

PREA Facility Audit Report: Final

Name of Facility: Correctional Alternative Placement Program

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 09/09/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Robert Manville	Date of Signature: 09/09/2022

AUDITOR INFORMATION	
Auditor name:	Manville, Robert
Email:	robertmanville9@gmail.com
Start Date of On-Site Audit:	07/28/2022
End Date of On-Site Audit:	07/29/2022

FACILITY INFORMATION	
Facility name:	Correctional Alternative Placement Program
Facility physical address:	15505 Pleasant Valley Road, Kuna, Idaho - 83634
Facility mailing address:	

Primary Contact	
Name:	Darcy Acosta
Email Address:	darcy.acosta@mtctrains.com
Telephone Number:	2083369959

Warden/Jail Administrator/Sheriff/Director	
Name:	Donald Manuz
Email Address:	donald.manuz@mtctrains.com
Telephone Number:	208-336-9959

Facility PREA Compliance Manager	
Name:	Bethany Videen
Email Address:	bethany.videen@mtctrains.com
Telephone Number:	O: (208) 336-9959
Name:	Darcy Acosta
Email Address:	darcy.acosta@mtctrains.com
Telephone Number:	O: (208) 336-9959

Facility Health Service Administrator On-site	
Name:	Micah Carford
Email Address:	Crawford, Mmcrawford@TeamCenturion.com
Telephone Number:	208-336-9959

Facility Characteristics	
Designed facility capacity:	442
Current population of facility:	419
Average daily population for the past 12 months:	400
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:	19-67
Facility security levels/inmate custody levels:	minimum, unclassified
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	75
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	16
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	9

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 Coordinator Information			
Name:	Heather Manuz	Email Address:	heather.manuz@mtctrains.com

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>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.</p>	
Number of standards exceeded:	
5	<ul style="list-style-type: none"> • 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.13 - Supervision and monitoring • 115.17 - Hiring and promotion decisions • 115.21 - Evidence protocol and forensic medical examinations • 115.86 - Sexual abuse incident reviews
Number of standards met:	
40	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-07-28
2. End date of the onsite portion of the audit:	2022-07-29

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Advocate against Family Violence Idaho Sheriff's Association: They are the outside reporting agency. However, in discussion they also provide outreach programs for correctional centers.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	442
15. Average daily population for the past 12 months:	400
16. Number of inmate/resident/detainee housing units:	5
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	426
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	15
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	2
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	3
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	75
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	16
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	19
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	I interviewed inmates from each of the housing units.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	7
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to the selection of inmates, the facility staff and I reviewed the targeted population. This included the hospital administrator, mental health staff and PREA compliance managers.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to the selection of inmates, the facility staff and I reviewed the targeted population. This included the hospital administrator, mental health staff and PREA compliance managers.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to the selection of inmates, the facility staff and I reviewed the targeted population. This included the hospital administrator, mental health staff and PREA compliance managers.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>

<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to the selection of inmates, the facility staff and I reviewed the targeted population. This included the hospital administrator, mental health staff and PREA compliance managers.</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>2</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to the selection of inmates, the facility staff and I reviewed the targeted population. This included the hospital administrator, mental health staff and PREA compliance managers.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Prior to the selection of inmates, the facility staff and I reviewed the targeted population. This included the hospital administrator, mental health staff and PREA compliance managers.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>14</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>8</p>

<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Agency contract administrator <input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment <input type="checkbox"/> Line staff who supervise youthful inmates (if applicable) <input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable) <input checked="" type="checkbox"/> Medical staff <input checked="" type="checkbox"/> Mental health staff <input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches <input checked="" type="checkbox"/> Administrative (human resources) staff <input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff <input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations <input checked="" type="checkbox"/> Investigative staff responsible for conducting criminal investigations <input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness <input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation <input checked="" type="checkbox"/> Staff on the sexual abuse incident review team <input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation <input checked="" type="checkbox"/> First responders, both security and non-security staff <input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
<p>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the total number of CONTRACTORS who were interviewed:</p>	<p>5</p>

<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>The facility contracts for Medical and Mental Health Services.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

<p>84. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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Was the site review an active, inquiring process that included the following:

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>The Management and Training Corporation (MTC) – Idaho Correctional Alternative Placement Program Facility (Idaho CAPP Facility) is located approximately 6 miles outside of Boise, Idaho at 15505 South Pleasant Valley Road Kuna, Idaho in the County of Ada. MTC 's Idaho Correctional Alternative Placement Program Facility began operations with a capacity of 442 beds. The facility is</p>
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situated on approximately 37 acres (3.5 acres inside the management fence). One 66,000 square foot building provides space for all programs, services, housing, and offices. Offender housing includes four, 108 bed dormitory type units and a segregation unit of 10 beds. Each housing unit has wash basins, toilets, and showers with shower curtains and privacy screens. The facility central control monitors and controls all traffic moving into and out of the facility. Programs spaces are provided, and indoor/outdoor recreation areas are available adjacent to the housing areas. Food is prepared in a central kitchen and served in the housing unit day spaces. In the Segregation Unit, the food is served to each cell on trays. Each housing unit has a recreation yard adjacent to the unit and offers basketball and exercise equipment. Four outside buildings include the property/maintenance shed, pump house, well house, and mower shed used to store power equipment. During the tour, the auditor observed the locations of video monitoring cameras around the facility, including those outside. The cameras are monitored 24 hours a day. None of the camera's field of view included the toilet and shower areas. General population inmates are housed in four single-level double bunk housing units with an attached dayroom and outdoor recreation yard. Each housing unit provides two 54 bed dormitories divided by communal toilets, sinks, and showers. The unit officer's desk is located in the dayroom, immediately adjacent to the inmate living areas, which allows the officer to hear and interact with the inmates and promptly respond to emergency situations. Two utility officers are assigned to rove the four housing units and assist the unit officers. The auditor observed the locations of grievance and medical boxes. Inmate risk screenings were completed in the intake area. The auditor was provided unimpeded access to all parts of the facility and all secure rooms and storage areas in the facility. The auditor had sufficient opportunity to view inmate – staff interaction. There was also ample time to observe the nature and quality of inmate supervision throughout the on-site audit process, and in all instances the auditor observed appropriate respect on the part of both inmates and staff PREA reporting information and other PREA posted information is in both English and Spanish and posted in all housing units and in numerous locations throughout the facility. The address and telephone number for all of the reporting brochure is next to all telephones. Reminders of opposite gender announcements are stenciled near the entries of housing units. The medical area had a wraparound curtain to provide privacy for examinations. The offender telephone was tested in several living units to call the hotline. Offenders are not required to utilize a PIN to contact the Victim Advocate. Several offenders were able to show me how to utilize the telephone system. Most offender were talkative and could articulate the agency policies about zero- tolerance. All offenders knew the facility administrator, the PREA compliance manager and the other staff that were on the tour. When asked how staff would manage an offender that claims to be in imminent danger staff indicated they would stay with the offender and take him to the shift supervisors office. They would follow the protocol of not brushing his teeth, not take a shower, not defecating, and would notify the major and medical. All showers have curtains for privacy. All toilets had partitions and walls in front of the toilet area. Offender stated they are not seen by staff when showering or using the restroom. The Idaho CAPP Facility offers intensive treatment programs for substance abuse and cognitive issues for up to 442 low to moderate risk male inmates needing substance abuse treatment. It houses three different groups of inmates:

- Probationers who are in violation

- Parolees who violates parole
- Retained Jurisdiction- who have been sentenced to a prison term by the court

The MTC Idaho CAPP Facility strives to be a leader in social impact by helping those they serve prepare to successfully re-enter society. Incarcerated men are provided with the following:

- Educational
 - o General Education Development
 - o TRIO Educational Services Workshops
- Vocational
 - o Vocational Rehabilitation Workshops
- Life Skills Courses
 - o Veteran Services Workshops
 - o Department of Labor Workshops
- Behavioral Intervention
 - o Substance Abuse
 - o Thinking for a Change
 - o Pre-Release
 - o Aggression Replacement Training

The facility staff were noted to be actively involved with the inmate population. In visits throughout the time the auditor was on site, staff were noted actively supering the population and working with the population resolve issues typical of a correctional facility. I did not hear a staff member either during the tour and while visiting areas to interview staff and inmate ever tell an inmate "Send me a note" I'll check on it later" or "get with your ". This is a sign of an engaged staff.

Documentation Sampling

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

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

There were no barriers to selecting additional documentation. The facility staff provided files and additional documentation in a timely basis.

The auditor requested random personnel background checks reviews. The employee records included four staff that had been employed at the facility more than 5 years, four of the staff who were promoted and four of the staff were employed in the last 12 months check was completed and is maintained in file in the personnel's office. The auditor requested some specific and some random training files for 10 employees. Including in the specific list was training staff, director, PCM, shift supervisor and ten random monitors. The training files were requested and reviewed. The medical and mental health staff have received general PREA yearly training and specialized training for Sexual Abuse and victimization. Twenty resident screening files were reviewed. included in the review was age, date of arrival, date of initial PREA orientation, date of comprehensive PREA training, initial Vulnerability Screening, and rescreening. A review of the residential records also included resident referrals for mental health or victim advocate programs. The resident's file contained documentation of Intake Screening, Intake PREA notification, rescreening and formalized PREA education. All time requirements were met on each area. Logbook documentation of PREA rounds were reviewed during the tour. The auditor asked to review Investigative files and 8 files were reviewed utilizing the PREA resource Center worksheet. The auditor requested and reviewed unannounced PREA rounds for each shift on a randomly selected week. The facility conducts unannounced rounds on each shift and specific PREA rounds during each week by supervisors. The PREA rounds included testing telephones, interviewing resident and staff, reviewing documentation and replacing any missing documentation.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	2	1	2	1
Total	2	1	2	1

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	1	0	1	0
Staff-on-inmate sexual harassment	5	0	5	0
Total	6	0	6	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	0	0
Staff-on-inmate sexual harassment	0	3	1	1
Total	0	4	1	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	2
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files

103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	6
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	5

<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>No text provided.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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Non-certified Support Staff

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<p>Identify the name of the third-party auditing entity</p>	<p>Correctional Management and Communication Group</p>

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: Exceeds Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

IDOC Policy 325OM-01 Ensuring Safe Prison

Idaho Community Alternative Placement Program ICAPP 325OM-01-001 Ensuring Safe Prison

Management & Training Corporation (MTC) Policy 903E.02 Sexual Safety in Prisons (PREA)

Zero Tolerance Poster

MTC Memo: Corporate PREA Coordinator

Idaho CAPP Organizational Chart

PREA first responder duties card

MTC Policy 203.1 Rules on Conduct

MTC Policy 201.10 Employee Discipline Training Resource Library

Pre-Audit Questionnaire/Adult Prisons & Jail

115.11 (a): The IDOC Policy 325OM-01 Ensuring Safe Prison, Idaho Community Alternative Placement Program ICAPP 325OM-01-001 Ensuring Safe Prison and Management & Training Corporation (MTC) Policy 903E.02 Sexual Safety in Prisons (PREA) agency's zero tolerance against sexual abuse is clearly established and the policies outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment allegations. Definitions are provided to make clear the agency and facilities mandates for all staff, volunteers, contractor, and visitors to comply with PREA standards. When you enter the front entrance of the facility there are 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 Offender manual, 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 and procedures. All employees receive initial training and annual training, as well as updates throughout the year. In reviewing the facility for this standard the facility provided a wealth of information on innovative ways PREA is part of the culture at the facility. Training programs are provided for staff and inmates on a continuous basis. Inmates interviewed felt safe and new how to contact the facility warden or the facility PREA compliance managers as they are in the living units daily. The inmates are assigned to this facility to prepare inmates for release into the community. The inmates random during the tour and in formal interviews were involved in programs to prepare for release. coordinate the facilities PREA efforts. The facility's organizational chart illustrates the PREA Compliance Manager's position within the facility as the assistant warden. ICAPP provides support staff for assisting the PREA compliance manager with her task in carrying out the PREA mandates from MTC. The administrative team meets on a regular basis to develop strategies to establish a culture that provides a safe environment for staff and inmates. Though out the tour, staff, and inmates new the PREA compliance managers name and role at the facility. Both the MTC PREA Coordinator and Facility Compliance Manager advised they have sufficient time and authority to coordinate efforts to comply with PREA standards. The facility provides additional support for PREA related investigations, policy reviews, mock audits and follow up to cooperate office PREA coordinator's office questions or concerns.

