PREA Facility Audit Report: Final

Name of Facility: Jefferson City Correctional Center Facility Type: Prison / Jail Date Interim Report Submitted: NA Date Final Report Submitted: 04/20/2017

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.		
Auditor Full Name as Signed: Rhonda Brennan Date of Signature: 04/2		

AUDITOR INFORMAT	AUDITOR INFORMATION		
Auditor name:	Brennan, Rhonda		
Address:			
Email:	RBrennan@idoc.IN.gov		
Telephone number:			
Start Date of On-Site Audit:	02/27/2017		
End Date of On-Site Audit:	02/28/20-17		

FACILITY INFORMATION		
Facility name:	Jefferson City Correctional Center	
Facility physical address:	8200 No More Victims Road, Jefferson City, Missouri - 65101	
Facility Phone		
Facility mailing address:		
The facility is:	 County Federal Municipal State Military Private for profit Private not for profit 	
Facility Type:	 Prison Jail 	

Primary Contact			
Name:	Kelly Morriss	Title:	Deputy Warden
Email Address:	kelly.morriss@doc.mo.gov	Telephone Number:	573-751-3224

Warden/Superintendent			
Name:	Jay Cassady	Title:	Warden
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Facility PREA Compl	iance Manager		
Name:	Kelly Morriss	Email Address:	kelly.morriss@doc.mo.gov

Facility Health Service Administrator			
Name:	Wanda Laramore	Title:	Health Service Administrator
Email Address:	wanda.laramore@doc.mo.gov	Telephone Number:	573-751-3224

Facility Characteristics			
Designed facility capacity:	2052		
Current population of facility:	1941		
Age Range	Adults: 18-83	Youthful Residents:	
Facility security level/inmate custody levels:	C-2/C-5		
Number of staff currently employed at the facility who may have contact with inmates:	588		

AGENCY INFORMATI	AGENCY INFORMATION		
Name of agency:	Missouri Department of Corrections		
Governing authority or parent agency (if applicable):			
Physical Address:	2728 Plaza Drive, Jefferson City, Missouri - 65101		
Mailing Address:	P.O. Box 236, Jefferson City, Missouri - 65102		
Telephone number:	573-751-2389		

Agency Chief Executive Officer Information:			
Name:	Anne L. Precythe	Title:	Acting Director
Email Address:	Anne.Precythe@doc.mo.gov	Telephone Number:	573-526-6607

Agency-Wide PREA	Coordinator Information	n	
Name:	Vevia Sturm	Email Address:	vevia.sturm@doc.mo.gov

AUDIT FINDINGS

Narrative:

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

A Prison Rape Elimination Act Audit of the Jefferson City Correctional Center (JCCC) was conducted from February 27-March 1, 2017. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012. Certified PREA Auditor Ty Robbins assisted with the onsite tour, staff and inmate interviews, and documentation review. It should be noted that the audit is being conducted as part of a multi-state consortium consisting of California, Indiana, Kansas, Louisiana and Missouri.

The auditor wishes to extend its appreciation to Warden Jay Cassaday and his staff for the professionalism they demonstrated throughout the audit and their willingness to comply with all requests and recommendations made by the auditor. The auditor would also like to recognize JCCC Deputy Warden Kelly Morriss (PREA Compliance Manager) for his hard work and dedication to ensure the facility is compliant with all PREA standards.

PRE-AUDIT

The auditor provided the facilities with a Notification of Audit on January 11, 2017. The notification contained information on the upcoming audit and stated that any inmate with pertinent information should mail the auditor at a post office address provided and including the onsite visit date (February 27, 2017). The auditor instructed the facility to post this notification in all housing units and throughout the facilities at least six weeks prior to the onsite audit. During the facility tours, the auditor observed the posting in all housing areas and throughout the facilities. The auditor was advised by the PREA Compliance Managers that the notifications were posted six weeks prior to the onsite audit. During the facilit. During this time, the auditor received one letter from an inmate at the facility. The letter did not concern PREA but facility policy.

Approximately four weeks prior to the onsite audit, the agency and facility initiated the uploading of their policies, as well as other relevant information into the audit tool. Approximately two weeks prior to the onsite audit, the facility provided the auditor with access to the audit tool. Over the next two weeks, the auditor reviewed the questionnaire and all relevant documentation. Prior to the onsite audit, the facility with follow-up questions based on the review of the pre-audit questionnaire and documentation.

ONSITE

On day one of the onsite visit there were 1913 inmates assigned to the facility in Housing Units 1-8 with several more in the Hospital unit (up to 29). The facility reports a 2051 with an average capacity of 1941. There were 1942 inmates on the day of the audit.

An entrance meeting was held the morning of the onsite audit with the following persons in attendance: Warden Jay Cassaday, Deputy Warden Kelley Morriss, MDOC PREA Coordinator Vevia Sturm and several other staff persons for the state and facility. At the meeting the auditor requested and was provided with a listing of all offenders by housing unit and staff rosters for each shift assigned to the facility. In addition to these, a listing of all medical staff, volunteers and staff who monitored for retaliation were provided.

Staff and offenders names were randomly chosen by the auditor from the lists provided. Once the names were identified, these same staff, volunteer and offender names were utilized for the random background, training and offender assessment and education checks. By choosing staff and offenders randomly, it ensured that they would have varied backgrounds and length of service for staff, or length of stay for offenders. Lists of offenders who identified as LGBTI were obtained and a random selection was made to ensure that offenders from general population as well as segregated housing units were conducted. All specialized Medical (one SANE) and Investigative Staff (1 criminal and 2 administrative) were interviewed.

None of the twenty staff or offenders randomly chosen for the interviews declined to be interviewed. The accommodations provided to the auditors allowed for sufficient privacy for the persons being interviewed. The accommodations were also in such a location as to allow a steady stream of staff and offenders to allow for no down time. Throughout the audit, facility staff were great to work with and accommodated the auditor requests.

After the entrance meeting, the audit team was given a tour of all areas of the facility. The team split into two (2) and each auditor took separate areas of the facility to ensure that each area of the facility was visited. The auditor team viewed each housing unit, noting the placement of staff and cameras throughout the facility. In addition the auditor noted the placement of posters outlining reporting and advocacy services provided to the offenders. On each unit, the auditor noted that cross-gender announcements were being made and that the "Notice of PREA Audit" had been clearly posted throughout the tour. The housing units consisted of two floors with general housing providing two-persons rooms. The rooms had a solid metal door with a small window to allow for staff to view into. It was incumbent on staff to make rounds as they would be unable to view into the cells from any distance. Once an offender is outside the cell, the camera coverage in the public areas is excellent. On the segregated housing units, some of the cells were single-cell and others were double with the same configuration on the doors.

In all the housing units, toilets and shower areas had appropriate coverings. Several areas required additional coverings: Chapel restroom, Food Service Restroom and Recreation Gym Restroom. Those areas received additional coverage prior to the completion of the onsite visit. In the hospital unit, the auditor found that the camera allowed for cross-gender viewing but would not show any offenders in a state of undress or utilizing the toilet due to the angle of placement.

In addition to the living units, medical areas, recreation areas, dining rooms, library, control room and program areas were also toured. The auditor noted that PREA reporting information and advocacy services information were provided in these areas as they were on the housing units. The facility also placed signage in areas where female staff worked notifying the offender population of their presence on the unit. On the outer perimeter of the facility is a transportation hub. Offenders from facilities throughout the state are sent to the hub, where they await transport to another facility. Each facility has a separate holding area for the offenders. This was toured as well. Also toured was a cook and chill operation that prepares the food for use throughout the state. Sufficient staffing was found in all areas as well as a large amount of camera coverage. Random staff and offenders were interviewed throughout the tour and all provided information on how to report sexual abuse and harassment, the frequency of supervisory staff

rounds and the opposite gender announcements.

The auditor made several requests for documentary information to clarify several standards, to include housing logs and shift rosters. Prior to the end of the onsite tour, all the information requested was received.

At the exit interview, documentation received was reviewed and discussion was made of the tour observations and the standards reviewed.

POST-AUDIT

After the onsite portion of the PREA audit, this auditor reviewed all notes and documents from the tour, all interviews and reviewed all documentation obtained during the Pre-Audit phase, reviewing their applicability to each standard to ensure that they addressed each requirement. Work on the audit report began.

March 21, 2017, the audit report was submitted to the PREA Resource Center for review. The final report, showing full compliance, was submitted on April 20, 2017.

AUDIT FINDINGS

Facility Characteristics:

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

The Jefferson City Correctional Center was constructed at an approximate cost of 120 million dollars. It officially opened September 14, 2004. The institution had 588, of 665 allotted, staff plus 100 volunteers in corrections. The institution is composed of 1,440 general population offenders, 144 offenders in protective custody, and 340 offenders in administrative segregation status.

As a medium/maximum security facility there are a total of eight housing units, the majority with a sustained population of 288 offenders per unit. The complex is divided into A and B sides, with four housing units located on each side, divided in the middle by a large central services building. The central services complex contains the following services sections: medical unit (29-bed infirmary), library, education classrooms, institution activities office, chapel, offender property room, offender canteen, clothing issue, offender barber shop, two gymnasiums, food services (including three dining rooms), staff dining room, and the laundry. Additionally, the vast complex is the site for Information Technology and offenders working for the Department of Social Services.

The 42 acre prison complex also includes an administration building housing administrative offices, training rooms, and the institution's control center; a multipurpose building containing two visiting rooms and a parole hearing room. A large industrial building is located at the northeast corner of the site. Industries operated at JCCC include: a clothing factory, furniture factory, license plate manufacturing, recycled ink cartridges, and a graphic arts products operation. The perimeter of the institution is protected by several high security fences which include a lethal fence. There are also additional state-of-the-art security technologies in place to protect public safety.

A maintenance building, powerhouse, and garage complex are located outside the main perimeter. In the same area is the main warehouse and a regional cook-chill operation which provides meals for seven institutions in the central part of the state.

