MTC Policy 903E.02

Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation

Ohio Department of Rehabilitation & Corrections 56-DSC-01 - Conduct Report and Hearing Officer Procedures

Ohio Administrative Code Rule 5120-9-08 - Disciplinary Procedures for Violations of Inmate Rules of Conduct

Investigative Reports

Disciplinary Documents

Pre-Audit Questionnaire

MTC Policy 903E.02 - Disciplinary Sanctions for Inmates and the Offender Handbook address the mandates of this standard. Information on inmate disciplinary sanctions is provided as part of the orientation process upon entry into the facility. Inmates interviewed indicated a good understanding of their freedom to make allegations without consequences for making good faith allegations. ODRC 79-ISA-02, states that any inmate found guilty by the Rules Infraction Board (RIB) of sexual abuse shall be considered for disciplinary control and any or all of the following administrative actions: referral for placement into ERH (Extended Restrictive Housing); special security review for an increase in one security level; institutional separation on the aggressor and the victim; payment of reasonable restitution to the ODRC. 56-DSC-01, states that it is the policy of the Ohio Department of Rehabilitation and Correction that the disciplinary process for incarcerated individuals will be carried out promptly and fairly, allow those directly affected by an incarcerated individual rule infraction to provide input into the disciplinary process, to not punish incarcerated individuals for being seriously mentally ill, and to abide by the Administrative Rules. Ohio Administrative Code Rule 5120-9-08, number 11 outlines non-consensual sexual conduct with another. The Inmate Discipline Program defines sexual assault of any person, involving non-consensual touching by force or threat of force, as the greatest severity level prohibited act. The program identifies inmates engaging in sexual acts and making sexual proposals or threats to another as a high severity level prohibited act.

Consensual sex or sexual harassment of any nature is prohibited and will result in discipline. Consensual sex between inmates does not constitute sexual abuse. Sanctions are commensurate with the nature and circumstances of the abuse committed, along with the inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories.

Inmates are subject to disciplinary sanctions pursuant to the formal disciplinary process defined in the Inmate Discipline Program. The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to the inmate's behavior when determining what type of sanction, if any, should be imposed. Prior to disciplinary hearing mental health staff access the above information. The facility considers the offer of therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. The institution does not discipline inmates who make an allegation in good faith, even if an investigation does not establish evidence sufficient to substantiate the allegation. There was one disciplinary action regarding PREA violations. The investigative file and disciplinary report was reviewed and found to be incompliance with the standard. Compliance with this standard was determined by a review of policy/documentation and the inmate discipline process, as well as staff and inmate interviews.

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MTC Policy 903E.02

Ohio Department of Rehabilitation & Corrections 79-ISA-04 - PREA Risk Assessment and Accommodation Strategies

Medical/Mental Health Documents

MTC Policy 903E.02 -Medical and Mental Health Screenings; History of Sexual Abuse and ODRC policy 79-ISA-04, mandates that if the assessment indicates the inmate is at risk of has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall offer a follow-up meeting with a medical or mental health practitioner within fourteen calendar days of the intake screening. Additionally, inmates who have previously perpetrated sexual abuse, as indicated during the screening, were offered a follow-up meeting with a mental health practitioner. Treatment services are offered without financial cost to the inmate. This was confirmed by observation and a review of intake screening documents. Screening for prior sexual victimization in any setting is conducted by PREA compliance team staff during in-processing procedures. In-processing procedures also screen for previous sexually assaultive behavior in an institutional setting or in the community. During the intake process a medical provider separately interview the incoming inmate. During this process follow-up meetings with inmate that have history of sexual abuse or are identified as a sexual predator or scheduled. When requested staff members ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. Information related to sexual victimization or abusiveness is limited to medical and mental health practitioners and other staff with a need-to-know for treatment plans, security, housing, work, program assignments and management decisions. Signed and dated informed consents are obtained from inmates before reporting prior sexual victimization which did not occur in an institutional setting. Screening referrals are documented in the ODRC data base. Mental health encounters are documented in the offender's medical/mental files.