115.11 (b)(c): MTC employs an upper-level, agency-wide PREA Coordinator at the corporate level. The agency's organizational chart depicts her position within the agency. The PREA Coordinator oversee the agency's efforts to comply with the PREA standards in all of MTC's facilities. MTC has a team of staff that support the PREA coordinator efforts in meeting all PREA standards. The administrative team meets on a regular basis to develop strategies to establish a culture that provides a safe environment for staff and inmates. The PREA Coordinator and her team or very knowledgeable about PREA and best practices to carry out the Agency's approach to prevent, detect, and respond to sexual abuse or sexual allegations.

Exceed compliance was determined by review of agency organization chart, agency, and facility policies, both staff and inmate training orientation power point presentations, posters, offender manual and interviews with staff, and inmates further provided exceed compliance with this standard.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 271 1493 331">The following policies, directives and documentation were reviewed in formulating compliance with this standard: Contract for Service</p> <p data-bbox="244 360 424 387">Statement of Fact</p> <p data-bbox="244 418 1398 479">MTC is a private provider and does not contract for the confinement of their offenders; therefore, this standard is not applicable to this facility.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Exceeds Standard
	<p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 1366 297">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 699 353">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="242 383 679 409">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="242 439 636 465">MTC Policy 505-FA-01 Weekly Rounds</p> <p data-bbox="242 495 505 521">IDOCC Staffing Plan 2021</p> <p data-bbox="242 551 424 577">Statement of Fact</p> <p data-bbox="242 607 448 633">Facility Staffing Plan</p> <p data-bbox="242 663 453 689">Unannounced PREA</p> <p data-bbox="242 719 940 745">Documentation of Unannounced Rounds. Annual Facility Assessment</p> <p data-bbox="242 775 651 801">Camera Inventory/Locations Shift Roster</p> <p data-bbox="242 831 1493 1137">115.13 (a)(b): MTC requires the facility to review the staffing plans on an annual basis. Interviews with the facility administrator 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 Prison provides the bimonthly reports that includes mandatory post and hold over staffing to meet the mandatory posts. This report also includes the number of positions authorized, the number filled, the number vacant, recruitment efforts and any staffing concerns during the pay period. The Warden meets weekly with his executive staff, including Chief of Security, Lieutenant, and the Human Resource Manager (HRM) to address staffing issues as they relate to the PREA. The staffing plan is based on a population 350 offenders. This was the number of residents during the pandemic and was the number used for the staffing plan. However, there was not decrease in the number of staff.</p> <p data-bbox="242 1167 745 1193">The staffing plan is based on the following criteria:</p> <ul data-bbox="242 1223 1358 1771" style="list-style-type: none"> - 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. <p data-bbox="242 1800 1466 1895">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 staff interviews, and rosters. Supervisory and Administrative staff members routinely make unannounced rounds. These rounds are documented in Unit Logs located in each housing unit.</p> <p data-bbox="242 1924 1477 2085">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. There has been no deviation from the staffing plan based on interviews with facility administrator and PAQ. The facility is presently fulfilling the contracting compliance through overtime, incentive pay and an exerted attempt to hire more staff.</p> <p data-bbox="242 2114 1426 2141">115.13 (c): MTC Policy mandates that whenever necessary and no less that annually, the staffing plan is reviewed and</p>

documented on the Annual PREA Facility Assessment. This completed form is submitted to the Corporate PREA Coordinator and the Corporate Divisional Vice President for signature and approval of any recommendations made to the established staffing plan to include the deployment of video monitoring systems and other monitoring technologies or the allocations of additional resources to maintain compliance to the plan. In interview with MTC's PREA Coordinator, she reported being consulted regarding assessments or adjustments to the staffing plan through incident reviews of substantiated and unsubstantiated allegations and through the Annual PREA Facility Assessments she reviews and approves for each of the agency facilities annually.

115.13 (d): According to MTC policy and facility document practice requiring department heads, facility executive staff and intermediate and higher-level custody supervisors conduct and document unannounced rounds on all shifts within their respective areas to identify and deter employee sexual abuse and sexual harassment. Policy also mandates that other staff are prohibited from telling other staff when supervisors are making unannounced rounds. 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. Additionally, the IDO was interviewed. IDO visits areas of the facility during days, evenings, and weekend. The IDO document the visits on logbooks located in housing unit control room. 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. The administrative Lt. for each shift was interviewed. Each indicated that they visit each living unit a minimum of once per shift. The control room staff document these visit on the unit log. The auditor reviewed logbooks during the tour and found multiple signs in documentation on each shift. While touring the control room, the control room officers showed her PREA rounds documentation. The facility provided a page on one of the logbooks that documented that a supervisors visited the unit on each shift.

An examination of policy and supporting documentation and all interviews confirms compliance with this standard

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Management & Training Corporation (MTC) Policy 903E.02 Sexual Safety in Prisons (PREA)</p> <p>Contract for Service Statement of Fact</p> <p>Idaho CAPP does not house youthful offenders. Compliance was determined by review of contract for services, policy and interviews with Intake staff and facility administrator.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="240 327 529 356">IDOC 325-OM- 01 Searches</p> <p data-bbox="240 383 699 412">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="240 439 687 468">ICAPP 325OM-01-001 Ensuring Safe Prison</p> <p data-bbox="240 495 786 524">MTC Corporate Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="240 551 655 580">Training Presentation (Pat Down Search)</p> <p data-bbox="240 607 1382 674">Training records- Cross Gender Pat Searches & Searches of Transgender & Intersex Strip Search Log Shift Logs- Announced gender presence</p> <p data-bbox="240 701 477 730">Statement of Fact PAQ</p> <p data-bbox="240 757 1485 1088">115.15 (a): IDOC 325-OM- 01 Searches 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. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. All security staff of the WCCF receive training on how to conduct cross-gender pat searches and searches of transgender and intersex inmates in a professional and respectful manner. training on how to conduct cross-gender pat searches and searches of transgender and intersex inmates in a professional and respectful manner. Staff receive Limits to Cross Gender Viewing & Searches training. The lesson plan of this training was provided for review. Staff sign a PREA Basic Acknowledgement form acknowledging receipt and understand of the training received. Review of random staff training records and in interview with security staff, revealed staff are receiving this training at pre-service and annually. 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</p> <p data-bbox="240 1115 1433 1182">115.15 (b): The facility houses male offenders. Each transgender meets with the Transgender Care Committee and are allowed to provide staff preference for pat down searches.</p> <p data-bbox="240 1209 1490 1305">115.15 (c): Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. The facility also maintains a log of all strip searches. This log indicates date, time, purpose and offender's gender and gender of persons conducting the strip searches.</p> <p data-bbox="240 1332 1490 1630">115.15 (d): ICAPP 325OM-01-001 Ensuring Safe Prison 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. The living areas showers have curtains that provides for inmate privacy while showering. Toilet areas have partitions with door to allow inmates to use the restroom without being viewed by staff. The medical area has a wraparound curtain for privacy during examinations. All toilets in the living units have partitions and a wall in front of the toile to provide privacy. All other areas that were reviewed during the tour had partitioned or single toilets with a door to provide privacy. All residents stated they can shower, use the toilet and change clothes without being seen by staff members. During the tour it was noted that in one dormitory shower curtains were not high enough to provide privacy. A corrective plan was completed within 24 hours of the tour.</p> <p data-bbox="240 1657 1481 1821">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. Inmates interviewed acknowledged they were allowed to shower, dress and use the toilet without being viewed by staff of the opposite gender. Postings are located throughout the living units that female staff are assigned to work in housing units. The facility maintains a log for staff of the other gender to announce their presence when entering housing units.</p> <p data-bbox="240 1848 1490 2011">115.15 (e): MTC Policy 903E.02 and IDOC 325-OM- 01 Searches addresses the searches of transgender and intersex offenders. Facilities shall not search or physically examine a transgender or intersex offender solely to determine their genital status. If the genital status is unknown, it may be determined during private conversation with the individual, by reviewing medical records or by learning this information as part of a broader medical examination conducted in private by a medical practitioner. At the time of the onsite audit, there were two (2) offenders who disclosed being transgender or intersex.</p> <p data-bbox="240 2038 1485 2134">115.15 (f): All staff at ICAPP receive training on how to conduct cross-gender pat searches and searches of transgender and intersex offenders in a professional and respectful manner. Staff receive Limits to Cross Gender Viewing & Searches training. The lesson plan of this training was provided for review. Staff sign a PREA Basic Acknowledgement form</p>

acknowledging receipt and understand of the training received. Review of random staff training records and in interview with security staff, revealed staff are receiving this training at pre-service and annually. 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.

The transgender offenders were interviewed. Each indicated they had chosen for a female to pat search them. Each indicated they had always been pat searched by a female staff.

Based on the review of policies and notices regarding the presence of female staff in the units, observation of the showering/dressing areas and interviews with staff and inmates it has been determined that ICAPP is in compliance with this standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	<p data-bbox="240 143 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 453 239">Auditor Discussion</p> <p data-bbox="240 271 1489 331">The following policies, directives and documentation were reviewed in formulating compliance with this standard: MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="240 360 699 392">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="240 421 687 452">ICAPP 325OM-01-001 Ensuring Safe Prison</p> <p data-bbox="240 481 799 512">Qualified interpreter services – American sign language</p> <p data-bbox="240 542 1477 573">PREA Training (English/Spanish Offender Handbook (English/Spanish PREA Brochures English/Spanish Statement of Fact</p> <p data-bbox="240 602 600 633">PREA Brochure Maintaining Dignity</p> <p data-bbox="240 663 831 694">Language Line and video conference interpretive Solutions</p> <p data-bbox="240 723 1485 969">115.16 (a): ICAPP mandates that the facility shall not discriminate against offenders with known disabilities and shall provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act. ICAPP has established a procedure to medically classify offenders including ADA target offenders. The intake staff indicated that when an offender arrives at the facility, intake first responsibility is to interview the offender to determine if he meets the ADA targeted population. If they are not certain they notify medical to access the offender before beginning the intake process. ICAPP provided a memo of fact that the facility has limited medical hours that limits the facility with some disabilities. At the time of the audit there were no inmates that were blind or deaf. There were two offenders that were LEP and required a translator to be interviewed by the auditor.</p> <p data-bbox="240 999 1445 1160">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 agency’s efforts to prevent, detect and respond to sexual abuse and sexual harassment. The facility has TTY machines for hard or hearing offenders and access to sign language contracted staff. At the time of the audit there were no offenders that had any ADA communications that could not be addressed by the facility.</p> <p data-bbox="240 1189 1493 1350">115.16 (b)(c): All PREA related information (written information), including postings, brochures and handouts are available in English, and Spanish. The facility has access to translation services and written access in other languages. Through Language Line Contact. Staff also may read information to inmates when necessary. Agency and facility policies prohibit offenders to be relied on as readers or any types of assistants, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety. The facility maintains a list of staff that are bilingual.</p> <p data-bbox="240 1379 1426 1440">Compliance of this standard was confirmed by review of agency policy, contracting services for language interpretation services and interviews with PCM, Case Manager, Medical Administrator and facility Warden.</p>

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in determining compliance with this standard: MTC Policy 201.3 Background Checks

MTC Policy 203.1 Rules of Conduct Employee Handbook and background checks

Background Promotion Letter and PREA Promotion Disclosure Waiver Pre – Employment records Request

Personnel Records

115.17 (a): The Departmental Policy for Background Investigation and Appointment of Certified Officers does not allow hiring or promotions of anyone who has been convicted of sexual abuse in prison/jail or in community. Background checks are done on all employees, contractors and volunteers. Background checks (NICI) are conducted on all new hires. In interviews with the Human Resources any perspective employee or contractor completes an application that includes PREA questions. This is then forwarded to IDOC to conduct the background checks and employment history checks. IDOC will notify the human resources that the NCIC and history has been completed and the outcomes of their investigations. At that time the facility is authorized to offer employment to perspective employees. During the last 12 months IDOC has conducted 52 background checks on prospective employees and one background check on a prospective contractor.