Programs in place to help offenders include: a HiSet program facilitated by volunteers who assist offenders in reaching the high school equivalency level, and a Restorative Justice program that teaches offenders to take responsibility for their criminal behavior and to realize the negative impact their behavior has had on countless citizens including their own families. The program gives offenders the skills and opportunity to give back to their community. Another program available to men who qualify is the Intensive Therapeutic Community (ITC), a drug and alcohol program that stresses a holistic approach to help change criminals into productive citizens. The ITC program at JCCC is the only known program of its kind in a maximum security prison in the country. The focus has been on re-entry effort in recent years and several new programs have been developed to address the increase of releasing offenders.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed,

recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Number of standards exceeded:	0
Number of standards met:	45
Number of standards not met:	0

A thorough review of the facility shows that it is clearly compliant with PREA standards. Offenders and staff were well-versed in their right to be free from sexual abuse and sexual harassment. Throughout the tour and in the interview process offenders and staff were free to speak with the auditors and were able to state how to report and what advocacy services were available to them.

The overall impression was that the inmates felt safe at the facility and were able to articulate how they received education on PREA and how to report sexual abuse and harassment, as both the victim and 3rd party reporter. No staff or offender recalled any cross-gender searches being conducted. Offenders routinely stated that they viewed a video on PREA continuously as it was shown several times a week on the offender television channel. Most offenders and staff interviewed indicated that once a PREA complaint was made that the offender was moved to segregation. The auditor reviewed the random files and found that this was not the practice.

All staff at the facility were considered First Responders, however knowledge varied with custody staff presenting as more knowledgeable on the preservation of evidence for the scene, victim and perpetrator. Staff were able to articulate the immediate removal of an offender at risk for sexual victimization from the suspect perpetrator.

Standards Exceeded 0 Standards Met 42 Standards Not Met 0 Standards Not Applicable 1

Below is a listing of policies provided for review during the audit. D1-1.1 Investigations 1-1-17 D1-8.4 Administrative Inquiries 8-28-14 D1-8.13 Offender Sexual Abuse and Harassment 12-17-16 D2-2.2 Background Investigations 5-10-14 D2-2.8 Promotional Appointments 2-2-14 D2-2.10 Re-Employment Appointment 11-30-13 D2-11.10 Labor Organizations 9-20-13 D2-11.14 Annual Employment Requirements 6-30-13 D2-13.1 Volunteers 10-5-13 D2-13.2 Student Interns 10-5-13 D5-3.2 Offender Grievances 1-1-15 IS5-2.3 Offender Internal Classification 12-21-13 IS5-3.1 Offender Housing Assignments 12-21-13 IS6-13 Offender Personal Appearance and Grooming 5-23-15 IS11-32 Receiving Screening Intake Unit 12-10-16 IS11-34.1 Health Assessment and/or Physical Examination 6-15-14 IS18-1.1 Required Activities 8-24-14 IS19-1.1 Conduct Rules and Sanctions 6-27-10 IS20-1.3 Searches 12-1-14

Acronyms used:

AIO Administrative Inquiry Officer

AIRA Adult Internal Risk Assessment

CAO Chief Administrative Officer

COIN Corrections Information Network

DAI Division of Adult Institutions

GED General Education Diploma

IRIS Investigation Records Intelligence System

ITC Intensive Therapeutic Community

JCCC Jefferson City Correctional Center

JDI Just Detention International

LGBTI Lesbian, Gay, Bisexual Transgender and Intersex

MOCOA Missouri Corrections Officer Association

MDOC Missouri Department of Correction

MULES Missouri Uniform Law Enforcement System

NIC National Institute of Corrections

NCIC National Crime Information Center

PREA Prison Rape Elimination Act

RAINN Rape, Abuse and Incest National Network

SAFE Sexual Assault Forensic Examiner

SANE Sexual Assault Nurse Examiner

SART Sexual Assault Response Team

SSV Survey of Sexual Violence

TASC Temporary Administrative Segregation Confinement

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator Auditor Overall Determination: Meets Standard

Auditor Discussion

115.11 JCCC policies and procedures, namely, D1-8.13 Offender Sexual Abuse and Harassment, and the JCCC PREA Coordinated Response Protocol, outline the state and facility guidelines towards PREA compliance. The procedures establish the department's zero tolerance for offender sexual abuse and harassment and establishes strategies and responses to reduce and prevent offender sexual abuse and harassment." These strategies are spelled out throughout the documents which include: (1) how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment (2) a list of prohibited behaviors regarding sexual abuse and sexual harassment (3) sanctions for those found to have participated in prohibited behaviors and (4) a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of offenders.

The random staff and offenders interviewed (20 randomly selected from the staff lists and housing unit lists for in-depth interviews) and random staff and offenders (selected from every other housing unit while on tour) and confirm that "zero-tolerance" is the standard maintained throughout the facility. Staff and offenders were able to describe what types of behaviors were prohibited and actions that would be taken in response to an incident of sexual abuse/harassment. This is further supported by observation on site of the postings throughout the housing units and program areas around facility and a video played several times a day on the offender television channel.

The State of Missouri designed an agency-wide PREA Coordinator. The MDOC PREA Organizational Chart provided shows that the PREA Coordinator reports to the General Counsel who is a direct report to the Director. When interviewed, she indicated that she had sufficient time and authority to develop, implement, and oversee PREA compliance efforts throughout the state. There are 29 site coordinators throughout the state, seven (7) of those in probation/parole. The coordinator said they interacted with all site coordinators (PREA Compliance Managers). If issues arise, indicated that they would make recommendations for the facility to follow, or put a team together if a policy change was indicated.

The Division of Adult Institutions (DAI) JCCC Administration Organizational Chart shows that Corrections Manager Level B2 reports to Corrections Manager Level B3 at Adult Institutions, and it is noted that a Deputy Warden at each prison is designated as the PREA Site Coordinator. When interviewed the PREA Compliance Manager at JCCC indicated that he had sufficient time to manage the PREA-related responsibilities. He indicated that he stayed in constant contact with the agency PREA Coordinator and if he has an issue with compliance that he goes through the PREA Coordinator for directions.

Based upon the evidence discussed: review of policies, random and specialized staff/offender interviews, and observations made onsite, the facility has demonstrated compliance with this standard.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.12 (a) D1-8.13 Offender Sexual Abuse and Harassment, Section III-A10, page 6, reads, "All residential contractors will adopt and comply with PREA standards as outlined in their contract with the department. The Chief Administrative Officer (CAO) or designee will regularly audit residential contractors to ensure compliance with the PREA standards. The department may enter into contracts with an entity that fails to comply with PREA standards only in emergency circumstances."
	Contracts were awarded under the numbers CS160754001, CS160754002 and CS160754003. Each contract for residential facilities contained language requiring adherence to PREA and to the audit standards, and two of the three recipients included their PREA Audit history and PREA Operating Standards as part of the contract.
	JCCC does not contract with external entities to house its offenders. The awards referenced above were made through the parent agency, MDOC.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.13 The facility submitted D1-8.13 Offender Sexual Abuse and Harassment, outlining the requirement for the maintenance of staffing plans for each facility that provides adequate levels of staffing to protect offenders against sexual abuse. The eleven criteria identified in this standard are addressed in a document provided by the agency and reviewed annually by the facility as part of their annual compliance report. Documentation reviewed during the pre-audit phase supported that no change has been made since 2013 regarding these elements.
	The agency is provided with a staffing allotment which supplies the ratio of staff to offenders at the facilities it operates. The allotment has remained unchanged since 2009 and is based on a overall staffing pattern of one officer to every six offenders (329 officers for an average of 1941 offenders). The facility documents the deviations from the staffing plan on the daily shift rosters.
	The PREA Compliance Manager indicated that compliance with the plan and deviations were also shown in their incident debriefings to better allocate the staff. A review of the incident reviews supports that considerations were made at each review regarding staffing patterns, as well as the deployment of electronic technology. JCCC has an extensive camera system, which is continuously manned.
	Additional documentation provided onsite, included the master roster for the facility, and additional shift reports showing how staffing levels were determined by post and how deviations from the plan were addressed on a daily basis. The 2015 update to the staffing plan was provided pre-audit. The 2016 was not yet completed. The PREA Coordinator indicated that facilities wait until investigations are closed out to submit the annual report, adding this normally occurs around May of each year.
	In JCCC Post Orders require that unannounced rounds take place on all housing units and that the rounds should be documented in the Shift Supervisor's summary. Post orders also require supervisors to record such rounds on the staff sign-in logs. Staff persons were found in all locations of the facility and were readily available to the offenders.
	Three randomly selected Intermediate and higher level staff, whose names were pulled from the staffing rosters, were interviewed. The supervisory staff indicated that the design of the facility made it difficult for the rounds to be unannounced. Staff open each housing unit door electronically. This was observed by the auditor throughout the tour upon entry into each housing unit. The supervisors indicated that they would not advise staff that they were coming and would vary the time that they would make rounds. None of the supervisors interviewed indicated that staff were ever forewarned to their knowledge. All three confirmed that they conducted these rounds, and documented the rounds on the Shift Summary reports, the chronological logs, sign-in book and post orders.

Additional sign-in logs, and chronological logs were reviewed onsite by the auditor selected at four random housing units and the infirmary. Interviews during the tour onsite with staff and

offenders and in-depth interviews of 20 random staff and offender confirm that these rounds were taking place.

Based upon the evidence discussed: review of policies, random and specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14 D1-8.13 Offender Sexual Abuse and Harassment, reads, "A youthful offender will not be placed in a housing unit in which he will have sight, sound, or physical contact with any adult offender through use of a shared day room or other common space, shower area, or sleeping quarters."
	JCCC does not house Youthful Offenders.