The interview with the staff responsible for the risk screening confirmed that inmates who disclose prior sexual victimization during the risk screening are offered a follow-up with mental health within fourteen days. Interviews with three inmates who disclosed prior victimization during the risk screening confirmed that all three were offered a follow-up with mental health. One inmate declined the services and two inmates stated they accepted and saw mental health within a week.

Two inmate that had a history of predator behavior were offered a follow-up with mental health staff by declined these services

The institution does not house inmates under the age of 18. All screenings are recorded in the Medical and Mental Health inmate records. All information is handled confidentially and interviews with intake screening staff support a finding that the facility is in compliance with this standard. Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners. The auditor interviewed medical and mental health staff. Compliance was confirmed by a review of policies and intake screening documents, as well as interviews with three inmates who self-identified

as having experienced prior victimization during intake and four inmates who identifies as transgender requested a follow-up with the Mental Health Staff. Three transgenders declined the services, however has since been seen by the mental health staff as part of the six month reviews. Compliance was determined by review of the screening instrument, interviews with inmates, medical and mental health staff.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MTC Policy 903E.02
	Medical and Mental Health Documents
	Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation
	Ohio Department of Rehabilitation & Corrections B-11 – Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse
	ODRC Policy 67-MNH-9 Suicide Prevention
	Sexual Abuse Investigation Checklist
	Ohio Department of Rehabilitation & Corrections B-11 – Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse address the requirements of this standard. The facility medical and mental health personnel provide emergency medical services to inmates. Medical personnel are on duty 24 hours a day, seven days. Mental health providers are on-site 12 to 16 hours days 5 day a week and are also available for call-back during off duty hours. Medical and Mental health staff are available for tele-medical and mental health 24 hours a day.
	ODRC Policy 79-ISA-02 states that the services shall be provided to the alleged victim regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident. All inmates who report sexual conduct and/or recent sexual abuse shall be escorted to inmate health services as soon as possible after the reported conduct or recent sexual abuse. If evidentiary or medically appropriate, the patient will be transported to the Emergency Department at San Marcos Medical Center for examination, treatment, and counseling. The interview with the security first responder indicated that that he would separate the two individuals, secure the crime scene, notify his supervisor, notify medical and mental health and complete a report. Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02
	Ohio Department of Rehabilitation & Corrections 79-ISA-02 – Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation
	Ohio Department of Rehabilitation & Corrections B-11 – Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse
	Ohio Department of Rehabilitation & Corrections B-11 – Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse and ODRC 79-ISA-02, mandates that the services shall be provided to the alleged victim regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident. Interviews with inmates who reported claimed sexual abuse indicated that all inmates were seen by the medical and mental health staff immediately after notification of allegation of sexual abuse, including inmates that made allegations upon arrival at the facility.
	The facility will provide sexually abused victims with medical and mental health services consistent with the community level of care. Inmate victims of sexual abuse, while incarcerated, will be offered tests for sexually transmitted infections, as medically appropriate. All 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. Any offender who is less than 18 years of ages who reports previous sexual assault/abuse to health care staff regardless of where the incident occurred must be reported to Office of Children and Services. Patient consent is not required.
	The facility mental health staff would provide staff to attempt to conduct a mental health evaluation of all known inmate on- inmate abusers within 30 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. Health services include medical and mental health aftercare plans to be developed no later than 30 days prior to the anticipated date of release for inmates subjected to sexual abuse. The facility and ODRC provide follow up community placement or referrals for inmates released from NCCC would assist in the arrangement of referrals for continued

care following their transfer to or placement in other facilities or after their release from custody, if needed. Victims would also