115.17 (b): Prior to a transfer to the facility or promotions, employees background review is conducted and answer the following questions.

1. Have you engaged in sexual abuse in a prison, jail, lock up, community confinement facility, Juvenile facility, or other institution? (Please note that sexual abuse in this setting includes sexual acts with the consent of inmate, detainee, resident etc.).
2. Have you ever 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?
3. Have you ever been civilly or administratively adjudicated 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?

115.17 (c): The agency requires that all applicants and employees who may have contact with offenders have a criminal background check. Criminal background checks for all potential employees are completed through the TDCJ background division. For those considered for promotions or who transfer from another facility, an internal MTC PREA verification and a background check are completed. If an applicant answers on their application they are a prior institutional employee, information from prior institutional employers shall be requested.

115.17 (d): The facility performs criminal background checks through the IDOC NCIC division before enlisting the services of any contractor or volunteer. The auditor reviewed random contractors background and found all had background checks completed prior to employment.

115.17 (e): A review of random staff and contractor verified that the Personnel staff maintain information required to conduct 5-year background checks. In the facility PREA pre audit and provided to the auditor by the human resources staff was a spread sheet of the staff that would be required to have a five-year background check in 2026

115.17 (f): ICAPP asks all applicants and employees who have contact with offenders directly about previous sexual misconduct. Applicants are asked these questions on the MTC application. Employees and contractors complete a PREA Disclosure and Authorization Form – Annual Performance Evaluation annually. For consideration for promotions or transfers, employees complete a PREA Disclosure and Authorization Form Promotions as well as a MTC internal PREA verification.

115.17 (g): Employees and contractors have a duty to disclose such misconduct referenced in this standard. 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.

115.17 (h): Unless prohibited by law, MTC will 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 the individual has applied for work.

Compliance was determined by pre audit documentation, the PAQ, interviews with the human resources director and review of 20 random staff files including new hires, promotions and five-year tenure and one contractor files. All required information was noted utilizing the PREA Employee/Contractor worksheet.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 353">The following policies, directives and documentation were reviewed in formulating compliance with this standard: MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="229 353 1509 416">Statement of Fact</p> <p data-bbox="229 416 1509 728">MTC Policy 903E.02 Ensuring Safe Prisons mandates the company will consider the effect of new or upgraded design, acquisition, expansion, or modification of physical plant or monitoring technology might have on the facility's ability to protect offenders from sexual abuse. Based on statement of fact, there have been no additional modifications or expansions to ICAPP during the last audit period. If new facilities are designed or there are modifications to existing facilities, the agency's PREA Coordinator works closely with the project development team to ensure the safety of inmates. The facility has not request upgrades to the camera systems. All cameras were reviewed, and all were in good working order. The facility provide recording for 30 days. The center did an upgrade to the camera system in 2020 including adding camera in the food service area. Compliance was determined by review of facility camera coverage and interviews with Agency Head Designee, MTC PREA coordinator, facility administrator and Major.</p>

115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="242 145 766 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 1369 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 1088 356">Management and Training Corporation (MTC) Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="242 383 810 412">ICAPP Policy 125-ADMIN Investigation of Serious Crime</p> <p data-bbox="242 439 932 468">Conversation with SANE Solution/Terry Riley Mental Health Services</p> <p data-bbox="242 495 735 524">MOU with IDOC and ADA County Sheriff's Office</p> <p data-bbox="242 551 849 580">MOU with IDOC and Advocates Against Family Violence inc.</p> <p data-bbox="242 607 699 636">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="242 663 499 692">Investigator Certifications</p> <p data-bbox="242 719 1038 748">St Alphonsus Medical Center Hospital Victim Advocate Investigator Certification</p> <p data-bbox="242 775 1476 1043">115.21 (a): Administrative and criminal investigations are completed on all allegations of sexual abuse/sexual harassment. Facility investigators are trained in conducting sexual assault investigations in confined settings/prisons. 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. MTC Policy 903E.02 Ensuring Safe Prisons and ICAPP Policy 125-ADMIN Investigation of Serious Crime meet the requirements of this standard. When required, the facility investigators refer sexual abuse investigations (criminal violations) to the ADA Sheriff's office.</p> <p data-bbox="242 1070 1492 1137">115.21 (b): The agency and the facility follow a protocol developmentally appropriate for youth where applicable and adapted from or otherwise based on the U.S. Department of Justice's office on Violence Against Women Publication,</p> <p data-bbox="242 1164 1460 1261">115.21 (c): The facility offers all victims of sexual abuse access to forensic medical examinations at an outside facility, the facility transports victims of sexual abuse to St Alphonsus Medical Center for SANE staff and would conduct SANE examination without financial cost to the victim.</p> <p data-bbox="242 1288 1492 1585">115.21 (d-e): 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. The facility has contracting medical and mental health service through Centurion Medical for medical and mental health service. Part of this contract is for the contractor to provide a victim advocate if required. The mental health staff interview indicated they had received training and were licensed professional and would provide advocacy services if required. IDOC has a MOU with Advocate Against Family Violence to provide advocate to accompany victims of sexual abuse for SANE examination. Advocate Against Family Violence indicated they had staff trained to accompany victims for examinations and victim emotional support following a sexual abuse. In interview with the victim advocate it was determined they have received appropriate training, have licensed professional counselor to provide victim emotional support.</p> <p data-bbox="242 1612 1492 1680">15.21 (f): Based on statement if ADA Sheriff's Offices conducts the investigation the facility provides whatever support that is requested and request updates weekly during the investigative process.</p> <p data-bbox="242 1706 1460 1803">Compliance of this standard were confirmed by review of the policies, MOUs, Statement of Fact, PAQ, investigative files. Interviews included Investigator, SANE Staff with Terry Riley Mental Health Service, St. Alphonsus emergency room staff, Advocate Against Family Violence and facility warden.</p>

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard</p> <p>MOU with IDOC and ADA County Sheriff's Office</p> <p>IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p>ICAPP Policy 125-ADMIN Investigation of Serious Crime</p> <p>115.22 (a): ICAPP Policy 125 meets and MOU with IDOC and ADA County Sheriff's offices meet the requirement of this standard. Administrative and criminal investigations are completed on all allegations of sexual abuse/sexual harassment. Facility investigators and the ADA County Sheriff's office are trained in conducting sexual assault investigations in confined settings/prisons. 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. There were eight (8) allegations of sexual abuse or sexual harassment in the last 12 months. One allegation was referred to the sheriff's office. The sheriff's office reviewed the allegation, completed a preliminary review and determined it was not criminal and declined to investigate.</p> <p>115.22 (b): Information published on the MTC website describes the responsibilities of the agency and the investigating agency in the investigation of allegations of sexual abuse and sexual harassment. The agency policy regarding the administrative investigation of allegations of sexual abuse or sexual harassment and referrals for criminal investigations is published on the agency website and can be accessed at http://www.mtctrain.com/PREA.</p> <p>Compliance was determined by review of investigations, policy, statement of fact, MTC website.</p>

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Sexual safety in Prison</p> <p>MTC Policy 901D.02 (A1, D1) Training Requirements</p> <p>Annual Refresher Training Packet Power Point</p> <p>Training Resource Library</p> <p>IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p>PREA Training Curriculum</p> <p>Pre-Service/In-Service Orientation Training Schedule & Roster re: PREA Training</p> <p>Prison Rape Elimination Act - Training Acknowledgement In-service Pre-Service Summary Review Test re: PREA Knowledge</p> <p>115.31 (a): All staff are provided training that includes all areas of PREA training and protocol for sexual abuse prevention, intervention, reporting, and protecting the inmates and preserving the possible crime scene. The facility receives training developed for IDOC and includes films, power point presentations, and lectures.</p> <p>Training includes:</p> <ul style="list-style-type: none"> ▪ 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. ▪ Inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment. ▪ Dynamics of sexual abuse and sexual harassment in confinement. ▪ Common reactions of 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. ▪ How to conduct cross gender pat searches: <p>Newly hired employees receive training relative to PREA standards during their initial training in a classroom setting. The facility conducts training on a quarterly. The training is conducted in classroom and computer-based training.</p> <p>115.31 (b): MTC Policy 901D.02 (A1, D1) Training Requirements recognizes that the facility houses female inmates. Policy mandates that the facility will be required to modify training to meet needs of a different population. Staff assigned to specialized Post such as transportation officers, supervisors, and investigators receive additional training.</p> <p>115.31 (c): According to the computer data base for training, all staff have received training in the last 12 months. Staff interviewed indicated they had received additional refresher training during the last six months. At ICAAP staff received annual in-service training. According to the PAQ all staff received initial or annual in-service training in the last 12 months. Between trainings, the facility shifts briefings and staff meetings and employees receive emails regarding PREA updates and information. Third Party Reporting Posters are displayed in various locations throughout the facility. Pre employment training is conducted by a staff training officer and the PREA compliance mangers in a classroom setting. The training curriculum</p>

includes videos, power point presentation, brochures and general discussions centered around the mandates in 115.31.(a) above.

115.31 (d): Upon completion of PREA pre-service and annual in-service training, staff sign a an Acknowledgement of Receipt of Training and Brochures Sexual Assault Prevention form and a Preservice Training Record and an In-service Training Record form acknowledging receipt and understanding of all training received, including PREA. They also sign a PREA Basic Acknowledgment Training form upon completion of general PREA training and a Cross Gender Pat Searches & Searches of Transgender and Intersex acknowledgment form. Documentation of annual PREA training for employees is maintained recorded on individual training records maintained by the Training Coordinator.

A review of the training curriculum, training sign-in sheets and other related documentation, as well as staff interviews, confirmed staff are 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. The auditor reviewed 15 staff training records including the facility administrator, PCM, shift supervisor, investigator, medical and 10 random staff.

115.32	<p>Volunteer and contractor training</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 901D.02 (A1, D1) Training Requirements Volunteer Training</p> <p>Approved Volunteer Roster Documentation of Volunteer Training</p> <p>Acknowledgment of Receipt of Training and Brochures Volunteer Training Facilitator Guide</p> <p>IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p>ICAPP 325OM-01-001 Ensuring Safe Prison</p> <p>115.32 (a): IDOC Policy 325OM-01 Ensuring Safe Prison mandates 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. The facility has 22 volunteer or contractors that have received training in the last 12 months.</p> <p>115.32 (b)(c): All contractors receive the same PREA training as employees prior to assignment and sign a PREA Basic Acknowledgement Form and an Acknowledgement of Receipt of Training and Brochures Sexual Assault Prevention form. All medical and mental health staff are contracted through Centurion Medical Services. These staff received training through the ICAPP training officers along with non-contracted staff.</p> <p>The volunteer training curriculum was provided for review. The training included 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. Volunteers receive this training annually and sign a Documentation of Volunteer Training Form. Volunteer training is maintained in the volunteer files, while contractor documentation of training is maintained by the training coordinator.</p> <p>Compliance with this standard was determined through review of procedure, IDOC training plan, contractor and volunteer information, signed PREA acknowledgements and interviews.</p>
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115.33

Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

Inmate Handbook English Spanish

Receipt of training for new arrivals Receipt of training for transfers Inmate Receipt of PREA Brochure

Inmate Receipt of PREA Comprehensive Education Inmate Orientation PowerPoint

IDOC Policy 325OM-01 Ensuring Safe Prison

PREA Maintaining Dignity

ICAPP Living Guide for Resident

Posters:

- a. Break the Silence of Abuse
- b. Extortion
- c. Do Not Live in Darkness. Shine the Light on Sexual Abuse and Sexual Harassment
- d. Sexual Abuse Is an Act of Violence

15 inmate files reviewed

115.33 (a): IDOC Policy 325OM-01 Ensuring Safe Prison Training mandates all inmates receive information at time of intake and if transferred from another facility about the zero-tolerance policy and how to report incidents of sexual abuse or sexual harassment, their rights to be free from retaliation for reporting such incidents and are informed of the agency/facility policies and procedures for responding to such incidents. In interview with intake staff, on the day of arrival, inmates receive an Inmate Handbook, and a Sexual Assault Prevention and Reporting Inmate/Student Information Brochure and sign a Receipt for Adult Inmate Handbook and Adult Disciplinary Procedures form. During the intake process residents are provided a comprehensive Training Program for new arrived inmates about the facilities programs including PREA Education. The training includes a PREA video, brochures, review of policies, and a power point presentation.