	Limits to cross-gender viewing and searches
1	Auditor Overall Determination: Meets Standard
,	Auditor Discussion
	115.15 The agency has policy IS20-1.3 Searches, to address the cross-gender and visual body cavity searches of offenders. This policy includes an exception for exigent circumstances which were defined as: any set of temporary unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility.
	The policy IS11-34.1 Health Assessment and/or Physical Examination at Reception, prohibits each facility from searching physically examining a transgender or intersex offender for the sole purpose of determining the offender's genital status. The facility reported that no cross- gender strip or visual body cavity searches had been conducted in the past twelve (12) months. JCCC reported no occurrences where non-medical staff performed cross-gender strip/visual searches. If any had occurred, all exigent circumstances searches would be documented by the shift supervisor in the chronological log. State of Missouri "Cross Gender Search" form 931-4701 exists to document cross-gender searches. A blank form was provided for review.
• • • •	Eight inmates reported that female staff announce their presence when entering the unit and entering the wings. Two dissenters said it was a recent occurrence. The majority indicated the announcements had taken place for years. The auditor toured each housing unit and observed that each wing was arranged so that when a staff person arrives on the unit they are n close proximity to the showers. All the showers are single-person showers, with a door olocking view of the mid-range area of the occupant with the head and feet remaining visible. No inmate reported that they were naked in full view of the opposite gender outside of medical staff. No offenders, including those who identified as Lesbian, Gay, Bisexual, Transgender or Intersex (LGBTI), reported that they were subjected to a strip search for the sole purpose of determining their genital status.
c a c a t t s	Nine staff interviewed at the facility reported that they received training specific to cross- gender searches in the past year, but also receive PREA training through the computer as efresher courses. Newer staff reported the training was part of their CORE program received at their academy. Staff were able to physically demonstrate how such a search would be conducted, indicated that the male staff would perform the searches on all offenders housed at the facility and would utilize the back of the hand when searching the area around the preast of the transgender female offenders. Only one staff person was not able to describe the above procedure correctly. None of the staff interviewed indicated that they conducted searches for the sole-purpose of determining an offender's genital status. All but one staff person were aware of the policy prohibiting the searches.
I	The display of a sign indicating when a cross gender staff member is present is provided to notify hearing-impaired offenders. This sign was observed at several locations throughout the facility, to include the infirmary. During the tour the urinal in the Food Service area allowed viewing by the opposite gender. A sturdy cardboard piece was placed in the window

viewing by the opposite gender. A sturdy cardboard piece was placed in the window, effectively blocking the view. A urinal in the Recreation Gym also allowed for viewing by the opposite gender, a screen to block the viewing was put in to place at this location, as well.

JCCC does not house female offenders.

Based upon the evidence discussed: review of policies, random and specialized staff/offender interviews, and observations and corrections made onsite, the facility has demonstrated compliance with this standard.

Auditor Overall Determination: Meets Standard
Auditor Discussion
115.16 D1-8.13 Offender Sexual Abuse and Harassment, addresses the availability of materials to offenders who are limited English proficient, deaf, visually impaired, or otherwise disabled. The usage of offenders would be limited to exigent circumstances.
Brochures in English, Chinese, and Japanese were provided as examples with the notation that Braille brochures are available for review by offenders. The brochure provides definitions of sexual abuse and harassment, consequences of sexual abuse/harassment for the perpetrator, victim's rights, and methods of reporting and prevention of sexual abuse. Acknowledgement forms for each language were also provided. Additional brochures were provided for Vietnamese, Russian and Serbo-Croatian were provided later.
For those languages where no written materials exist or the offender is not literate, JCCC ha contracts in place for Verbal and Sign Language Interpretive Services that expire on June 30 2017 and March 31, 2017 respectively with options for renewals through 2018. This service was not utilized during the past year.
The Division of Adult Institutions PREA Offender Education Memorandum dated April 11, 2012, outlines the use of the Lesson Plan and Video "Speaking Up". The video is shown daily on the offender television channel, which was confirmed through staff and offender interview throughout the tour and in-depth.
The ten random staff interviewed indicated that offender interpreters may be used but they have never seen it happen. They were not sure about if the inmate interpreters would be utilized in an investigation but expressed that it was more likely that staff would be utilized in those instances. The staff indicated that they knew of no offenders who were currently house at the facility who were not proficient in English, but would read the material to offenders, if needed.
No offenders housed at the facility were shown to be limited proficient in English or otherwise required these services. Offenders with learning disabilities had the information read to them and confirm that the information is shown on the offender television channel several times throughout the day. The ten random offenders confirm that the information is provided to them.
Random checks of 20 offender packets showed that the education was received within 24 hours of the offender's arrival at the facility. During the tour of the facility, posters in English and Spanish were observed in housing, programming and other areas.
Based upon the evidence discussed: review of policies, random and specialized staff/offende interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

Auditor Overall Determination: Meets Standard Auditor Discussion 115.17 Multiple policies to include: D1-8.13 Offender Sexual Abuse and Harassment, D2-2.2
115.17 Multiple policies to include: D1-8.13 Offender Sexual Abuse and Harassment. D2-2.2
Background Investigations, D2-2.8 Promotional Appointments, D-2-13.1 Volunteers, and D-2- 13.2 Student Interns, address the hiring or promotion of any employee, contractor who may have contact with inmates who: 1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 2. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or 3. Has been civilly or administratively adjudicated to have engaged in the activity described in #2 above.
These same documents detail the requirement to conduct background investigations for candidates for hiring, promotional and voluntary demotions. The policies detail the requirements to consider all sustained allegations before employment or promotion is considered for other appointments and the requirement to contact all prior institutional employers to see if any staff resigned pending an investigation of an allegation of sexual abuse.
An email dated May 6, 2015, the Director of the Division of Offender Rehabilitative Services outlined procedures for Corizon, Gateway and Education Contractors follow when hiring staff that is consistent with the hiring practice for state employees.
The auditor reviewed State of Missouri Department of Correction Application for Employment 931-1419 and the MDOC Volunteers-Student Intern Application 931-0557 provided as examples. Each application covers the questions as the Employment application referenced above. On site, additional documentation for employees, contractors and volunteers, was obtained through a random check of personnel files. This check supported that all employees, contractors and volunteers are found that these questions were asked for all employees, contractors and volunteers at the facility. Volunteers at the facility are continuously escorted. Contractors are not escorted.
D2-11.14 Annual Employment Requirements, supports that a criminal history check is defined as "A screening for criminal activity conducted through the Missouri Uniform Law Enforcement System, and the National Crime Information Center System." These checks are conducted each calendar year, in the month following each staff member's birth month.
The State of Missouri Department of Correction does not hire corrections staff at the facility. This is done through the central office. All other staff are hired directly at the facility. However, copies of applications and backgrounds checks were maintained on site for all facility staff and were available for review. A random sample consisting of 20 staff, volunteers and contractors packets supported that the background checks were being conducted for all staff, volunteers and contractors as required and that the checks were being conducted on an annual basis using National Criminal Information Network (NCIC) and Missouri Uniform Law Enforcement System (MULES).

	Based upon the evidence discussed: review of policies, random and specialized staff/offender
	interviews, observations and documentation obtained onsite, the facility has demonstrated
	compliance with this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.18 JCCC was built in 2004 and has not undergone any substantial modifications since 2012. When placing cameras the warden indicated thought went into location to ensure staffing and high traffic areas were considered. Interviews with the Warden and Agency Head Designee supports the use of cameras throughout the facilities in the state to support PREA compliance.
	Throughout the tour it was observed that JCCC has an abundance of cameras throughout the facility. Areas identified as blind spots were addressed by the use of staffing or camera placement, or both. During the tour several doors were found unlocked allowing offender access to blind spots: two rooms in the commissary/canteen area, and a staff only restroom in the education area. These were addressed prior to the end of the onsite audit. On housing units, the cameras offer excellent coverage for offenders outside of the cells. Once inside, staff rounds become an issue. As the door offers limited viewing into the cells, staff must ensure that they conduct frequent rounds in order to see inside the rooms. These rounds are documented in the unit log, and staff in the camera viewing observe that the rounds are being conducted.
	An automated tracking system, "Guard One" is utilized. Staff making rounds, physically press a "pipe" into several stainless steel checkpoints located throughout the facility. These rounds are documented in computer-generated logs to show that the pipe was utilized and at what intervals.
	Based upon the evidence discussed: review of policies, interviews with specialized staff, observations of practices, and corrections made, the facility has demonstrated compliance with this standard.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.21 Policies D1-8.1 Investigations, and D1-8.13 Offender Sexual Abuse and Harassment were reviewed. The investigation unit, under the jurisdiction of the inspector general's office, is the investigative unit of the department. This unit conducts investigations in response to reports of violations of Missouri state law and serious violations of department procedure at all facilities throughout the state to ensure criminal violators are prosecuted. Sexual harassment investigations as well as investigation regarding pat searches are investigated by the facility's Administrative Inquiry Officer (AIO) who reports to the warden.
	Corizon contract Section 2.3.3 and Section 2.4.1 concern the delivery of services with the assurance that access to medical and behavioral health care will be provided immediately, upon report or discovery, to victims of sexual misconduct. Section 3.1.12 outlines the contractor requirement to obtain a written agreement that outlines the terms of medical care services from hospitals that are used regularly. This includes the billing for services and any billing that would be applicable for Medicaid.
	During the past year, there were four (4) instances where a Sexual Assault Nurse Examiner (SANE) was utilized. One was conducted at the University of Missouri in Columbia, the others were conducted onsite by a SANE nurse. No exams were conducted by qualified medical practitioners. When an examination is indicated staff utilize form MO 931-4691 PREA Allegation Notification – Checklist, to show if the exam was indicated and if it was conducted onsite, with the date also noted on the form. The auditor was able to review these forms in instances where the exam was used and when it was not indicated to ensure compliance with this standard. An outside facility would be utilized in instances where a staff person was the alleged perpetrator.
	JCCC has one SANE nurse on staff. The current SANEs most recent Skills Competency, dated May 6, 2106, ,was provided, along with a listing of all SANE-qualified staff in MDOC. When interviewed she indicated it was her last day. However, she was one of three SANE nurses on call in the area so a SANE nurse would always be available. She indicated that she was responsible for SANE forensic examinations and did not conduct any other type of forensic examination. The SANE nurse has an examination area in medical services that allows for items to be removed, categorized and safely handled to ensure privacy for those involved and the avoidance of cross-contamination. 120 hours is the presumptive timeframe used to collect physical evidence. The uniform evidence protocol used by the facility, is the one utilized by the Missouri Highway Patrol.
	JCCC is one of the facilities in the state of Missouri that were unable to contract with crisis center and utilizes facility chaplains to serve as victim advocates. Email correspondence dated August 19, 2013 to the PREA Coordinator for MDOC from the Executive Director for the Rape & Abuse Crisis Service indicated that the center would not be able to provide services for the DOC, which reads, "We are looking at the SASP (Sexual Assault Service Provider) grant which

does not support the work on an advocate for PREA." JCCC had no instances where the facility advocate was requested, the offenders are offered victim advocacy and can decline.