receive timely and comprehensive information about and timely access to all necessary medical services.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02 Ensuring Safe Prisons
	Sexual Abuse Incident Reviews
	Ohio Department of Rehabilitation & Corrections 79-ISA-03 – Sexual Abuse Review Team
	SART
	Pre-Audit Questionnaire
	Ohio Department of Rehabilitation & Corrections 79-ISA-03 address the mandates of this standard. The policy requires the following:
	(a) Within 30 days of the conclusion of the investigation, unless the allegation was determined to be unfounded, a review team, designated by the Chief Administrative Officer, shall review the case and:
	(b) Determine what may have been the motivation for the incident or allegation such as, but not be limited to, race, ethnicity, gender, gender identity, sexual orientation, transgenderism, intersex identification, gang affiliation, etc.
	(c) Determine if there is a need for changes to policy or procedure; or if factors such as physical barriers or staffing may have enabled the abuse.
	(d) Assess whether monitoring technology should be deployed to supplement staff supervision.
	(e) The review team shall prepare and submit to the Chief Administrative Officer and facility PREA Compliance Manager a written report of their findings and any recommendations for improvement.
	(f) Documentation for any recommendation not implemented shall be maintained.
	The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months, there has been one three (3) administrative investigations of alleged sexual abuse completed at the facility. The facility prepared a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to a through f and any recommendations for improvement, and submits such report to the facility head, MTC cooperate office, ODRC work with the facility to implement any findings that require additional funding or operational issues at the facility. and PREA Compliance Manager. Interviews with the Warden, PREA manager and Incident Review team determined that Incident review was conducted. A review of the Incident Review team documentation of an alleged sexual abuse, policy and interviews with the Warden, MTC PREA coordinator NCCC PREA compliance manager confirmed compliance with this standard.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	Pre-Audit Questionnaire
	PREA Incident Packet Instructions
	MTC) Policy 903E.02 Ensuring Safe Prisons
	ODRC Annual Report Annual Report Signed 2020; 2019; and revised 2018
	MTC Annual Report 2019; 2020
	A review of documentation supports the finding that the ODRC has collected accurate, uniform data for every allegation of sexual abuse at facilities under its direct control (including contract facilities), using a standardized instrument and set of definitions. The incident-based data collected includes information required to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The agency data has been aggregated at least annually for the last two years. Upon request, the agency would provide all such data from the previous calendar year to the Department of Justice no later than June 30. The facility provides the required data for the preparation of the report. A review of documentation and staff interviews confirmed compliance to this standard. The data collected includes the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence, conducted by the Department of Justice. The Agency aggregates and reviews all data annually. Upon request, the Agency would provide all such data from the previous calendar year to the Department of Justice no later than June 30 of each year. Compliance with this standard was also determined by a review of policy/documentation ODEC website and MTC website and interviews with the Warden, NCCC PCM and MTC PREA coordinator.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	Pre-Audit Questionnaire
	PREA Incident Packet Instructions
	MTC Policy 903E.02
	ODRC Annual Report Annual Report Signed 2020; 2019; and revised 2018
	MTC Annual Report 2018; 2019; 2020
	ODRC Website
	MTC Website
	MTC Policy 903E.02 Ensuring Safe Prisons Data Review for Corrective Action address the mandates of this standard. The agency and facility review and assess all sexual abuse/sexual harassment data at least annually to improve the effectiveness of its sexual abuse prevention, detection and response policies, to identify any trends, issues or problematic areas and to take corrective action if needed. The PREA Compliance Manager forwards data to the agency PREA Coordinator and to the ODRC PREA coordinator. NCCC sends a monthly report of allegations of sexual abuse to MTC and ODRC.
	The interview with the Agency Head Designee confirmed that the report is done annually and that he approves the report. A review of the website: https://wwwmtctrains.com/prea confirmed that the current annual report is available to the public online.
	MTC Policy 903E.02 indicated when the agency redacts material from an annual report for publication the redactions are limited to specific material where publication would present a clear and specific threat to the safety and security of a facility and must indicate the nature of material redacted.
	A review of reports for 2020 included all allegations of sexual abuse or sexual harassment and the findings of each allegation. The report did not contain any redacted information. The interview with the PCM confirmed that the reports do not contain the identify or personal and medical information belonging to inmates or staff Compliance with this standard was determined by a review of policy/documentation and staff interviews.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MTC Policy 903E.02 Sexual Safety in Prison (PREA)
	Ohio Department of Rehabilitation & Corrections 79-ISA-01
	Agency Website
	MTC Retention
	MTC Policy 903E.02 Sexual Safety in Prison - Data Storage, Publication, and Destruction addresses the requirements of this standard. The data is retained in a secure filing system. The final report does not contain any personal identifiers and policy requires that the statistical data be retained for a period of no less than 10 years, unless federal, state or local law requires otherwise. The agency makes the information available on the MTC website. The reports cover all data required in the elements of this standard. Staff interviews and a review of documentation confirmed compliance with this standard. The required reports cover all data required in this standard and are is retained in a file. Compliance with this standard was determined by a review of policy/documentation and interviews with PCM and Warden.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The previous PREA audit for NCCC under the MTC management was in July, 2018. The facility was also audited in September 205. The auditor was allowed access to all areas of the facility and had access to all required supporting documentation. The auditors wee able to conduct private interviews with both inmates and staff. All Ohio facilities have received at least one PREA audit since August 20, 2012. At least one third of all facilities were audited during the one-year period after August 20, 2012. The auditor was provided supporting documentation before and during the audit. Notifications of the audit (posted throughout the facility) allowed inmates to send confidential letters to the auditor prior to the audit. No pieces of correspondences from an inmates or staff were received by the auditor. The facility has planned for the audit on several occasions. including posting of the audit. However die to the pandemic previous audits were postponed by order of the Governor. The final notice was posted on September 9, 2021.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