115.33 (b): Inmates receive comprehensive PREA education as part of the orientation process usually on the same day of their arrival, however by policy at a minimum within the first seven days of arrival to the facility. Inmates in Prison Rape Elimination Act (PREA) Inmate Education Program acknowledgement form acknowledging receipt of PREA education. The curriculum provided to inmates was provided for review.

115.33 (c): The intake staff and PREA compliance manager stated that all inmates have received the training with the exception of the inmates that arrived during the audit. They had received the PREA intake orientation and were scheduled to receive the additional comprehensive training after I completed my onsite audit. According to the PAQ 1007 inmates received the information at intake and 866 received the comprehensive PREA training. The PAQ indicated there were 1007 resident admitted into the facility and 1007 that received the intake orientation and comprehensive education. I interview with the PREA compliance manager it was explained that anytime an offender leaves the facility for court, medical, passes, when they return, they are counted as new arrivals in the Data Base. There were 1007 new arrival or transfer to the facility during the last 12 months. The TDCJ data base would flag any offender that did not receive the initial or comprehensive training as required by this standard.

115.33 (d): All PREA education provided to inmates is in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, or have limited reading skills. The Inmate Handbook, the PREA brochure and all verbal information given is provided in both English and Spanish. A contract for ESL detainees to provide translation of any other languages. The facility has a TTY for deaf or hard of hearing inmates The one resident that was interviews utilizing the disability protocol indicated she received the orientation and comprehensive training through a staff interpreter.

115.33 (e): The facility maintains documentation of inmates' participation in PREA education. In review of 20 random inmate files, were complete with proper documentation of receipt of written PREA education material.

115.33 (f): Throughout the facility were posters including Sexual Assault Prevention and Reporting Posters; MTC Zero Tolerance Posters, End the Silence Posters, and Victim Advocacy Services. These posters were informative and included telephone numbers and addresses. Also Notice of Audit was posted throughout the facility.

Based on review of the training curriculum, interviews with residents and staff it was determined that the facility meet the standards for training inmates.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Investigative Training Curriculum</p> <p>ICAPP Specialized Training Certificates Training Rosters</p> <p>Statement of Fact</p> <p>115.34 (a): MTC Policy 901D.02 mandates that in addition to the general training provided to all employees pursuant to §115.31, the agency ensures that, to the extent the agency itself conducts or assist in conducting investigation they will have been trained to conduct sexual abuse investigation in a correction setting.</p> <p>115.34 (b): The facility Investigators have completed investigating sexual abuse in a confinement setting and additional online training on investigating sexual abuse. Training includes Investigating Sexual Abuse through MTC training staff. The training curriculum was reviewed and included interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>115.34 (d): The facility has two trained investigators. The agency maintains documentation that investigators have received specialized training on conducting sexual abuse investigations in confinement settings. Upon completion of the training, investigators receive a certificate of completion. In review of investigators' training files, investigators have completed this specialized training, as well as general training provided to all employees and documentation is maintained by the facility. In interview of the facility investigators, they confirmed receiving specialized training and general PREA education provided to all employees and were able to confirm the topics included in the specialized training they received.</p> <p>Compliance was determined by review of the training curriculum, investigator training records, investigators certificate of completion, investigative reports, and interviews with PREA Coordinator, Agency Head, investigators, and facility administrator.</p>

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Certificates of Completion of PREA Specialized Training</p> <p>Signed PREA training acknowledgements Medical Safe Prisons/PREA Training PREA Training Certification</p> <p>Mandatory Pre-Service PREA Questions Acknowledgment of Receipt of Training & Brochures</p> <p>MOU with Victim Advocate</p> <p>115.35 (a): The medical staff at ICAPP received the generalized training and specialized training through Centurion Medical Services. The training curriculum includes 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, how and to whom to report allegations or suspicions of sexual abuse and sexual harassment as well of many other medical and mental health topics such as clinical interventions, and local policies. Based on the PAQ and interview with the Medical and Mental Health directors 100% of medical and mental health staff received the basic and specialized training during the last 12 months</p> <p>115.35 (b): The medical and mental health staff do not conduct forensic examinations.</p> <p>115.35 (c): Staff received a certification on completion for specialized training. They sign an acknowledge to training for the generalized PREA training. Both documents were provided in the pre audit documentation and verified through interviews with contracting nurse.</p> <p>115.35 (d): All medical staff assigned to the facility attend the same training as required mandated for employees by §115.31. They sign and acknowledge statement that they received this training. In addition to this training the staff that were assigned to the facility through a contractor received specialized training. Staff that are full-time employees receive specialized training for mental health and medical staff through the contracting agency.</p> <p>Exceed compliance was determined by review of the training curriculums, copy of certificates and acknowledgement statement and interviews with the nurse and mental health staff.</p>

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

Auditor Discussion

The following policies, directives and documentation was reviewed in formulating compliance with this standard: MTC 903E.02

IDOC Policy 325OM-01 Ensuring Safe Prison

Risk Assessment Process PREA Assessment Instrument

PREA Assessment 30 Day Review

PREA Assessment Process – 30 Days Review Screen

115.41 (a): IDOC Policy 325OM-01 Ensuring Safe Prison establishes policies and procedures governing this standard. All offenders are assessed during the intake screening process for their risk of being sexually abused by other inmates or being sexually abusive toward other inmates. The screening is conducted by the PREA compliance manager and director of classification staff. The screening normally occurs within twenty-four hours, but no more than seventy-two hours, after the inmate's arrival.

115.41 (b): Intake screening takes place within 24 hours of inmates' arrival to the facility. The process that is utilized includes part of the initial intake. Once the inmate is searched, they receive PREA pamphlets and handbook. During that time the classification staff or staff assigned to conduct the screening review the inmates file and meets with the inmates. During this meeting staff introduce PREA to the inmate and explains the purpose of the screening with the residents. The inmate is then asked to sign to acknowledge they have received the screening. If the inmate has past history of victimization or predator behavior the screening staff completes a referral that is sent to the medical staff to refer to the mental health staff to set up an interview with the resident. Medical and mental health staff are available during the screening process conducting a medical review and suicide screening. All screenings are referral to mental health staff for follow up if the inmate claims history of sexual victimization, history of predator sexual actions or if inmate self admits to being transgender

115.41 (c): The Assessment Screening Instrument is an objective and standardized screening instrument that is conducted by a trained staff member.

115.41 (d)(e): The screening includes the screener's thorough review of any available records available to assist with determining the detainee's risk assessment. The Intake Sexual Violence Assessment Tool was reviewed.

It contains:

- Whether the inmate has a mental, physical, or developmental disability?

- The age of the inmate?

- The physical build of the inmate?

- Whether the inmate has previously been incarcerated?

- Whether the inmates' criminal history is exclusively nonviolent?
- Whether the inmate has prior convictions for sex offenses against an adult or child?
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming?
- Whether the inmate has previously experienced sexual victimization?
- The inmate's own perception of vulnerability?
- Perpetrators of sexual abuse during incarceration?
- Prior conviction of violent offenses?
- History of Assaultive Conduct in DOC in the past 5 years?
- Whether the inmate is detained solely for civil immigration purposes

115.41 (f): Within a set time, not to exceed 30 days of inmates' arrival to the facility, inmates are reassessed by their assigned Case Manager for their risk for victimization and abusiveness using the Follow-up, Annual & Reassessment Sexual Violence Assessment Tool. In information provided on the Pre-Audit Questionnaire, 866 inmates were reassessed within 30 days of arrival.

115.41 (g): An inmate's risk level will also be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information. Annually during annual classification review assessments, inmates are reassessed for risk of victimization or abusiveness using the Annual & Reassessment Sexual Violence Assessment Tool. Transgender detainees are reassessed a minimum of every six months.

115.41 (h): Policy mandates that inmates are not be disciplined for refusing to answer any questions or for not disclosing complete information. Interviews with screening staff confirmed they would not discipline or coerce an inmate to answer Screening questions.

115.41 (i): ICAPP implemented appropriate controls on dissemination of responses to questions asked related to sexual victimization or abusiveness in order to ensure sensitive information is not exploited by employees or other individuals. Sensitive information is limited to need-to-know employees only for the purpose of treatment, programming, housing and security and management decisions.

The IDOC computer data base will notify staff of time for a 30-day reassessment and maintains a tracking when the facility or facility staff does not conduct the screening within 72 hours or the rescreening within 30 days of arrival at the center. All inmates are screened when the transfer into the facility including detainees that leave the facility for court appearance or other administrative transfer from the facility. The PAQ indicated there were 989 residents admitted into the facility and 989 that received the initial screening. There were 887 new arrival or transfer to the facility that remained in the facility more than 30 days during the last 12 months. All 887 residents were reassessed within the thirty days after arrival at the facility. The IDOC data base would flag any offender that did not receive an initial screening or reassessment as required by this standard.

All residents interviewed confirmed they received the initial screening the first day they arrived at the facility. All of the resident

that have been at the facility more than 30 days indicated that they met with their case manager within the first week arrival and discussed programming mandates and available programming. They met again after being at the facility after another week or so and received their programming plans and at that time the case managers asked about their safety and revisited the screening instrument and reviewed their file and discussed past history and asked if they had been victimized, were ever found guilty of sexual crimes or sexual abuse in other facilities, were victims and their sexual orientation. Most indicated that meeting last much longer than the first and was more in-depth. Most indicated that they felt much more comfortable with the second meeting with their case manager.

Compliance was determined by interview with Case Managers and the PREA Compliance Manager and in review of random inmate records the screening process is in place. In interview with inmates, they confirmed they were screened upon arrival to the facility and remembered being asked PREA questions again by their Case Manager or the PREA compliance manager.

115.42	Use of screening information
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 329 679 358">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="242 387 699 416">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="242 445 505 474">Risk Assessment Process</p> <p data-bbox="242 504 788 533">PREA Assessment Process – 30 Days Review Screen</p> <p data-bbox="242 562 1485 719">115.42 (a): Procedures state screening information shall be used to determine housing, bed, work, education, and programming assignments within the Facility in order to keep potential victims away from potential abusers. The PREA Compliance manager maintains an At – Risk log that indicates potential predator, high aggression risk, moderate aggression risk, identified prey, potential prey, high victimization risk, moderate victimization risk. All bed assignments made at ICAPP with significant age differences and inmates with size differences.</p> <p data-bbox="242 748 1493 844">115.42 (b): Individualized determinations are made about how to ensure the safety of each inmate. Inmates who score at risk of victimization or abusiveness are referred for further evaluation with the Mental Health provider. Inmates have an option of refusing these services.</p> <p data-bbox="242 873 1485 1104">115.42 (c): Policy and practice mandates that making housing and programming assignments for transgender or intersex inmates, the facility will consider on a case-by-case basis whether the placement would present management or security problems. Inmates who self-disclose being gay, bisexual, transgender or intersex are tracked on a LGBTI List that is maintained by the PREA compliance manager.. Transgender and intersex inmates are housed based on their interviews with classification staff and assessments in order to provide them with a safe environment to complete the facility programing. At the time of the on-site audit visit, there were 3 inmates who self-disclosed being transgender or intersex assigned to the facility.</p> <p data-bbox="242 1133 1477 1290">115.42 (d)(f)– (f) A transgender or intersex inmate’s housing and (f) program assignments will be reassessed every six months to review any threats to safety experienced by the inmate. Transgender and intersex inmates’ placement and programming are reviewed as needed, but at least every six months. A transgender or intersex inmates’ own views of their safety is taken into consideration. When the TCC meets with transgender or intersex inmates meet with the TCC they are given an opportunity to express their views.</p> <p data-bbox="242 1319 1469 1415">Transgender and intersex inmates are offered the opportunity to shower separately from other inmates as indicated in their Statement of Search/Shower/Pronoun Preference Form. Transgender interviewed indicated they do have meeting with mental health and medical and had input into their initial placement at the center.</p> <p data-bbox="242 1444 1453 1541">ICAPP does not place lesbian, gay, bisexual, transgender or intersex inmates in dedicated units or wings solely based on such identification. In interview with the one inmate who self-disclosed being gay, he did not feel he was housed any differently because of his sexual orientation.</p> <p data-bbox="242 1570 1461 1666">Offenders that claim prior victimization or prior sexual predator behavior are referred to the mental health staff. The IDOC database system maintains a roster of offenders that claim victimization and provided verification of referral and detainees decision to be seen by mental health professionals.</p> <p data-bbox="242 1695 1493 1859">During the onsite audit 2 transgender detainees were interviewed. All transgender detainees interviewed indicated on the first day of arrival they were provided a preference sheet that included showering alone, shake down preference and pronoun preference. All transgender that had been at the facility for more than six months had been rescreened. According to interviews with medical, mental health and detainees, transgender offenders are seen by the mental health and medical staff a minimum of once a month.</p> <p data-bbox="242 1888 1442 1946">Compliance was determined by review of policy and forms and interviews with the PREA coordinator, PREA compliance manager, agency head, review of the inmate data base, and warden.</p>