The Consent for Facility Advocacy Services form is provided which outlines the level of confidentiality by the system advocate and a section for refusal of services.

The training record for the facility chaplain shows five (5) hours of advocacy training were received on October 23, 2013. The Missouri Coalition Against Domestic and Sexual Violence PowerPoint presentation is included. Covered in the course are the nature and dynamics of sexual violence, terminology, survivor and advocate responses, trauma responses, medical and forensic medical examinations, SAFE benefits and drawbacks, the role of the advocate, crisis intervention (how to establish rapport, define problems and concerns) and future plans.

Of the nine staff interviewed, with only one exception, each was able to identify that the investigators were responsible for conducting investigations into the allegations of sexual abuse and sexual harassment. Some were able to discern the difference between the "criminal" and "administrative" investigations. Most were not able to make that determination. When reporting, the staff make determinations as to "Penetration" and "Non-Penetration" events (which is how the two types of investigations are differentiated). Investigative referrals are routed through central office, where they are tracked, and routed back to the facility.

When interviewing offenders, one of the ten made a report of sexual abuse and stated that he had reported it previously to medical staff (in 2010). He stated that medical took care of the issue with which he had been concerned. No investigation was initiated. However, upon the completion of the interviews, staff at JCCC initiated an investigation into the allegations.

Based upon the evidence discussed: review of policies, random and specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.22 D1-8.13 Offender Sexual Abuse and Harassment, policy requires administrative and/or criminal investigations are completed for all allegations of sexual abuse and sexual harassment.
	Prior to the audit, a document listing ongoing investigations for the prior two years was provided. Onsite, an updated document was provided: the State of Missouri form 931-4691 that is utilized to document each PREA allegation and the subsequent notifications made to the CAO, Duty Officer, Investigator, Medical, Mental Health, PREA Site Coordinator, PREA Coordinator and Advocate.
	From the list of investigations (45 administrative and 21 criminal), a random sampling of 10 investigations was obtained, to ensure that all were completed. The review of the information supports that the investigations were completed for all referrals and documented with 16 still pending completion prior to the start of the audit. During the past year, one referral for criminal prosecution was made. This case was declined for prosecution. The referral of the allegation is published on the facility website.
	When interviewed, the designee for the agency head indicated that they ensure that all administrative and criminal investigations are completed on allegations of sexual abuse or sexual harassment. This is also supported in interviews with the PREA Coordinator, PREA Compliance Manager and Criminal Investigator. As reported in 115.21 (b), all investigative referrals are routed through central office and then back to the facility.
	115.22 (c)(d)(e) These sections are not applicable to JCCC.
	Based upon the evidence discussed: review of policies, random and specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.31 D1-8.13 Offender Sexual Abuse and Harassment covers the department's sexual misconduct and harassment training refresher training every two years to ensure knowledge of the agency's current sexual abuse and sexual harassment procedures. All part-time employees, volunteers, and contract staff members will receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training. Section III-B4, concerns staff members placed at a female facility reviewing Working with the Female Offender training prior to being placed at a post. JCCC does not house female offenders.
	In the review of the lesson plans, the following sections were found in the Lesson Plan for Employee Training: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. In the PowerPoint presentation for Refresher Training provided to staff all of the sections required are found.
	When interviewed the ten random staff at the facility were able to state that they received training in 1-8: how to preserve the crime scene and to adequately ensure victim and suspect evidence was retained as well as being able to cite the agency policy on zero-tolerance, reactions and detection of sexual abuse and harassment, how to avoid inappropriate relationships and (10) their duty to comply with the laws for reporting sexual abuse/harassment. All of the staff interviewed were able to state how to communicate effectively and professionally with inmates (9), including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. New staff indicated that they had received information in their training on the communication, as well.
	Twenty random files were selected for staff, contractors and volunteers. It was found that the education was provided to staff through computer-based training and a PREA refresher course, every two years, each providing two credit hours. Lists for those who completed the training and individual training certificates were provided for 2014 and 2016. In conjunction with the training certificates received for the random staff, were signed Missouri DOC forms 931-4655 Prison Rape Elimination Act (PREA) Annual Training Acknowledgement, showing

931-4655 Prison Rape Elimination Act (PREA) Annual Training Acknowledgement, showing that staff received and understood the training and their obligation to report all forms of offender sexual abuse and/or sexual harassment for 2014 and 2016.

Based upon the evidence discussed: review of policies, lesson plans, random and specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.32 D1-8.13 Offender Sexual Abuse and covers all part-time employees, volunteers, contract staff members, vendors, and that each will receive PREA training specific to their classification as determined by the appropriate division director and chief of staff training. Vending contractors will be escorted by a staff member at all times or will receive PREA training prior to entering the facility. In a memorandum provided, dated August 8, 2014, it reads, "With the exception of Medical and Mental Health staff, all outside contractors are escorted by Custody Staff when inside the institution."
	The Volunteers in Corrections Lesson Plan and Volunteers in Corrections Refresher materials provided each covers the responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. In addition brochures for Volunteers/Contractors are provided defining offender-offender sexual abuse, staff sexual misconduct, staff-offender sexual abuse and harassment, red flags of sexual abuse, reporting and zero-tolerance. This material is provided to volunteers who are not escorted by custody staff.
	Outside of continuously escorted volunteers, three contractors who had contact with inmates were interviewed. These were solely medical practitioners and employees of the medical services provider. These staff indicated that the training they received was the same as the training received by non-medical personnel. In addition, they received annual refresher training through their contract provider. The training included agency policy and their responsibilities to report, and the agency zero-tolerance policy on sexual abuse and harassment.
t r I	Eight random file checks for contractors and volunteers support that they were receiving the training and understood the training they received. Training certificates were received for the random contract/volunteer staff as well as signed Missouri DOC forms 931-4655 Prison Rape Elimination Act (PREA) Annual Training Acknowledgement, showing that staff received and understood the training and their obligation to report all forms of offender sexual abuse and/o sexual harassment.
S	Based upon the evidence discussed: review of policies, lesson plans, random and specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.33 D1-8.13 Offender Sexual Abuse and Harassment supports the requirement that the department will provide PREA related education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled.
	Information is provided in brochures, in English, Chinese, Japanese, Russian, Serbo-Croatian Spanish and Vietnamese. There is a video National Institute of Corrections (NIC) Speaking Up that has been transcribed for the male and female population. A Braille brochure and large print brochure are available for review, as well.
1 1 1 1 1	Two Intake staff were interviewed. These staff, as well as other staff at the facility, indicated that it has been years since they had an offender who was not sufficiently proficient in English to provide information on PREA. When the offenders arrive, the education is provided within 24 hours and an assessment is completed. The education is provided in the form of offender prochures and through the use of a video that is played several times a day on the offender television channel for the entire facility population to view. Every inmate that is transferred to the facility (not an intake facility) is provided with the education, work and programming areas.
 	Ten random Inmates interviewed on the same subject indicated that they did receive information at their arrival on the facility's rules against sexual abuse and harassment, with most recalling it was the same day as their arrival. JCCC only receives new offenders on two days of the week. Offenders who were housed at the facility for longer periods of time support that the information is provided through posters and television programming on a regular basis. They were all able to state they had the right to be free from sexual abuse/harassment, the methods to report sexual abuse / harassment and freedom from retaliation.
	Twenty random file checks for offenders housed at the facility support that each offender received PREA education and that the education includes their right to be free from sexual abuse and harassment and their right to be free from retaliation for reporting such incidents. Signed copies of the Missouri DOC form 931-4805 Offender Sexual Abuse Harassment and Acknowledgement were provided. These forms were dated within 24 hours of the offender's arrival at the facility.
	Based upon the evidence discussed: review of policies, offender educational brochures, video specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

ł	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.34 (a) D1-8.13 Offender Sexual Abuse and Harassment, provides that all new investigators and administrative inquiry officers (AIOs) or designees assigned to investigate offender sexual abuse allegations will receive specialized PREA training. Along with the policy, a listing of Investigators who completed training in 2012 and 2014 were provided. In the Lesson Plan for PREA Specialized Investigator Training Module 2, State Laws and Departmental Policies, the distinctions between Miranda and Garrity are described as follows:
	MIRANDA - RULE OF LAW: "Upon "custodial interrogation", one is entitled to the following measure as a rule of law: An admonishment that the arrestee has (1) the right to remain silent and that anything he says may be used against him in a court of law, and (2) the right to the presence of an attorney and if he cannot afford counsel, one will be appointed for him prior to questioning if he so desires."
	GARRITY - SYNOPSIS OF RULE OF LAW: "[T]he protection of the individual under the Fourteenth Amendment against coerced statements prohibits use in subsequent criminal proceedings of statements obtained under threat of removal from office, and that it extends to all, whether they are policemen or other members of our body politic." It later adds that, "The court found that states have the right to compel such statements as a condition of employment, but such statements cannot be used against officers in criminal prosecutions."
a ii e a V e c V	When interviewed, the differences in skill level of the one criminal investigator and two administrative investigators (one was assigned as an assistant) is apparent, as the criminal nvestigator received more education and was clearly able to describe techniques for interviewing sexual abuse victims, the use of Miranda and Garrity warnings, how to collect evidence in the confinement setting and the criteria for substantiation of a case. If a case appears to be criminal in nature, the administrative investigator would cease and the case would be handled by the criminal investigator. The administrative investigators lacked the knowledge of the criminal investigator and one was unable to describe the preponderance of evidence standard. Of note, none of the investigators are responsible for making the final determination on the investigation. Once the report is completed, it is forwarded to the facility Warden. The Warden makes the determination as to whether the case is substantiated, unsubstantiated or unfounded.
	t is recommended that the administrative investigator, and those assigned to assist the administrative investigator, receive more comprehensive training.
i	Based upon the evidence discussed: review of policies, lesson plans, specialized staff nterviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