policies, practices and procedures outlined in the PREA standards. The auditor reviewed applicable standards at the review of supporting documentation, interviews with staff and inmates and the observation of physical evider concluded that this facility fully meets and substantially complies in all material ways with the PREA standards for relevant review period. The agency and facility's leadership are fully committed to eliminating sexual abuse/sexu harassment, as evidenced in the realistic staffing analysis and the recommendations for enhanced supervision to Substantiated allegations of abuse are processed in accordance with the standards, to include incident reviews,	The facility audits or publicly available on mtctrains.com and PREA (ohio.gov) The institution has fully implemented all policies, practices and procedures outlined in the PREA standards. The auditor reviewed applicable standards and, through the review of supporting documentation, interviews with staff and inmates and the observation of physical evidence, concluded that this facility fully meets and substantially complies in all material ways with the PREA standards for the relevant review period. The agency and facility's leadership are fully committed to eliminating sexual abuse/sexual harassment, as evidenced in the realistic staffing analysis and the recommendations for enhanced supervision techniques. Substantiated allegations of abuse are processed in accordance with the standards, to include incident reviews, disciplinary actions, if required, and outcome notifications.
	PREA training for staff and inmates is documented and all stakeholders receive the appropriate level of training and are knowledgeable of the intent of the PREA and the tools available to ensure prevention, detection, reporting and response to sexual abuse incidents. Sexual abuse and victimization propensity screening is well established and tracked in an organized fashion. Referrals for mental health counseling are integrated in the intake and allegations of sexual abuse processes. Medical networks for the residents are established in the community. The public has access to reporting mechanisms and PREA trends data via the website. North Central Correctional Complex currently meet all applicable PREA standards.

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

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into 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-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the 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)?	na

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

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

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	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 who has been civilly or administratively adjudicated to have engaged in the activity described in 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.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	21 (e) Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

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

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

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

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	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 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	

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	<u> </u>
	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 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?	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 the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
		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.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	na
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	па
	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-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in 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 the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

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

Following an investigation into an immate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the immate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? 115.73 (b) Reporting to immates If the agency did not conduct the investigation into an immate'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 immate? (NIA if the agencyfacility is responsible for conducting administrative and criminal investigations.) 115.73 (c) Reporting to immates Following an immate'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 immate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? Following an immate's allegation that a staff member has committed sexual abuse against the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? Following an immate's allegation that a staff member has committed sexual abuse against the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? Following an immate's allegation that a staff member has committed sexual abuse against the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicated on a charge related to sexual abuse against the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the allegated victim whenever: The agency learns that the allegated victim whenever: The agency learns that the allegad victim whenever: The	115.72 (a)	Evidentiary standard for administrative investigations	
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			yes
Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	115.76 (b)	Disciplinary sanctions for staff	
		Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate 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).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior 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 emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

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

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	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.)	no
	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.)	yes
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