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 302 1485 365">The following policies, directives and documentation were reviewed in formulating compliance with this standard: MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="240 394 699 423">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="240 452 477 481">Statement of Fact PAQ</p> <p data-bbox="240 510 1485 638">115.43 (a): The facility does not place inmates at high risk for 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. Based on the PAQ and Statement of Fact, not detainee has been housed in segregation due to detainee being at high risk of being sexually victimized.</p> <p data-bbox="240 667 1477 730">115.43 (b): Inmates placed in segregated housing for this purpose have access to programs, privileges, education and work opportunities to the extent possible. The facility will document and justify any restrictions imposed.</p> <p data-bbox="240 759 1394 822">115.43 (c): The facility will assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, not to exceed a period of 30 days.</p> <p data-bbox="240 851 1406 913">115.43 (d): If involuntary segregated housing assignment is made, the facility will document the basis for the facility's concern for the inmate's safety and the reason no alternate means of separation can be arranged.</p> <p data-bbox="240 943 1461 1005">115.43 (e): In cases where involuntary segregated housing is used for longer than the initial 30 days, the facility will review the status every 30 days to determine if ongoing involuntary housing is needed.</p> <p data-bbox="240 1034 1485 1126">According to information provided on the Pre-Audit Questionnaire and in interview with the Facility Administrator and security staff who supervise inmates in RHU, in the past 12 months there has not been a time that an inmate found at high risk of victimization or an inmate who alleged sexual abuse was placed in involuntary segregated housing.</p> <p data-bbox="240 1155 1406 1184">Compliance with this standard was determined through review of procedures, observation during tour and interviews.</p>

115.51

Inmate reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

Idaho Memo: Inmate Reporting – Idaho Sheriff’s Association

Offender Orientation Handbook PREA Brochure English/Spanish Idaho Maintaining Dignity

ICAPP Living Guide

Power Point training

IDOC Policy 325OM-01 Ensuring Safe Prison

Employee Handbook

Documentation of Verbal Reports.

MTC Policy 903E.02 Ensuring Safe Prisons

115.51 (a): IDOC Policy 325OM-01 Ensuring Safe Prison mandate that facilities provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents. Policies also mandate that a private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials and that the private entity or office allow the inmate to remain anonymous upon request. Inmates are informed in the Inmate Handbook and on poster located throughout the facility and by almost all inmate telephones.

The handbook and PREA Posters specifically provide the following ways for inmate to report: The following are internal reporting ways:

- Grievance System
- Tell the Case Manager
- Chaplain
- Reporting to any staff member either verbally or in writing
- Third party reporting
- Writing an inmate request
- Hotline
- Writing an anonymous note

115.51 (a): Inmate interviewed new of the multiple way to report. Most stated they would tell a staff member the trusted.

115.51 (b): Interviews with staff and documentation indicated that the facility has established at least one way for inmates to report abuse or harassment to a public or private entity that is not part the agency, and they can receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. At ICAPP IDOC has a MOU with the Idaho Sheriff’s Association for outside reporting. The number was called and answered by a member of the reporting teams. These reports go to the facility warden, IDOC PREA coordinator and are followed up by a notification email to the same persons.

115.51 (c): Staff interviewed were aware of the requirement to accept reports made verbally, anonymously and from third parties. All staff interviewed indicated they would document verbal reports immediately and notify the shift supervisor by phone or in person.

115.51 (d): Staff have access to private reporting by calling the Employee Hotline (866-568-5425) or the Corporate PREA

Coordinator (561-999-5827). Information for inmate and staff reporting was found on the MTC website (<https://www.MTCgroup.com/PREA>). Third Party Reporting posters and the Employee Handbook informs employees of their responsibility of reporting sexual abuse and sexual harassment and their reporting options. Staff carry with them a Sexual Abuse First Responder Card, which has the employee hotline number and the website address for anonymous reporting. Staff interviewed knew how to privately report sexual abuse and sexual harassment of inmates.

Compliance was determined by testing the telephone system, reviewing policies and procedure, posters, and the resident handbook. Compliance was also determined by interviews with residents, staff, shift supervisors, PCM, and warden.

115.52	Exhaustion of administrative remedies
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 560 356">Offender Orientation Handbook</p> <p data-bbox="242 383 679 412">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="242 439 584 468">IDOC Policy 316-OM-1 Grievance</p> <p data-bbox="242 495 699 524">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="242 551 400 580">Grievance form</p> <p data-bbox="242 607 416 636">Grievance Boxes</p> <p data-bbox="242 669 1477 831">115.52 (a) IDOC Policy 316-OM-1 provides a procedure in place for inmates to submit grievances regarding sexual abuse and the agency has procedures for dealing with these grievances. Poster located throughout the facility advise resident that they may file a grievance. The resident handbook explains the process for filing a grievance. Any grievance that alleges sexual abuse, sexual harassment, retaliation for reporting an allegation or for cooperating in an investigation will be immediately forwarded to investigators and the warden's office.</p> <p data-bbox="242 860 1485 1088">15.52 (b): There is no time limit when an inmate can submit a grievance regarding sexual abuse. MTC does not impose a time limit to any portion of a grievance that does not allege an incident of sexual abuse. Inmates are not required to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse. Agency policy does not restrict MTC's ability to defend against a lawsuit filed by an inmate on the ground that the applicable statute of limitations has expired. The PREA Compliance Manager receives all copies of grievances related to sexual abuse or sexual harassment for monitoring purposes. In interview with the PREA Compliance Manager and information provided on the Pre-Audit Questionnaire, in the past 12 months there were no PREA related grievances filed.</p> <p data-bbox="242 1117 1469 1211">115.52 (c): Policy provides that inmates have a right to submit grievances alleging sexual abuse to someone other than the staff member who is the subject of the complaint and the grievance will not be referred to the subject of the complaint. If a third-party file a grievance on an inmate's behalf, the alleged victim must agree to have the grievance filed on his behalf.</p> <p data-bbox="242 1240 1485 1335">115.52 (d): A final decision shall be issued on the merits of any portion of the grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by individuals in the facility in preparing any administrative appeal.</p> <p data-bbox="242 1364 1485 1559">115.52 (e): Third parties such as fellow inmates, family members, attorneys or outside advocates may assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and may file on behalf of inmates. The alleged victim must agree to have the request filed on his or her behalf; however, he/she is not required to personally pursue any subsequent steps in the administrative remedy process. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision. In interview with the PREA Compliance Manager and on information provided in the Pre-Audit Questionnaire, in the past 12 months, there were no grievances filed by a third party.</p> <p data-bbox="242 1588 1477 1783">115.52 (f): Policy provides inmates may file an emergency grievance if he/she is subject to substantial risk of imminent sexual abuse. After receiving an emergency grievance of this nature, the facility administrator or designee will ensure that immediate corrective action is taken to protect the alleged victim. An initial response to the emergency grievance to the individual is required within 48 hours and a final decision will be provided within five calendar days. In interview with the PREA Compliance Manager and on information provided on the Pre-Audit Questionnaire, in the past 12 months, there were no emergency grievances alleging sexual abuse filed.</p> <p data-bbox="242 1812 1430 1872">115.52 (g): An inmate can be disciplined for filing a grievance related to alleged sexual abuse if it is determined that the inmate filed the grievance in bad faith. There were no Offenders disciplined for filing a grievance in bad faith.</p> <p data-bbox="242 1901 1430 1962">Compliance was determined by review of the policies, grievance, and by interviews with MTC PREA coordinator, PREA compliance managers, and facility administrator.</p>

115.53	Inmate access to outside confidential support services
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 331">The following policies, directives and documentation were reviewed in formulating compliance with this standard: Acknowledgement of Receipt of Orientation</p> <p data-bbox="242 360 699 389">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="242 418 497 448">Idaho Maintaining Dignity</p> <p data-bbox="242 477 954 506">Residents PREA Handbook Acknowledgement of Receipt of Handbook</p> <p data-bbox="242 535 1445 595">Management and Training Corporation (MTC) Policy 903E.02 Ensuring Safe Prisons MOU with Advocate Against Family Violence</p> <p data-bbox="242 624 1123 654">Victim Advocacy PREA posters (English and Spanish) Victim Advocate Certificate (staff)</p> <p data-bbox="242 683 1490 909">115.53 (a): IDOC and MTC policies addresses the agency/facility's policy 903E.02 Ensuring Safe Prisons provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. The facility enables reasonable communication between the inmates and these agencies in a confidential manner. The offenders are informed by the facility and according to interviews with the Advocate Against Family Violence staff of the extent to which communications will be monitored. According to the PREA compliance manager and Advocate Against Family Violence would monitor only to the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.</p> <p data-bbox="242 938 1477 1267">115.53 (b): Residents PREA Handbook provides a phone number and address of Advocate Against Family Violence in the offender handbook and poster located throughout the facility. The auditor called the phone number and spoke with a counselor with the Advocate Against Family Violence from the inmate telephone system. The staff indicated she would request the resident purpose of the call so she could forward to the appropriate persons. I asked if I could speak with a counselor or a staff that provides emotional support. She indicated the staff that provides that service was assisting another victim and she would take by number, and I could be placed on hold, and she would see if another staff was available. I thanked her, however, I did not want to tie a up a staff member, as I was an auditor verifying services. Later I talked to the administrative office and the staff member explained they keep one staff available to answer emotional support or direct victims of domestic abuse to the correct office and the other staff are available assisting victims normally on an appointment basis.</p> <p data-bbox="242 1296 1490 1460">115.253 (c): The facility has a MOU with Advocate Against Family Violence through Idaho Department of Corretiosn. to provide emotional support. Interviews with the center indicated their staff are trained prior to providing any victim advocacy or emotions support services. The center indicated that offenders that call or write their office are provided with emotional support during the call and the center would work with the facility to set up a time for a victim emotional support staff member to visit with the offender or talked to the offender in a private office.</p> <p data-bbox="242 1489 1469 1550">Compliance was determined by review of handbook, poster located throughout the center and interviews with the Advocate Against Family Violence.</p>