Auditor Overall Determination: Meets Standard
Auditor Discussion
115.35 (a) D1-8.13 Offender Sexual Abuse and Harassment outlines the requirement for medical and mental health staff members will receive annual specialized PREA training. In furtherance of this, the PREA Specialized Medical and Mental Health Staff Lesson Plan was provided for review. This training covered the following areas: how to detect and assess sign of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and, how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
The three Medical and Mental health staff interviewed confirmed that they receive additional training in the following areas: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and, how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
The facility has a SANE who is currently certified. She was one of three SANE who work on a rotating call schedule. A copy of Corizon's SANE Credential Log was provided listing names and the states of qualification: online, clinical, photography and yearly competency. Included was a Skills Competency Sheet (Sexual Assault Nurse Examiner) for the first person on the competency list. The dates on the credential log matched the certificate. The last item included was a curriculum overview of Six Courses for the Adult SANE: Building a Sexual Assault Response Team (SART), Preparation and Refresher, Sexual Assault Evidentiary Exam, SART Member Interviews, SART Meeting Kearney NE, Break the Silence – Sexual Assault and the SART Solution.
A random sampling of twenty PREA Refresher Training Certificates for 2014 and 2016 were provided supporting that medical staff also received the same training that non-medical staff received.
Based upon the evidence discussed: review of policies, specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.41 Policies D1-8.13 Offender Sexual Abuse and Harassment and IS5-2.3 Internal Classification were reviewed pursuant to this section to support the usage of a standardized assessment screening tool for the risk of being sexually abused and the risk of being sexually abusive within 72 hours of arrival and reassessed within 30 days of arrival.
	PREA Screening for vulnerability is conducted using the Adult Internal Risk Assessment for the following: (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability."
	All of the above criteria with the exception of ten (10) "Whether the inmate is detained solely for civil immigration purposes" could be located in the screening instrument. In D1-8.13 Offender Sexual Abuse and Harassment, Section III-A5, page 5, it reads, "The department does not detain offenders solely for civil immigration purposes."
	PREA Screening for abusiveness is conducted using the Adult Internal Risk Assessment. This form was checked against the three (3) criteria for an objective screening instrument: prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. Each of the items listed in the criteria were found in the assessment screening instrument.
	The PREA Compliance Manager indicated that custody staff do not have access to view the screenings. During the tour, the auditor observed that Classification staff are assigned to each housing unit. Files are maintained for each offender in the back section of the Unit Team Office. This area is limited to Classification staff.
	Two staff who perform screening for risk of victimization and abusiveness were interviewed. These staff concur that the screenings are conducted with all transfers into the facility and that the assessment occurs within 72 hours, adding that it is normally accomplished within 24 hours of arrival. The assessment tool considers each of the factors listed in the standard. This tool is completed on the computer and a score is determined based upon the inmate's response. The scoring results in categories of Alpha, Kappa and Sigma (most abusiveness to most likely to be victimized). All offenders are identified as one of the three. The staff support that a reassessment occurs within 30 days and when the offender was placed on ad administrative segregation unit for a period exceeding 90 days. They also indicated that a screening would be conducted based on an incident/event, as well.
	D1-8.13 Offender Sexual Abuse and Harassment, Section III-C1, page 9, reads, "The offender

will not be disciplined for refusing to answer or not disclosing complete information during the assessment." The two staff interviewed who perform screenings concur that no offender is subject to disciplinary action for refusing to answer questions during the assessment.

Of the ten random inmates interviewed, nine were able to recall receiving the assessment. One inmate was able to recall the initial assessment, as well. Most recalled the follow-up assessment that took place several weeks after their arrival.

Random checks of twenty offender files support that they were assessed using the above instrument within 72 hours of their arrival and the reassessments occurred within 30 days were conducted utilizing the above instrument. These random checks of the offender files support that assessments could be made for other reasons, such as segregation exceeding 90 days and event-based occurrences.

Based upon the evidence discussed: review of policies, random and specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.42 Policies D1-8.13 Offender Sexual Abuse and Harassment, IS18-1.1 Required Activities, IS5-2.3 Offender Internal Classification, IS5-3.1 Offender Housing concern decisions regarding housing, cell, bed, education, and programming assignments for offenders at high risk of being sexually victimized away from those at high risk of being sexually abusive. These policies also cover housing and program assignments for transgender or intersex offenders. Included with these policies are the requirements to consider on a case-by-case basis the impact on the offender's placement regarding their health, safety and the impact on management and security. Reviews of the inmates are conducted by the Transgender committee reporting back to the PREA Coordinator. These reviews occur twice a year. This procedure includes a review of threats to safety experienced by the offender and allows transgender or intersex inmates' views with respect to their own safety to be considered.
	Information on transgender offenders housing, programming was provided with five (5) reviews by the facility transgender committee. No information on offenders housing, programming, work and education decisions for at-risk offenders who are not transgender was provided prior to the audit.
	In a review of the housing report for the facility and during the onsite tour of the facility, inmates who identified as transgender were found on multiple housing units, including general population and administrative segregation. There was no wing dedicated to housing transgender offenders at the facility. When interviewed, no offender indicated that they were placed on any housing unit solely dedicated to housing transgender offenders.
	The four staff interviewed on this subject indicate that they utilize the Adult Internal Risk Assessment tool to generate a score identifying the offender as Alpha, Kappa or Sigma. Offenders identified as Alpha may be housed with those identified as Kappa. Offenders identified as Sigma may be housed with offenders identified as Kappa. Offenders identified as Alpha and Sigma may not be housed together. Offenders bearing all three designations could be found on every housing unit at the facility. The random check of twenty offenders and their housing was compared to the assessment tool and found that the facility was placing offenders in housing in accordance with the scoring identification generated from the assessment tool.
	Information on transgender offenders housing, programming was provided with five (5) reviews by the facility transgender committee. The transgender housing committee conducts the review of the offender housing status and forwards their recommendations to the PREA Coordinator. The PREA Coordinator makes the final review and approval for each housing decision. The random checks of four transgender offender files supports that the committee reviews the housing for the offenders twice a year, giving consideration to the offender's own views of their safety in compliance with the policy described above and as addressed in the Adult Internal Risk Assessment.

JCCC housing units have individual showers. All inmates are able to shower separately from

other offenders. The showers have doors but provide staff with the ability to view the occupants head and feet.

Based upon the evidence discussed: review of policies, random and specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

13	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.43 Policies D1-8.13 Offender Sexual Abuse and Harassment, JCCC PREA Coordinated Response Protocol and Involuntary Segregated Housing for Protective Custody concern the placement of offenders who are identified as high risk for sexual victimization on involuntary segregated housing.
	Prior to the audit, information was provided that one offender was placed in involuntary segregation (10-15-16) as the recipient of notes seeking sexual acts. The offender was described as small in stature and having low education scores and at increased risk of sexual victimization and the other offender involved being housed on the same wing. The offender expressed his desire not to be on protective custody. At the time of the placement, the offender was facing 3 conduct reports and had 8 for the prior year. Within three weeks (11-3-16), the offender was placed on administrative segregation based on his conduct history at the facility.
	The two staff interviewed who supervise inmates in segregated housing indicated that programs can be limited based upon the type of segregation. The administrative segregation and disciplinary segregation are staggered. An offender could serve two weeks of disciplinary segregation, followed by one week of administrative segregation and back to two weeks of disciplinary segregation time. Some of the housing units offer socialization programs designed to help the offender return to general population, the programs include anger management and General Education Diploma (GED) programs. The housing on the unit is generally single-celled housing called TASC (Temporary Ad Seg Confinement).
	Some of the ten random staff indicated that offenders who alleged sexual abuse would be placed on the unit until the investigation could be completed. When an offender is housed on the segregated housing unit, the facility maintains individual confinement records and computerized tracking programs to document daily activities for the offender, to include: meals, showers, suicide watches and any special security orders that may be applicable to the offender. The offenders are reviewed every 30 days while on the unit, regardless of the initial reason for placement on the unit.
	While onsite, it was found that the facility had two occurrences where an offender had been placed on involuntary segregation. When it was found, ten days after it occurred, the facility made immediate adjustments and took corrective action to move the offender.
	No offenders were housed on involuntary segregation for a period exceeding 30 days at JCCC. The warden confirms that offenders at high risk of sexual victimization or abuse are only placed on the unit as a last resort and that a committee meets to recommend housing for offenders within 5 days of the initiation of the investigation.
	The information provided by staff interviews prompted further file reviews. In addition to the twenty random file reviews, additional documentation received included Missouri DOC forms

931-4691 for PREA Allegation Notification Penetration/Non-Penetration Event Checklists

comparing it with the ten random investigations reviewed. These support that the offender victims were routinely placed back on the assigned housing unit and not moved.

Based upon the evidence discussed: review of policies, random and specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

5.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.51 D1-8.13 Offender Sexual Abuse and Harassment and the MDOC Offender PREA Brochure, under Reporting Sexual Abuse lists multiple ways to report allegations of offender sexual abuse, harassment, or retaliation which include: calling the department's confidential PREA hotline, writing to the Missouri Department of Public Safety, Crime Victims Services Unit, reporting directly to staff and using the offender grievance system. The information is also posted on the MDOC website. The department does not detain offenders solely for civil immigration purposes.
	Calls were subject to monitoring and recording, including the hotline. This was made known on the informational poster. On the site visit the auditor observed posters located in multiple locations throughout the facility. Twenty random Offender and staff interviews support that the posters have been in place for an extended length of time.
	The Memorandum of Understanding between the Missouri Department of Correction and Missouri Department of Public Safety outlines the "means for offenders to report sexual abuse and harassment to a public or private entity that is not a part of the DOC, that is able to receive and immediately forward offender reports of sexual abuse and sexual harassment to DOC officials, allowing the offender to remain anonymous upon request." All offender mail addressed to the Crimes Victims Services Unit will be treated as confidential mail and not subject to examination.
	The PREA Compliance Manager, and 20 random staff and offenders housed at the facility were able to describe the multiple methods for reporting, citing the presence of posters throughout the facility. Most inmates interviewed expressed that they would report directly to a staff person with whom they were comfortable approaching. Some would tell a family member and have them make the report on their behalf. Offenders and staff were aware that reports could be made anonymously by using hotlines or writing to the Department of Public Safety.
	In addition to the above, the Staff Tips Hotline brochure and the Lessons Plan for Employee Training were reviewed detailing how to report and that the reports can be made anonymously through the office of the Inspector General. Staff members confirmed that they could make reports privately by reporting directly to the investigators or supervisory staff. Staff also indicated that they would document these reports, as required, and that the documentation would be immediate.
	The auditor placed a call to the hotline during the onsite visit with instructions to call back. A follow-up call was not received. However, interviews with staff and offenders at the facility confirm that the are able to utilize the hotline to make reports of sexual abuse and that no one, to their knowledge, had ever experienced difficulty making a report using the hotline.
	Recodupen the evidence discussed: review of policies, breeburge, lesson plans, random and

Based upon the evidence discussed: review of policies, brochures, lesson plans, random and specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

Auditor Overall Determination: Meets Standard
Auditor Discussion
115.52 D5-3.2 Offender Grievances is the administrative procedure for dealing with inmate grievances regarding sexual abuse. The policy covers the criteria as follows: (1) The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.
This policy does not require an offender to utilize the grievance process or otherwise attempt to resolve with staff any alleged incident of sexual abuse. Furthermore it states that the staff member who is the subject of the complaint shall not be the respondent. The policy allows for third parties, offenders, staff, family members, attorneys and outside advocates to assist offender in filing informal resolution requests, grievances or appeals relating to allegations or sexual abuse. The offender can decline to have the request filed on their behalf. The policy requires the declination to be documented.
The time frame for deciding the merits of the grievance alleging sexual abuse is within 90 da of filing. The policy does not separate the allegation of sexual abuse from portions of the grievance where sexual abuse is not alleged. The policy addresses the filing of emergency grievances where the inmate is at substantial risk of immediate sexual abuse, requiring an initial response within 48 hours and final decision within 5 days.
In the offender PREA brochure provided during the offender education, it reads, "It is also important that offenders do not make false, misleading or unfounded reports in bad faith. There may be serious disciplinary consequences for doing so."
The PREA Coordinator reports that in the last 12 months, there have been 4 grievances filed alleging sexual abuse, no grievances alleging sexual abuse filed by inmates where they declined third-party assistance, zero emergency grievances filed in the past 12 months, and no resident grievances alleging sexual abuse that resulted in disciplinary action by the agence against the resident for having filed the grievance in bad faith. None of those offenders were available for interview. No offender reported a sexual abuse during the prior 12 month period that extended beyond the 90-day time frame.
Based upon the evidence discussed above, the facility has demonstrated compliance with th standard.

5.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.53 D1-8.13 Offender Sexual Abuse and Harassment concerns the provision of outside emotional support services. The information is available through mail, phone and the level of confidentiality provided. The facility does not house offenders detained solely for immigration purposes.
	Posters related to Advocacy Services are provided on all housing units and throughout the facility, which list contact information for Just Detention International, 3325 Wilshire Blvd., Suite 340, Los Angeles, CA 90010 213-384-1400 with instructions to utilize the offender telephone system to call this number. The other contact listed is for the Rape, Abuse and Incest National Network (RAINN) 1220 L Street NW, Suite 505, Washington, DC 20005 with instructions to dial 7246 on the offender telephone system at no charge. In order to make a confidential report, the report must be sent to the Department of Public Safety. The extent to which the communication is confidential is provided to the offenders on the bottom of the posters. Offenders are advised "Per department policy, mail will be subject to examination and phone calls may be monitored."
	The auditor contacted Just Detention International, listed on the advocacy brochure for the facility. The auditor was informed that they receive reports (14) from JCCC, but do not share information with the facility unless the survivor makes a request for such contact. They would share information if they were aware of a serious threat to safety.
	The auditor contacted Rape, Abuse and Incest National Network (RAINN) listed on the advocacy brochure for the facility. The auditor was informed that RAINN does not offer direct services. They answer the National Sexual Assault Hotline and do not facilitate PREA reporting or file any of those reports on their end. RAINN conducts crisis-intervention on both a telephone hotline as well as online chat. In the case that one of our callers wants to report or get more information on PREA, they refer them to the closest RCC in their area for more specific info from www.centers.rainn.org.
	Local community-based victim advocacy services are not provided. Email correspondence dated August 19, 2013 to the PREA Coordinator for MDOC from the Executive Director for the Rape & Abuse Crisis Service indicated that the center would not be able to provide services for the DOC, which reads, "We are looking at the SASP (Sexual Assault Service Provider) grant which does not support the work on an advocate for PREA." As this service was not obtained through the community, JCCC utilizes the facility Chaplain as an advocate.
r F s a d	The training record for the facility chaplain showing five (5) hours of advocacy training were eceived on October 23, 2013. The Missouri Coalition Against Domestic and Sexual Violence PowerPoint presentation is included. Covered in the course are the nature and dynamics of exual violence, terminology, survivor and advocate responses, trauma responses, medical and forensic medical examinations, Sexual Assault Forensic Examiner (SAFE) benefits and rawbacks, the role of the advocate, crisis intervention (how to establish rapport, define problems and concerns) and future plans.

All but two of the ten random offenders interviewed knew of the advocacy/counseling services that were available and how to access these counseling services. The offenders interviewed who indicated an awareness of the counseling services available, knew about the posters and the television broadcast, but were not sure of the notation on the bottom of the posters that mail and phone calls may be monitored.

No offenders were interviewed who had utilized the advocacy services. Just Detention International and RAINN does not provide names of offenders who had utilized their service and none of the offenders who were randomly selected indicated that they had ever used either service.

Based upon the evidence discussed: review of policies, brochures, interviews with offenders and outside agencies, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.54 D1-8.13 Offender Sexual Abuse and Harassment, Section III-F3, page 13, reads, "All allegations including anonymous, third party, verbal, or allegations made in writing will be accepted and moved forward in accordance with the offender sexual abuse coordinated response outlined in this procedure."
	Third-party reports made by offenders are reported to staff, calling the PREA hotline, or writing to the Department of Public Safety, Crime Victims Unit. The information is detailed in a poster provided. Onsite tour supports that these posters are available throughout the facility for the offenders to view.
	Third-party reports made by friends, family or anyone outside the facility are made by calling, writing, or emailing with the contact information: PREA Unit Missouri Department of Corrections 2728 Plaza Drive Jefferson City, MO 65109/573-526-9003 DOC.PREA@doc.mo.gov.
	Methods to report sexual abuse and harassment are made available to the public via the Department's website which is accessed at http://doc.mo.gov/OD/PREA.php. A check of the link returns to the Office of the Deputy Director.
	The twenty random offenders and staff interviewed during the tour and in-depth were well- versed in the methods available for reporting.
	Based upon the evidence discussed: review of policies, random staff/offender interviews, observations made onsite, the facility has demonstrated compliance with this standard.

5.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.61 D1-8.13 Offender Sexual Abuse and controls the dissemination of sensitive information related to offender sexual abuse. All staff members, volunteers, and contractors will immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility and any knowledge of retaliation against offenders or staff members who reported such an incident and any staff member neglect or violation of responsibilities that may have contributed to an incident or retaliation in accordance with this procedure. Medical and mental health staff members will inform offenders at the initiation of services of the practitioner's duty to report in accordance with statutes.
	IS11-32 Receiving Intake Screening Unit addresses the reporting requirements for offenders under the age of 18, requiring staff to report the allegation to the designated local Children's Division, Department of Social Services under applicable mandatory reporting laws.
	The auditor researched the relevant statutes referenced in the policy. Missouri Revised Statues, Chapter 217, Department of Corrections, Section 217.410, Missouri Revised Statutes, Chapter 630, Department of Mental Health, Section 630.005.1 and Missouri Revised Statutes, Chapter 630, Department of Mental Health, Section 630.163.1, regarding mandatory reporting requirements.
	The PREA Coordinator indicated that JCCC does not house juvenile offenders, citing a notification to Social Services if it was required. The Warden and PREA Coordinator responded that all allegations of sexual abuse and sexual harassment are reported directly to the designated facility investigators.
	Three Medical and Mental Health Staff were asked about the limitations of confidentiality and their duty to report and were able to describe both. The offenders fill out a form and sign it and staff have a responsibility to report the allegations and stating that they have made such a report in the past.
	All of the ten random staff interviewed acknowledged their responsibility for reporting, but varied in the responses. Some would report directly to someone higher, their sergeant, immediate supervisor or shift supervisor with most indicating that they would report to their immediate supervisor. All staff interviewed would take immediate action when receiving a report of sexual abuse or sexual harassment.
	The PREA Allegation Notification Penetration/Non-Penetration Event Checklists for the ten random investigations reviewed onsite confirm that staff act immediately when receiving reports of sexual abuse or sexual harassment and report these to their Shift Supervisor.
	Based upon the evidence discussed: review of policies, random and specialized staff

Based upon the evidence discussed: review of policies, random and specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.62 D1-8.13 Offender Sexual Abuse and Harassment and the JCCC Coordinated Response Protocol and Involuntary Segregated Housing for Protective Custody address this section outlining the following least restrictive options for offenders at substantial risk of victimization: (1) return to assigned housing; (2) temporary reassignment of staff members; (3) assignment to another housing unit; and (4) temporary segregated housing for protective custody needs. "Segregated housing should not be considered as the first option to ensure safety of the victim."
	Prior to the audit, information provided was that one offender was placed in involuntary segregation (10-15-16) as the recipient of notes seeking sexual acts. The offender was described as small in stature and having low education scores and at increased risk of sexual victimization. The offender expressed his desire not to be on protective custody. At the time of the placement, the offender was facing 3 conduct reports and had 8 for the prior year. Within three weeks (11-3-16), the offender was placed on administrative segregation based on his conduct history at the facility.
	While onsite, it was the facility advised that they had two occurrences where an offender had been placed on involuntary segregation. When the second occurrence was found, ten days after it occurred, the facility made immediate adjustments and took corrective action to move the offender.
	No offenders were housed on involuntary segregation for a period exceeding 30 days at JCCC. The warden confirms that offenders at high risk of sexual victimization or abuse are only placed on the unit as a last resort and that a committee meets to recommend housing for offenders within 5 days of the initiation of the investigation.
	The Agency Head Designee indicated that the onsite coordinator (PREA Compliance Manager) would take care of it according to policy, when they learn of an inmate that is subject to a substantial risk of imminent sexual abuse. The Warden indicated that they would immediately separate the offender from the at-risk situation.
	All ten random staff interviewed on the subject indicated that they would take immediate action to remove the offender from the risky situation and would notify the chain of command. Most all staff interviewed indicated that they would notify the Shift Supervisor in this instance. Many cited the offender's safety as the priority in these circumstances.
	Additional documentation received included Missouri DOC forms 931-4691 for PREA Allegation Notification Penetration/Non-Penetration Event Checklists for the ten random investigations reviewed. These support that the offender victims were routinely placed back on the assigned housing unit and not moved.