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 318">The following policies, directives and documentation was reviewed in formulating compliance with this standard:</p> <p data-bbox="229 318 1509 380">Management and Training Corporation (MTC) Policy 903E.02 Ensuring Safe Prisons MTC PREA Website</p> <p data-bbox="229 380 1509 443">Third Party reporting posters</p> <p data-bbox="229 443 1509 506">MOU Sheriff's Association</p> <p data-bbox="229 506 1509 568">MOU with Advocate Against Family Violence</p> <p data-bbox="229 568 1509 631">IDOC Policy 325OM-01 Ensuring Safe Prison</p> <p data-bbox="229 631 1509 694">Terry Rilley MOU</p> <p data-bbox="229 694 1509 855">115.54 (a): Third party information is being provided to all visitors regarding their family members that are incarcerated at ICAPP by an agency website. If at any time an inmate makes an allegation of being a victim of a sexual assault or sexual harassment and does not feel comfortable telling, writing, or using the posted hotline, the family member can make an official report on the inmate's behalf by contacting assigned staff. All sexual abuse or sexual harassment reports are done discreetly to not compromise the offender.</p> <p data-bbox="229 855 1509 1016">Family and friends can contact the facility administrator or PREA compliance managers or file a grievance on behalf of the inmates. This information is posted in areas visible to staff and visitor Poster include anyone needed to report abuse/ sexual harassment or to report an allegation of Sexual Abuse/ Sexual Harassment on behalf of an individual who is or was housed in any MTC facility or program, may contact the Facility Administrator's Office in the facility where the alleged incident occurred or where the individual is housed.</p> <p data-bbox="229 1016 1509 1214">The family and friends may telephone or by mail to Sheriff's Association, Advocate Against Family Violence or MTC coordinator. There are posters located in the visitation room and the lobby providing information to third party reporting. The auditor called the 800 number for families to call and reached the special investigative unit of IDOC. The staff indicated they handle all family concerns and are the investigative unit including PREA for IDOC. I called the PREA coordinator phone numbers for families and reached the PREA coordinator for IDOC's office number.</p> <p data-bbox="229 1214 1509 1352">Compliance was determined by review of the postings, reviewing the websites and interviews with PREA coordinator, calling the third-party phone numbers, PREA compliance manager of warden. I reviewed the MTC reporting website and found it to be operational.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard: Management and Training Corporation (MTC) Policy 903E.02 Ensuring Safe Prisons</p> <p>PREA Lesson Plan</p> <p>IDOC Policy 325 -OM -01 Ensuring Safe Prison</p> <p>Idaho Maintaining Dignity</p> <p>Investigative Worksheets</p> <p>Statement of Fact Staff Report</p> <p>115.61 (a): IDOC Policy 325 -OM -01 mandates staff, volunteers and contractors must take all allegations of sexual abuse and sexual harassment seriously and are required to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment and any retaliation against inmates or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This information is to be reported the Shift Supervisor, the PREA Compliance Manager, facility executive staff or directly to IDOC. In interview with random staff, volunteer, and contractors, they knew their reporting duties. Staff receive training on reporting. MTC have implemented a specialized training program for medical and mental health professionals that includes duties to report, State's vulnerable persons reporting duties and confidential reporting duties. The facility provided a statement of fact that there have been no allegations by vulnerable persons in the last 12 months.</p> <p>115.61 (b): Policy and training mandates that apart from reporting to designated supervisors, staff are not to reveal any information related to a sexual abuse report to anyone. Staff, volunteers and contractors interviewed knew this information is to be kept confidential and knew whom to report allegations.</p> <p>115.61 (c)(d): Medical specialized medical training includes medical staff are required to report sexual abuse and to inform inmates of their duty to report and the limitations of confidentiality at the initiation of services. The training also provides reporting of a vulnerable adult under a State or local vulnerable persons statute, under applicable mandatory reporting laws. The facility does not house inmates under the age of 18. Medical and mental health staff interviewed confirmed this practice. The Nurse indicated that the inmates sign a statement that includes her limitation of confidentiality.</p> <p>115.61 (e): In interview with the facility administrator and his executive team, ICAPP reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports to the facility investigators, MTC PREA coordinator or regional supervisor and IDOC. There are staff reporting posters located facility. Staff carry a PREA card with this information for easy reference in making reports.</p> <p>According to statement of fact there have been no reports from third parties, contractors or volunteers in the last 12 months. Compliance was determined by review of the policies, training curriculum and interviews with random staff, medical staff, and facility administrator. Interviews with the Agency PREA coordinator and agency head confirmed that MTC mandates staff, volunteers, and contracts report all sections of this standard.</p>

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 353">The following policies, directives and documentation were reviewed in formulating compliance with this standard: MTC Policy 203.2 Anti-Harassment</p> <p data-bbox="229 353 1509 416">IDOC Policy 325 - OM-01 Ensuring Safe Prison</p> <p data-bbox="229 416 1509 479">PREA Lesson Plan</p> <p data-bbox="229 479 1509 542">Staff Report</p> <p data-bbox="229 542 1509 604">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="229 604 1509 667">Statement of Fact</p> <p data-bbox="229 667 1509 801">115.62 (a IDOC Policy 325 - OM - 01 Ensuring Safe Prison and MTC Policy 903E.02 Ensuring Safe Prisons mandates when the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the alleged victim. All allegations of sexual abuse are to be handled in a confidential manner and conversations with the victim sensitive, supportive, and nonjudgmental.</p> <p data-bbox="229 801 1509 1160">The PAQ indicated in the past 12 months there were two times when it was necessary for the facility to take immediate action regarding an inmate being in substantial risk of sexual abuse. On both occasion the action was taken within 1 hour. The alleged victim was placed in a safe area, while the shift supervisor called the on-call staff and warden to determine the best way of providing protection of the alleged victim. The facility administrator stated that if it was suspected an inmate was at substantial risk of sexual abuse, he would immediately move the inmate to safe area and investigate. Staff interviewed was aware of their responsibilities if they felt an inmate was at risk for sexual abuse. Random staff and shift supervisor indicated the inmate that was in imminent danger would be separated from the accuser and would be moved to a safe location until it could be investigated and determine if the inmate can be placed in another dormitory, if the staff needed to be placed on administrative leave, if the predator needed to be moved off the campus or if the victim needed to be moved pending the investigation.</p> <p data-bbox="229 1160 1509 1240">Compliance was determined by review of policy and interviews with the MTC agency head, PREA coordinator, facility administrator, random staff, and SHU Lt.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>IDOC Policy 350-OM-01 Ensuring Safe Prison</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons Statement of Fact</p> <p>115.63 (a)-(c): Policy 350-OM-01 Ensuring Safe Prison mandates on receiving an allegation that an inmate was sexually abused while confined at another facility, the incident will be reported to the PREA Compliance Manager. The Facility administrator will notify the agency or facility head where the abuse is alleged to have occurred. but no later than 72 hours of receiving the allegation. The PREA Compliance Manager will maintain documentation that notification was made and include all actions taken regarding the incident. Copies of this documentation will be forwarded to the OIG.</p> <p>115.63 (d): Interview with the facility administrator and PREA compliance manager they indicated along with notification to the sending facility director the facility administrator will notify IDOC and will document notification of an allegation of sexual abuse or sexual harassment and offer to provide whatever services needed by the facility investigator during the investigative process.</p> <p>According to the PAQ and statement of fact there have been no allegations of inmate being sexually abused while confined at another facility and no allegations that an offender was sexually abused at ICAPP.</p> <p>Compliance was determined by review of the policy and interviews with intake staff, PREA compliance manager, agency head, PREA coordinator and warden.</p>

115.64	Staff first responder duties
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 686 356">MTC Policy 903 E.02 Ensuring Safe Prisons</p> <p data-bbox="242 383 938 412">Policy 350 -OM-01 Ensuring Safe Prison PREA First Responder Card</p> <p data-bbox="242 439 823 468">Staff Training Volunteer Training Contractor Training PAQ</p> <p data-bbox="242 495 424 524">Statement of Fact</p> <p data-bbox="242 551 1441 616">Policy 350 - OM-01 Ensuring Safe Prison and staff training requires that correction staff that are the first responders of a sexual assault shall:</p> <ul data-bbox="242 642 1485 1048" style="list-style-type: none"> <li data-bbox="242 642 759 672">· Separate the alleged victim and abuser, <li data-bbox="242 698 1485 831">· Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, 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, <li data-bbox="242 857 1441 956">· 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. <li data-bbox="242 983 1445 1048">· Notify the closest correctional staff and the shift supervisor by telephone or in person and tell only those staff need to know in assisting you in carrying out these responsibilities. <p data-bbox="242 1075 1374 1140">Staff are issued a card that includes steps to take as first responders. All random staff were able to articulate their responsibilities and have received training on preserving and protecting the crime scene.</p> <p data-bbox="242 1167 1474 1232">115.64 (b): Staff training requires that non correctional staff that are first responders are required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.</p> <p data-bbox="242 1258 1485 1420">All non-contact staff interviewed that were interviewed knew their duties and reported they received the training during yearly in service and on reminder training that is sent out by the PREA compliance managers from time to time. During the last 12 months there were 2 allegations of sexual abuse or sexual harassment that were reported to correctional staff. There were two allegations of sexual abuse in which non correctional staff were the first responders. There was no allegation in which there was sufficient time for collection of usable evidences.</p> <p data-bbox="242 1447 1466 1608">Compliance was determined by review of the policies and training and by interviewing non-contact staff during the onsite audit. As an auditor I randomly tour the administrative, classification area and educational areas and ask staff if I could ask them a question. After reminding them that they don't have the answer the questions I ask them, "what would you do if an inmate came to you and said it was sexual assaulted". All staff were able to articulate they would follow the above requirements.</p>

115.65	<p>Coordinated response</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>IDOC Policy 325-OM-01 Ensuring Safe Prison</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>IDOC PREA Coordinated Response Plan Checklist</p> <p>115.65 (a): Policy 325-OM-01 Ensuring Safe Prison mandates that facilities have a coordinated response plan. ICAPP Coordinated Response Plan provides written guidance to staff and administration regarding actions to take and notifications to be made. A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are carried out and proper notifications are made. The Coordinated Response Plan includes:</p> <p>Action required after report of sexual abuse Initial response</p> <p>Shift supervisors Responsibility Facility Crime Scene</p> <p>Notification required when a sexual abuse is alleged Evidence Protocol</p> <p>Medical Response Mental Health Response</p> <p>Investigative Responsibilities</p> <p>Responsibilities when sexual harassment is alleged Responsibilities when sexual activity is alleged</p> <p>Each of the above responses includes but not limited to staff, contractors, victim advocates, investigative staff, and MTC PREA coordinator</p> <p>A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are carried out and proper notifications are made. The Chief of Security, Lieutenants, the PREA Compliance Manager, the Lead Investigator, and members of the administrative staff are responsible to ensure compliance to the plan. Staff interviewed confirmed that they are knowledgeable of the plan and the necessary actions to be taken in response to an allegation of sexual abuse.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Statement of Fact</p> <p>MTC and or the facility did not enter into a collective bargaining agreement or other agreements that would limit the agency's ability to remove an alleged staff sexual abuser from contact with any inmate pending the outcome of an investigation. Per the statement of fact, ICAPP does not participate in collective bargaining agreements.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard: MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Documentation of Monitoring Protection from Retaliation Logs</p> <p>Policy 325-OM-01 Ensuring Safe Prison</p> <p>Statement of Fact</p> <p>115.67 (a): IDOC and ICAPP have policies, logs and computer data base to insure that inmates and staff receive monitoring to protect inmates or staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. The policy provides procedures to protect individual in ICAPP. ICAPP designated a retaliation monitor.</p> <p>115.67 (b): The procedure states the agency has multiple protection measures, such as housing changes or transfers for inmates, victims or abusers, removal of alleged staff or inmate abusers from contact with victims and emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures to protect that individual against retaliation are put in place.</p> <p>115.67 (c): Inmates who allege sexual abuse will be monitored by the PREA Compliance Manager who will meet weekly with the alleged victim beginning the week following the incident and continue monitoring for at least 90 days or longer if there is a continuing need. The Human Resource Manager and Warden will monitor conduct and treatment of employees who reported staff misconduct or employee witness who cooperate with these investigations every 30 days for 90 days. Retaliation monitoring of inmates is documented with the investigative files.</p> <p>115.67 (d): Procedure also requires Monitoring of inmates includes periodic status checks. The Retaliation monitors was interview and indicted she would review the monitoring logs on the data base on an ongoing basis and randomly will see the inmate during tour to check on his/her status.</p> <p>115.67 (e): Retaliation monitoring may be terminated if it is determined that the allegation was unfounded. The Retaliation monitor indicated while the official monitoring will end, the facility would continue to check on the inmate for retaliation for making a report. During the last 12 months that has been five (5) relation monitoring conducted. The monitors were weekly, biweekly and monthly.</p> <p>In interview with Retaliation Monitor, the PREA Compliance Manager and the Human Resource Manager and information provided on the Pre-Audit Questionnaire, in the past 12 months there were no incidents of retaliation that occurred.</p> <p>Compliance was determined by review of the monitoring logs, agency policy and procedures, investigative files and interviews with the retaliation monitor, agency head, and facility administrator.</p>

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 318">The following policies, directives and documentation were reviewed in formulating compliance with this standard</p> <p data-bbox="229 318 1509 380">Policy 325- OM-01 Ensuring Safe Prison</p> <p data-bbox="229 380 1509 443">Statement of Fact</p> <p data-bbox="229 443 1509 506">PAQ</p> <p data-bbox="229 506 1509 792">115.68 (a): Policy 325- OM-01 and MTC Policy 903E.02 requires involuntary segregated housing may be used only after an assessment of available housing alternatives has shown there is no other means of protecting the inmate. 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. The facility has not utilized volunteer or involuntary restrictive housing for a PREA related incident or for protection of inmates for sexual abuse in the last 12 months. This was verified by statement of fact, PAQ, and Restrictive Housing Unit LT. A review of the logs for residents in the Restrictive Housing Unit housed two residents in restrictive housing unit pending investigation for over 24 hours but less than 28 hours pending investigation for sexual abuse. The investigation revealed that is was consensual sex.</p> <p data-bbox="229 792 1509 869">Compliance was determined by review of the PAQ and interviews with Segregation supervisor and warden.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

MTC Policy 903E.02 Ensuring Safe Prisons

IDOC Policy 125-ADMIN- Investigating Serious Incidents

Tracking log

Administrative Investigative Reports PAQ

115.71 (a): MTC Policy 903E.02 Ensuring Safe Prisons requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment at the ICAPP, promptly, thoroughly, and objectively, including third party and anonymous reports. IDOC and the facility is responsible for conducting administrative sexual abuse investigations and ADA Sheriff's office has the responsibility to conduct criminal investigations at ICAPP.