Based upon the evidence discussed: review of policies, random and specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.63 D1-8.13 Offender Sexual Abuse and Harassment covers the notification requirements for facilities who receive notifications of sexual abuse at their facility and when the abuse occurred at another facility. The notifications are made within 72 hours after the allegations are received and the agency documents that the notifications are made using a Notification Checklist. If the alleged abuse occurred at a facility outside the department, the notification checklist is forwarded to the department's PREA coordinator.
	JCCC reported that over the past 12 months, two reports were received from inmates of assaults that occurred at another facility. Both allegations were referred to the other facilities Potosi Correctional Center (PCC) and WECC within 72 hours. Notifications were made used a standardized format PREA Allegation Notification Checklist – Institution, form 931-4691.The warden of the facility making the notification was listed on the checklist for notifications. Notifications to the agency PREA Coordinator were made. The wardens at PCC and WECC are not listed and the facility notifications to PCC and WECC were noted by hand on the forms.
	JCCC reported that over the past 12 months, one report was received from inmates housed at other facilities of assaults that occurred at the facility. The referral of the allegation was made from the Farmington Correctional center using a standardized format PREA Allegation Notification Checklist – Institution, form 931-4691. Attached with the notification was a Request for Investigation 931-4151. The forms shows the investigation was initiated and assigned case number 2016040059.
	The Agency Head indicated that all allegations are handled by the investigators with the Deputy Warden (PREA Compliance Manager) being the point of contact at each facility. The warden indicated that the allegations would be forwarded for investigations. While the interview was being conducted, the warden received such a notification and made the referral for investigation during the interview.
	Based upon the evidence discussed: review of policies, interview with the warden and other specialized staff, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.64 D1-8.13 Offender Sexual Abuse and Harassment covers the criteria in this standard to include (1)separation of victim and abuser, (2) preservation of crime scene and collection of evidence, (3) ensuring that the victim and suspect not take actions that could destroy physical evidence if it occurred within a time frame that allows for the collection. JCCC follows a time frame of 120 hours. The PREA Allegation Notification Checklist is used to document these actions.
	In the past 12 months, JCCC had 34 allegation of sexual abuse, 11 of those required staff to separate the victim and abuser, Of those allegation, five allowed for the collection of physical evidence, 4 cases where the first responder was security staff and was able to preserve and protect the scene and where the victim and abuser were advised not to take actions that would destroy evidence.
	The PREA Coordinator and Compliance Manager for JCCC indicated that all staff are considered to be First Responders. Staff interviewed were able to describe each of the actions listed in their policy and consistent with this standard. They described actions that would be taken as they related to the scene, victim and perpetrator of sexual abuse. It should be noted that each person indicated that they would separate the victim and abuser, but would not likely take part in actual evidence collection, as that would be handled by the SANE and investigative staff. As noted previously, most staff would make notification to their immediate supervisor, or through their chain-of-command. Several identified the Shift Supervisor as the person to whom they would make the report. All expressed the need for confidentiality and the limitation of sharing information with those that did not need to know.
r a c	Staff who have acted as First Responders addressed each step taken to ensure a proper esponse: Ensure the safety of the victim. Request the victim and perpetrator not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing slothes, urinating, defecating, smoking, drinking, or eating, when applicable and to notify the Shift Supervisor and Mental/Medical Health personnel immediately.
	Additional documentation reviewed onsite included the notification checklists for the allegations that allowed the collection of physical evidence in conjunction with ten randomly selected investigative file reviews. The forms reviewed support that the efforts to preserve evidence.
i	Based upon the evidence discussed: review of policies, random and specialized staff nterviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.65 Jefferson City Correctional Center Coordinated Response to Sexual Abuse is the institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. In the introduction section of the plan, it reads, "The following offender sexual abuse protocol coordinates actions taken by staff first responders, medical and mental health practitioners, investigators, advocates and facility leadership. The PREA Allegation Notification Checklist has been developed to ensure appropriate notifications are made in a timely and consistent manner."
	The Warden indicated that they have a plan and was able to describe the implementation of the plan by using examples and their own paperwork. The ten random staff interviews and PREA Allegation Notification Checklists reviewed by the auditor support that these actions are occurring as outlined by the plan.
	Based upon the evidence discussed above and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.66 D2-11.6 Labor Organizations and the Labor Agreement Between the State of Missouri Office of Administration – The Department of Corrections Division of Adult Institutions and Missouri Corrections Officers Association (MOCOA) Corrections Officers I and II Bargaining Unit covering 10/1/2014 to 9/30/2018 supports that the agency is not limited in its ability to remove the alleged staff sexual abuser from contact with any inmates pending the outcome of the investigation. The agreement does not restrict the conduct of the disciplinary process and whether a "no-contact" assignment imposed during the investigation is expunged from or retained in the staff member's personnel file.
	The Agency Head Designee stated that they are part of a collective bargaining agreement and that they are able to assign and move staff. The facility does allow for bid posts but this does not impact on the ability to remove staff from inmate contact pending an investigation. The random PREA allegation notification checklists reviewed during the audit support that the offender remains in the housing unit and staff are moved, as warranted.
	Based upon the evidence discussed: review of the labor agreement, interview with the Warden, documentation obtained onsite, the facility has demonstrated compliance with this standard.

	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.67 D1-8.13 Offender Sexual Abuse and Harassment is the policy that addresses this standard to ensure all victims and reporters and those that cooperate with offender sexual abuse and harassment investigations or inquiries are monitored and protected from retaliation. The agency's obligation to monitor is terminated if the allegation is unfounded.
(;; ;	MDOC Assessment/Retaliation Status Checklist 931-4689, requires initial face-to-face status checks on all victims, reporters and witnesses following allegations of offender sexual abuse and/or harassment. Face-to-face checks are required at a minimum of every 30 days thereafter until the 90 day mark is reached. The checks include monitoring of conduct violations, housing assignments, program changes and need for emotional services for victims. For staff the checks include, performance reviews, member reassignments, and the need for emotional services.
	The Agency Head designee indicated that they take actions to monitor and separate the offenders to protect them from retaliation for sexual abuse/harassment reporting. He indicated that this was under the purview of the Deputy Warden (PREA Compliance Manager) at each facility. When interviewed the Warden at JCCC added that a referral would be made for investigation if retaliation is found.
	At JCCC the Deputy Warden designates the responsibility to Classification staff at the Units. These staff monitor offenders who are housed within their housing unit. Once an offender is moved to a different housing unit, a new person would initiate monitoring on their end. Ways that staff indicate they monitor an offender included talking with the offender, being available to the offender and ensuring that these contacts occur at least every $30 - 60$ and 90 days. One person was able to meet with her offenders daily. They indicated that monitoring could continue if needed. They cite no instances where monitoring was continued beyond 90 days.
i	No offenders were currently at the facility segregated housing based upon a risk of sexual abuse. The offender who made the report (from 2010) had not been placed on involuntary protective custody.
	All of the monitoring forms reviewed showed that conduct violations, housing assignments, program changes and the need for emotional services were to be addressed in compliance with the standard. Staff persons routinely made notations on the document in this section. However, the design of the form does not clearly address if staff are actually reviewing those areas. A suggestion to improve the form would be to include a check box after each area, in addition to the notations in each area.
	Based upon the evidence discussed: review of policies, random and specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.68 D1-8.13 Offender Sexual Abuse and Harassment, PREA Coordinated Response Protocol and Involuntary Segregated Housing for Protective Custody address involuntary segregated housing to ensure that all available housing alternatives are made as required in § 115.43.
	In the pre-audit the facility indicated that one offender was placed in involuntary segregation (10-15-16) as the recipient of notes seeking sexual acts. The offender was described as small in stature and having low education scores and at increased risk of sexual victimization. The offender expressed his desire not to be on protective custody. At the time of the placement, the offender was facing 3 conduct reports and had 8 for the prior year. Less than 30 days late (11-3-16), the offender was placed on administrative segregation based on his conduct history at the facility.
	While onsite, the facility staff indicated that they two occurrences where an offender had been placed on involuntary segregation. When the second instance was found, ten days after it occurred, the facility made immediate adjustments and took corrective action to move the offender. No offenders were currently assigned to facility segregated housing based upon a risk of sexual abuse.
,	No offenders were housed on involuntary segregation for a period exceeding 30 days at JCCC. The warden confirms that offenders at high risk of sexual victimization or abuse are only placed on the unit as a last resort and that a committee meets to recommend housing for offenders within 5 days of the initiation of the investigation.
tosota (acob	Staff who supervise inmates in segregated housing indicate that programs can be limited based upon the type of segregation a person is placed on. The administrative segregation and disciplinary segregation are staggered. An offender could serve two weeks of disciplinary segregation, followed by one week of administrative segregation and back to two weeks of disciplinary segregation time. Some of the housing units offer socialization programs designed to help the offender return to general population, the programs include anger management and GED programs. The housing on the unit is generally single-celled housing called TASC Temporary Ad Seg Confinement). Some staff indicated that offenders who alleged sexual abuse would be placed on the unit until the investigation could be completed. When an offender is housed on the segregated housing unit, the facility maintains individual confinement records and computerized tracking programs to document daily activities for the offender, to include: meals, showers, suicide watches and any special security orders that may be applicable to the offender. The offenders are reviewed every 30 days while on the unit, regardless of the initial reason for placement on the unit.

Additional documentation reviewed onsite included Missouri DOC forms 931-4691 for PREA Allegation Notification Penetration/Non-Penetration Event Checklists for the random investigations reviewed. These support that the offender victims were routinely placed back on the assigned housing unit and not moved.

	Based upon the evidence discussed: review of policies, random and specialized staff
	interviews, observations and documentation obtained onsite, the facility has demonstrated
	compliance with this standard.