115.71 (b): The facility has two (2) trained investigators and facility investigators have completed specialized training in the investigation of sexual abuse allegations. The facility provided documentation of completion of specialized investigative training completed by facility investigators. The investigators were interviewed and were extremely knowledgeable regarding conduct investigations in a confinement setting.

115.71 (c): It is the responsibility of Investigators or ADA Sheriff's office, with the assistance of the facility investigators to gather and preserve circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Investigator will interview alleged victims, suspected perpetrators and witnesses and review prior reports of sexual abuse involving the suspected perpetrator.

115.71 (d): When the quality of evidence supports criminal prosecution, ADA Sheriff's office may conduct compelled interviews only after consulting with prosecutors.

115.71 (e): The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff. An inmate who alleges sexual abuse is not required to submit to a polygraph examination.

115.71 (f): In interviews with the investigators, they indicated that investigator review an effort to determine whether staff actions or failures to act contributed to the abuse. The administrative investigation shall be documented in a written report and include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

115.71 (g): A criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial and documentary evidence. The facility shall request a copy of completed investigative reports from OIG. Allegations will be tracked on the PREA Tracking Log.

115.71 (h): Substantiated allegations of conduct that appears to be criminal shall be referred for criminal prosecution. On information reported on the Pre-Audit Questionnaire there were no allegations that were referred for prosecution.

115.71 (i): The agency will retain all written reports as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71 (j): The departure of an alleged abuser or victim from employment or control of the facility or agency, shall not provide a basis for terminating an investigation

115.71 (l): When outside agencies investigate sexual abuse allegations, the facility will cooperate with investigators and will try to remain informed about the progress of the investigation. In interview with the PREA Coordinator, she reported that facilities are required to check in with outside investigators at a minimum of every 30 days and document that contact was made to ensure that requirements such as retaliation monitoring and notices of outcome of investigations are completed as required.

In interview with facility investigators, they were knowledgeable of their responsibilities of conducting administrative investigations of all allegations received and knew when to refer allegations that appear to be criminal for criminal investigation. The facility utilizes facility investigators and ADA Sheriff's office to conduct investigations.

Compliance was determined by review of the agency policy and procedures, training curriculum, PAQ, investigative reports and interviews with facility investigator and agency head designee, PREA coordinator and facility administrator.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 271 1366 297">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="244 329 699 356">MTC Policy 903E.02 Sexual Safety in Prisons</p> <p data-bbox="244 387 616 414">Investigator and Investigation Criteria</p> <p data-bbox="244 445 608 472">Administrative report of investigation</p> <p data-bbox="244 504 552 530">Investigator training curriculum</p> <p data-bbox="244 562 1449 651">115.72 (a): Based on Investigator and Investigation criteria and Investigator training the facility shall impose no standard higher than the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. In interview with facility investigators, they confirmed this practice.</p> <p data-bbox="244 683 1321 710">Compliance was determined by review of policy, training curriculum, and interview with trained investigators.</p>

115.73	Reporting to inmates
	<p data-bbox="240 143 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 239">Auditor Discussion</p> <p data-bbox="240 271 1485 331">The following policies, directives and documentation were reviewed in formulating compliance with this standard: MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="240 360 651 392">Policy 325- OM-01 Ensuring Safe Prison</p> <p data-bbox="240 421 564 452">Administrative Investigative files</p> <p data-bbox="240 481 293 512">PAQ</p> <p data-bbox="240 542 601 573">Notice of Outcome of Investigations</p> <p data-bbox="240 602 1490 752">115.73 (a): MTC Policy 903E.02 Ensuring Safe Prisons indicate that following an investigation of sexual abuse of an inmate, the inmate shall be informed in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The facility investigator is responsible for preparing the Notification of Outcome of Allegation form and presenting it to the alleged victim for his signature. The inmate receives a copy of the form, and a copy is forwarded to the PREA Coordinator office.</p> <p data-bbox="240 784 1442 844">115.73 (b): According to policy and PREA compliance manager if the facility did not conduct the investigation, the facility shall request the relevant information from the investigative agency in order to inform the inmate</p> <p data-bbox="240 875 1490 1104">115.73 (c): Per the procedures, every allegation is investigated, and every investigated allegation outcome was reported to the inmate with a finding as to whether it was substantiated, unsubstantiated or unfounded. if the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at the facility, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the inmate allegation is against an inmate, the facility shall inform the inmate whenever the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="240 1135 1490 1227">115.73 (d): Policy and procedure requires following an inmate's allegation that he has been sexually abused by another inmate, the agency will inform the alleged victim if the alleged abuser has been indicated on a charge related to sexual abuse within the facility or if the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="240 1258 1490 1321">115.73 (e): All Notification of Outcome of Allegation or attempted notifications are documented and filed in the corresponding investigative file. There were 4 notifications during the last 12 months.</p> <p data-bbox="240 1352 1442 1413">Compliance was determined by review of the agency and facility policy and interviews with PREA compliance managers, investigators, and facility administrator and review of investigative files and notice of outcome memos.</p>

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 353">The following policies, directives and documentation were reviewed in formulating compliance with this standard: Policy 325-OM-01 Ensuring Safe Prison</p> <p data-bbox="229 353 1509 398">MTC Policy 903E.02 Ensuring Safe Prisons MTC Policy 203 .1 Rules of Conduct</p> <p data-bbox="229 398 1509 488">115.76 (a): MTC Policy 203 .1 Rules of Conduct establishes the standard that employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policy.</p> <p data-bbox="229 488 1509 577">115.76 (b): Based on policy termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p data-bbox="229 577 1509 734">115.76 (c): Based on policy and facility administrator and human resources staff disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than engaging in sexual abuse) shall be commensurate with the nature and circumstances of the act committed, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p data-bbox="229 734 1509 824">115.76 (d): All terminations for violations of the agency's policies on sexual abuse and sexual harassment, or resignations, shall be reported to law enforcement and licensing agencies unless the activity was clearly not criminal.</p> <p data-bbox="229 824 1509 958">In interview with the facility administrator and in information provided on the Pre-Audit Questionnaire, in the past 12 months, one staff member was terminated or received any adverse action due to employee misconduct. Staff training includes personnel policies involving violation of PREA standards or having any sexual activity with offenders.</p> <p data-bbox="229 958 1509 1050">Compliance was determined by interviews with Warden, PREA compliance manager, Human Resources Director, and review of the investigative reports.</p>

115.77	<p>Corrective action for contractors and volunteers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following policies, directives and documentation was reviewed in formulating compliance with this standard: MTC Policy 203 .1 Rules of Conduct</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Policy 325- OM-01 Ensuring Safe Prison</p> <p>Policy 325- OM-01 Ensuring Safe Prison</p> <p>PREA training curriculum</p> <p>PAQ</p> <p>Statement of Fact</p> <p>115.77 (a): 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. Any contractor or volunteer who engages in sexual abuse even though it was not criminal will be reported to professional licensing/certifying bodies.</p> <p>115.77 (b): In cases that were not criminal in nature, the facility would take appropriate remedial measures and consider whether to prohibit further contact with inmates.</p> <p>During the previous year, there no incident where a contractor or volunteer was accused of, suspected, or found guilty of sexual abuse or sexual harassment at ICAPP. Compliance was determined by review of the volunteer and contractor training and statement acknowledging violation of PREA standards. Also interviews with contractors, PREA compliance manger and facility administrator confirm compliance with this standard.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Auditor Discussion The following policies, directives and documentation was reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Statement of Fact Offender Handbook</p> <p>IDOC Policy 325 -OM -01 Ensuring Safe Prison</p> <p>Posters located throughout the facility</p> <p>115.78 (a): According to ICAPP rules and sanctions, if a resident is found guilty of engaging in sexual abuse involving another resident, either through administrative or criminal investigations, the offender will be subject to formal disciplinary sanctions. The Offender Program Handbook outlines violations a resident will be disciplined for and the sanctions to be imposed.</p> <p>115.78 (b): Sanctions will be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history and the sanctions imposed for comparable offenses by other residents with similar histories.</p> <p>115.78 (c): Based on offender discipline, the disciplinary process may consider whether an individual's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.</p> <p>115.78 (d): If the facility offers counseling or other interventions designed to address the reasons or motivations for the abuse, the facility shall consider requiring the offending individual to participate. The Idaho Department of Corrections will determine if the resident will be required to participate in counseling or other interventions designed to address the reasons or motivations for the abuse.</p> <p>115.78 (e): Disciplining a resident for sexual contact with an employee is prohibited unless it is found that the employee did not consent to the contact.</p> <p>115.78 (f): A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>115.78 (g): The agency prohibits all sexual activity between residents. Facilities may not deem that sexual activity between offenders is sexual abuse unless it is determined that the activity was coerced. In information provided on the Pre-Audit Questionnaire and in interview with the Facility Director, in the past 12 months there were no disciplinary sanctions imposed for residents violating the sexual abuse policies.</p> <p>Compliance was determined by review of the policy, review of an incident report and interviews with the investigator, PREA compliance manager and facility administrator.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Sexual Safety in Prison MTC Policy 904E.310 Sexual Abuse/Assault PREA training curriculum</p> <p>IDOC Policy 325- OM-01 Ensuring Safe Prison</p> <p>Email from Intake staff notifying a Mental Health referral Mental Health evaluation notes</p> <p>115.81 (a): If during initial PREA screening, the offender reports prior sexual victimization, whether in an institutional setting or in the community, staff will ensure the offender will be referred to mental health for further evaluation within 14 days. In review of the 30-day follow-up assessments the offender discloses prior victimization not reported during initial screening, the PREA Compliance Manager will refer the offender to mental health for further evaluation. Medical and the Mental Health Provider, according to their professional judgement, determine the nature and scope of these services. In information reported on the Pre-Audit Questionnaire, 100% of the offenders assigned to the facility in the past 12 months who disclosed prior victimization were offered a follow-up meeting with the Mental Health Provider.</p> <p>115.81 (b): Any offender who reports during initial PREA screening or in follow-up screenings he has previously perpetrated sexual abuse in an institutional setting or in the community will offered a follow meeting with medical or mental health within 14 days of the screening. There was no offender that claims he perpetrated a sexual abuse.</p> <p>115.81 (d): Information related to sexual victimization or abusiveness in an institutional setting is limited only to medical and mental health practitioners and other employees as necessary to inform treatment plans, security and management decisions or otherwise federal, state or local law.</p> <p>115.81 (e): Medical and mental health providers obtain consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting. Offenders have a right to refuse these services.</p> <p>Based on interview with medical provider that coordinates for mental health services offenders who report prior sexual victimization and those who disclose previously perpetrating sexual abuse are being referred for evaluation and consent forms or refusals are being obtained. The mental health staff are available during the intake process and conduct suicide screening and interviews with transgender offenders. In interview with the mental health provider, typically the mental health staff will interview offenders with history of victimization during their intake process. However, the facility is required to forward a referral in order to comply with the Offender data base.</p> <p>Compliance with this standard was based on policies, mental health referrals, interview with the medical administrator, intake staff and PREA compliance manager.</p>

115.82	<p>Access to emergency medical and mental health services</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Staff Training - Immediate Response</p> <p>MTC Policy 903E.02 Ensuring Safe Prisons</p> <p>Coordinated Response Plan</p> <p>IDOC Policy 325- OM-01 Ensuring Safe Prison</p> <p>Statement of Fact</p> <p>115.82 (a): IDOC, MTC and ICAPP coordinated response plan provide a procedure for Victims of sexual abuse to receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Medical and mental health providers, according to their professional judgement, determine the nature and scope of these services.</p> <p>115.82 (b): All staff first responders are trained to take preliminary steps to protect the victim. Security staff first responders are to take preliminary steps to protect the victim and notify facility medical and mental health staff immediately. The Mental Health Provider would present a Consent to Evaluate: Sexual Abuse Allegation form to the alleged victim prior seeking their consent to conduct a mental health evaluation of an alleged victim of sexual abuse.</p> <p>115.82 (c): Offender victims are offered prophylactics for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate. Medical staff indicated that is part of the SANE process and she would follow up when the offender returns to the facility.</p> <p>115.82 (d): Based on review of policy and in interviews with PREA compliance manager all services are provided without financial cost to the victim, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Compliance was determined by review of the coordinated response plan, MOU with Woman’s Center and agreement with St. Alphonsus Medical Center. Compliance was also determined by interviews with nurse, first responders, random staff, PREA compliance manager and facility administrator. The facility provided a statement of fact that there has been no request for emergency and mental health services.</p>
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115.83	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Policy 325- OM-01 Ensuring Safe Prison</p> <p>MTC Policy 903E.02 Sexual Safety in Prisons Offender Handbook</p> <p>Centurium Contract for Services</p> <p>115.83 (a): The facility offers ongoing medical and mental health care to all residents who have been victimized by sexual abuse.</p> <p>115.83 (b): According to contract for services it includes the evaluation and treatment would include follow-up services, treatment plans and referrals for continued care upon transfer or release. According to the mental health and medical administrator medical and mental health care provided is consistent with the community level of care.</p> <p>115.83 (d): The facility houses males at this time. Per interview with the medical staff If an offender were to be sexual abused or consensual sexual activity the facility would provide the appropriate services as required by the standard.</p> <p>115.83 (e): The facility house males at this time.</p> <p>115.83 (f): Resident victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate.</p> <p>115.83 (g): All services will be provided without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>115.83 (h): The facility attempts to conduct a mental health evaluation of all known abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate.</p> <p>On information provided by the PREA Compliance Manager, in the past 12 months, there were no residents who required ongoing medical or mental health treatment due to being victimized by sexual abuse.</p> <p>Compliance was determined by review of the MTC and Centurium Health Care Policies, interviews with medical and mental health staff and review of investigative folder.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Exceeds Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 318">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="229 318 1509 380">Administrative Investigative Report</p> <p data-bbox="229 380 1509 443">Report of Investigation</p> <p data-bbox="229 443 1509 506">After Action Review (Incident Team Meeting)</p> <p data-bbox="229 506 1509 568">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="229 568 1509 631">IDOC Policy 325- OM-01 Ensuring Safe Prison</p> <p data-bbox="229 631 1509 837">115.86 (a-b MTC Policy 903E.02 Ensuring Safe Prisons and IDOC Policy 325- OM-01 Ensuring Safe Prison requires facility to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation in which the allegation has been determined to be substantiated or unsubstantiated within 30 days of the conclusion of the investigation. At the time of the PAQ there was one (1) allegations of sexual abuse in the last twelve month that required an incident review team meeting at the time of the audit. An incident team meeting was completed on all substantiated and unsubstantiated investigations.</p> <p data-bbox="229 837 1509 954">115.86 (c): The Incident Review Committee consists of the facility administrator, Chief of Security, PREA Compliance Manager, Lead Investigator, Unit Manager, Classification Supervisor and the nurse, and the PREA Coordinator may attend via telephone or in person.</p> <p data-bbox="229 954 1509 1115">115.86 (d): The team considers whether the incident was motivated by race, ethnicity, gender identity, perceived status or gang affiliation. The team examines the area where the incident was alleged to have occurred and assesses whether physical barriers in the area may have contributed to the abuse, whether monitoring technology should be deployed or augmented and whether the staffing levels at the time of the incident were adequate.</p> <p data-bbox="229 1115 1509 1240">115.86 (e): The facility will implement the recommendations for improvement or documents the reasons for not doing so. When interviewed, the members of the incident review team knew their responsibilities as they relate to the review of sexual abuse incidents.</p> <p data-bbox="229 1240 1509 1352">Exceed compliance was determined by agency and facility policies, IDOC investigative data base which mandates after action reports on all allegations of sexual abuse except when they are unfounded and review of the incident review team meeting.</p>

115.87	Data collection
	<p data-bbox="240 145 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 1414 331">The following policies, directives and documentation was reviewed in formulating compliance with this standard: MTC Corporate Annual Report</p> <p data-bbox="240 360 443 389">PREA Tracking Log</p> <p data-bbox="240 418 679 448">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="240 477 1490 703">115.87 (a): MTC Policy 903E.02 mandates that all facilities under the MTC umbrella collects uniform data for every allegation of sexual abuse at all facilities under their control. MTC requires facilities to utilize a standardized instrument that includes clearly defined definitions. The incident-based data collected shall include, at 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. The PREA Manager has the responsibility to complete statistics regarding areas of increased activity related to offender aggression or other similar incidents in or to identify problem areas on the facility. MTC was requested to provide the PREA Survey information in 2021 and complied with the request.</p> <p data-bbox="240 732 1474 896">115.87 (b): The PREA Compliance Manager ensures that the data is compiled and forwarded to the PREA Coordinator monthly on the Monthly PREA Incident Tracking Log. In addition to submitting the Monthly PREA Incident Tracking Log, the PREA Compliance Manager ensures that a PREA Survey is created, updated, and submitted for review and approval in the PREA Portal for every allegation of sexual abuse, sexual harassment and sexual activity. At least annually, the PREA Coordinator aggregates this data.</p> <p data-bbox="240 925 1426 985">115.287 (c): The data collected, will be at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS).</p> <p data-bbox="240 1014 1445 1075">115.287 (d): The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="240 1104 1485 1164">115.287 (e): This provision of this standard is not applicable to this facility. The agency does not contract for the confinement of offenders.</p> <p data-bbox="240 1193 1493 1254">115.287 (f): Upon request, MTC shall provide such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p data-bbox="240 1283 1485 1382">The facility provided a copy of the annual log for review. The log contained all elements required by policy. The review of the log. Response to the Bureau Justice Request of PREA Survey and interview with PREA compliance manager and PREA coordinator confirmed compliance with this standard.</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1508 255">Auditor Discussion</p> <p data-bbox="229 255 1508 318">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="229 318 1508 380">MTC Policy 903E.02 Sexual Safety in Prison</p> <p data-bbox="229 380 1508 443">MTC Annual PREA Data Report Management Year by Site Data Collection</p> <p data-bbox="229 443 1508 595">115.288 (a): MTC reviews all of the data collected from all of its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training by identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings. This information is provided in the annual report.</p> <p data-bbox="229 595 1508 703">115.288 (b): The PREA Coordinator reviews the data collected and the annual report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.</p> <p data-bbox="229 703 1508 810">115.288 (c): The PREA Coordinator forwards the annual report to the Senior Vice President of MTC Care and to President for approval. The report is made public on the MTC website at https://www.mtctrain.com/prea.</p> <p data-bbox="229 810 1508 896">115.288 (d): Before making aggregated sexual abuse data public, all personal identifiers are redacted as stated on the last page of MTC's annual report.</p> <p data-bbox="229 896 1508 1014">Compliance of this standards was determined by reviewing annual reports for MTC, review the facility policy and interviews with the PREA coordinator and PREA compliance manager. The MTC annual report provides more information than is required and at the same time provides the person reviewing the report a detailed look at PREA in action in MTC facilities.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>MTC Policy 903E.02 Sexual Safety in Prison MTC Annual PREA Data Report Management Year by Site Data Collection</p> <p>ODS computerized program</p> <p>115.289 (a): MTC Policy 903E.02 Sexual Safety in Prisons and Safe Prisons/PREA -data collection ensures that data collected are securely retained for at least 10 years according to MTC policy.</p> <p>115.289 (b): MTC makes all aggregated sexual abuse data from all its facilities made public annually on their website at https://www.mtctrain.com/prea. A review of the website confirmed that the agency has PREA reports from 2017 until 2021 uploaded in the above website.</p> <p>115.289 (c): Before making aggregated sexual abuse data public, MTC removes all personal identifiers.</p> <p>115.289 (d): MTC Policy 903E.02 ensures that data collected are securely retained for at least 10 years.</p> <p>Compliance was determined by review of three (3) annual report, corporate policy and interview with the Agency PREA Coordinator.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 453 237">Auditor Discussion</p> <p data-bbox="242 273 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 679 353">MTC Policy 903E.02 Ensuring Safe Prisons</p> <p data-bbox="242 385 456 412">PREA Audit Postings</p> <p data-bbox="242 443 1487 640">115.401 (a): MTC Policy 903E.02 require during the three-year period starting on August 20, 2013, and each three-year period thereafter, MTC’s Contract Compliance Department ensures that a PREA auditor who has been certified through the Department of Justice audits each facility at least once. The initial PREA audit of ICAPP which was conducted in July 2016 by a DOJ certified PREA auditor. The second audit was conducted in July 2019 by a DOJ Certified auditor. This is the third audit of this facility and is being conducted by a certified PREA auditor. The onsite audit was conducted on July 27- July 29, 2022. This auditor’s recertification was effective January 1, 2022. This is the third certification or recertification of this auditor.</p> <p data-bbox="242 667 1477 864">115.401 (b): According to MTC’s PREA Coordinator and the annual PREA report, during the three-year period beginning on August 20, 2013, MTC ensured that each of its facilities were audited at least once and continues to ensure that its facilities are audited every three years. During the last cycle many audits were scheduled, rescheduled, and postponed due to the pandemic. However, each facility was audited during the last 3-year cycle. This audit was conducted in the third year if the PREA cycle. The final report was submitted to MTC the first week of the first year of the present cycle. According to MTC coordinator all facilities are scheduled to be audited during this cycle.</p> <p data-bbox="242 891 1484 954">115.401 (h): During the audit, I was allowed access to all areas of Facility. I was allowed to visit areas throughout the facility during the official tour and additional visits to different areas of the facility while interviewing and observing camera locations.</p> <p data-bbox="242 981 1433 1043">115.401 (i): I requested personnel files, resident files, training records, investigation files, logbooks, and pertinent forms utilized to carry out the requirement of the audit process. Each document was provided in a timely basis.</p> <p data-bbox="242 1070 1484 1169">115.401 (m): I interviewed random staff on duty for the for the first 24 hours of the audit and random sample of offender during the onsite audit. No offender declined to be interviewed and the facility did not prohibit me from interviewing offenders selected for interview. Interviews were conducted in a private area of the facility.</p> <p data-bbox="242 1196 1471 1258">115.401 (n): Posting were displayed throughout the facility with the name and address of the PREA auditor. The auditor did not receive any correspondences from residents. The information was posted on June 17, 2022.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Per agency policy and standard requirements, MTC ensures me that this final report will be published on their website and be available to the public. The reports from July 2016 and July 2019 audits were located on the MTC website and reviewed by the auditor.

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.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
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)	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.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	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.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does 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 decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, 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

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.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

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

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support 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.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-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 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct 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.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant 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.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (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