5.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.71 (a) D1-8.4 Administrative Inquiries is the administrative policy related to administrative agency investigations. D1-1.1 Investigations is the administrative policy related to criminal investigations. Together these policies address the investigative requirement to be prompt, thorough and objective. The policies addresses each section of this standard with the exception of §§115.71 (d) (k) and (l). §§115.71 (k) and (l) are not applicable to JCCC.
	In a memorandum attached to this section as part of the Pre-Audit Questionnaire, it reads, "The MDOC conducts all offender sexual abuse and harassment investigations. All allegations that appear to be criminal are investigated by the Office of the Inspector General. Sexual harassment investigations as well as investigation regarding pat searches are investigated by the facility's Administrative Inquiry Officer (AIO) who reports to the warden."
	115.71 (b)(c) The Lesson Plan for PREA Specialized Investigator Training, Module 4, Investigating Allegations of Sexual Abuse, In this module the investigator is advised that they, " must look at all of the potential evidence to be collected from various sources, including: the victim's body and clothing, the suspect's clothing, and the location where the assault took place, and any additional locations where transfer evidence might be found." The module continues with information on gathering of direct and circumstantial evidence, electronic monitoring data, interviews of victims and suspected perpetrators, and witnesses, a review of prior complaints and reports of sexual abuse involving the suspected perpetrator. It includes testimonial evidence, credibility assessments, the need to corroborate information received and the criteria to substantiate administrative and criminal investigations.
	Lists of Investigators who completed training in 2012 and 2014 were provided. The criminal and administrative investigators assigned to the facility had completed the specialized training.
	The three staff who conduct either criminal and administrative investigations were interviewed. All staff indicated immediate initiation of an investigation. The investigative process was similar with both the administrative and criminal investigators talking with the victim, perpetrator and determining the basis for the allegation. They would obtain written statements, identify witnesses and gather evidence. All indicated that the third-party reports are handled the same as other reports of sexual abuse/harassment.
	From the list of investigations (45 administrative and 21 criminal), a random sampling of ten investigations was obtained. Each shows that investigators were clearly documenting their investigative work and all evidence relied upon during the investigation, to include testimonial, documentary and other types and that the investigations were being immediately initiated.
	115.71 (d) The two administrative investigators do not make referrals for prosecution. They indicated if a case appeared to be criminal, they would cease and forward it to the criminal investigator. The criminal investigator indicated that he would make a referral if the case was clearly criminal. None of the staff interviewed were familiar with the term "compelled interview". The criminal investigator had not heard of the term but related that he did not consult with the term 56

prosecutor at any time during the investigative process and only when a referral was being made. He added that if no progress was being made in a criminal investigation that he would conduct the administrative interview knowing that no prosecution would be obtainable.

The question of compelled interviews was raised during the onsite visit. The PREA Coordinator produced an email from the Inspector General which read, "Our office only conducts compelled interviews in administrative investigations when an employee is being uncooperative. We do not compel an alleged perpetrator to talk to us in a criminal investigation. We may contact the prosecutor's office during the interview process if there are questions related to interviews or evidence but we do not contact the prosecutor on every case during the investigative process. We do discuss the cases referred to the prosecutor when they are presented for consideration of charges. If the prosecutor asks us to conduct additional investigative work, we will do so."

115.71 (e) All investigators were asked about credibility assessments indicating they "would get additional information", "remain objective...would look at the history" and would do so on a "situational basis" in conjunction with physical evidence obtained. When asked about the use of polygraph of other truth-verification instruments, most indicated that they would not utilize them. The other was not aware of the usage of such instruments in investigations.

None of the selected reports reviewed showed any usage of polygraph of truth-verification devices.

115.71 (f)(g) The three Investigators interviewed on this subject confirmed that all investigations: criminal and administrative are documented in written reports containing the basis for the findings, with physical evidence, interview reports and other evidence reviewed (testimonial and documentary) in the investigation. A random selection of investigations reviewed support this information.

Investigative interviews yielded responses that they would check into the history on the staff and offender for prior investigations, would check to ensure that staff are conducting rounds and would make recommendations to the Superintendent on their findings.

115.71 (h) JCCC provided one (1) case that had been referred for prosecution during that time. It was not accepted for prosecution. No other cases were presented during that time. The criminal investigator confirmed that he would present the case if it were clearly criminal.

Agency Records Disposition Schedule for the Department of Corrections, Section Inspector General shows retention of 25 years for investigative files and 50 years for sexual abuse cases, with the description, "Documentation of investigations of offenders and employees within the Department of Corrections that pertain to sexual abuse. This may include, but is not limited to investigations involving volunteers, interns, contractors and inmates. Records must be maintained per section 115.71 (h)."

115.71 (i) D1-8.13 Offender Sexual Abuse and Harassment, Section III-J7, page 21, reads, "Administrative and criminal investigation reports will be retained for 90 years from the completion of the investigation and in accordance with the department procedure regarding records retention." 115.71 (j) Investigators indicated that they would make follow-up notifications, try and catch the person if they submitted a resignation with notice prior to them leaving or attempt to reach them outside the facility if the person already terminated employment. With offenders the same could be done and other investigators could interview them if a facility transfer was involved.

Based upon the evidence discussed: review of policies, specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.72 D1-8.13 Offender Sexual Abuse and Harassment, and D1-8.1 Investigations support that investigations will impose no standard higher than the preponderance of evidence in determining whether an allegation of offender sexual abuse or harassment is substantiated.
	The facility investigators, both criminal and administrative, do not make the determinations of findings in the cases. The determination is made by the Warden at the facility. The criminal investigator was able to delineate the difference between the "preponderance of evidence" and "beyond a reasonable doubt standards". The administrative investigators were not familiar with the standard and indicated that the cases get sent to the Warden for review.
	The Warden was not asked if he could differentiate between the standards. The ten investigations reviewed support that the Warden was able to differentiate between substantiated, unsubstantiated and unfounded and that these determinations were based upon a preponderance of evidence standard. The determinations made were consistent with the material reviewed. It is recommended that the administrative investigators receive some additional training to ensure that all staff are aware of the criteria.
	Based upon the evidence discussed: review of policies, specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.73 (a) D1-8.13 Offender Sexual Abuse and Harassment, outlines the responsibility to inform the inmate whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.
	115.73 (b) is not applicable to JCCC. No outside entity conducted investigations of alleged sexual abuse at the facility in the past 12 months.
	115.73 (c) Involves staff and covers whether the staff person 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 facility, or has been convicted on a charge related to sexual abuse within the facility.
	Several administrative cases were provided by JCCC. All three relate to allegations of Staff on Inmate Sexual Misconduct. A log showing notifications made was also provided. JCCC wrote in the Pre-Audit Questionnaire, that they had no instances where subsequent notification was required.
	Several criminal investigations were provided by JCCC. In case 201600044, the finding is shown as "No statute violation". A check of the log provided shows that the case referenced above was closed as "Unsubstantiated" and that same log shows a notification being made to the offender on 11/15/2016.
	115.73 (d) Involves other inmates and covers whether 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.
	Notification sheet provided for criminal investigation 20160400059 showing a date of 7-19-2016 (shown in log as 7-19-2016). Notification sheet provided for criminal investigation 2016080028 showing a date of 11-14-2016 (shown in log as 11-14-2016). Both notifications concerned inmate-inmate allegations.
	The Warden and Investigators interviewed on this subject were aware of the notification requirement and stated that these notifications were made by facility staff. No inmates who reported sexual abuse were available for interview. However, the offenders who received these notifications signed for them.
	From the list of investigations (45 administrative and 21 criminal), a random sampling of ten investigations was obtained, to ensure that all notifications were completed Additional notifications for the ten randomly selected investigations further support that the notifications are made in compliance with this standard in the manner detailed above.

Based upon the evidence discussed: review of policies, random and specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 D1-8.13 Offender Sexual Abuse and Harassment, reads, "Staff members will be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment procedures." This policy ensures that the disciplinary actions taken are commensurate with the nature and circumstances of the acts committed and that the sanctions were comparable to those given to other staff with similar histories.
	JCCC reported one staff person had been disciplined in the past 12 months pursuant to this policy and provided the administrative investigation and disciplinary notice regarding the incident. The disciplinary action taken was consistent with the behavior for the person involved. This behavior did not involve sexual abuse and the staff person was not terminated. In reading the report, the allegation was the use of unprofessional language directed at an offender. The staff person received a negative notation in their performance log relative to the incident, noting that further incidents could result in disciplinary action and that their performance will continue to be monitored.
	JCCC reported no staff who were terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. JCCC also indicated that no staff had been reported to local law enforcement or licensing boards for violation of these same policies.
	Based upon the evidence discussed: review of policies and the documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.77 D1-8.13 Offender Sexual Abuse and Harassment, covers corrective action for contractors and volunteers who engage in sexual abuse, prohibiting them from contact with offenders and reporting to relevant licensing bodies and law enforcement."
	The Warden was clear in his understanding on the requirements to prohibit contact relative to this standard and indicated that they had no occurrences over the past year.
	Based upon the evidence discussed: review of policies, and specialized staff interview onsite, the facility has demonstrated compliance with this standard.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.78 D1-8.13 Offender Sexual Abuse and Harassment, address disciplinary sanctions for inmates to include: the application of disciplinary sanctions following a formal disciplinary process that such sanctions are commensurate with the nature and circumstances of the abuse committed and sanctions imposed on other offenders with similar histories. It further outlines the offering of therapy and counseling to address and correct the underlying reasons or motivations for the abuse. In instances where the staff person did not consent to such contact, allows for the offender to be disciplined. The policy also prohibits all sexual activity between inmates and deems such activity to constitute sexual abuse only if it determined the activity was coerced. Section (e) was not covered in the policy.
	In reference to Section (e), the MDOC intranet page was provided during the audit. This page showed a link to the section for disciplinary sanctions and Mental Health. On the page that is linked it reads, "A report of offender 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 the investigation does not establish evidence sufficient to substantiate the allegation or the allegation is unfounded."
	In the past twelve months there were no findings of guilt for administrative or criminal findings for inmate-on-inmate sexual abuse that occurred at the facility. The Warden indicated that offenders are subject to disciplinary sanctions for violations and that the sanctions imposed are commensurate in accordance with other offenders and the offender's own history. Additionally, he indicated that mental illness or disabilities are taken into consideration during this process.
	The three staff interviewed and assigned to Mental Health support that referrals are made and that individual counseling is available for offenders. The offender can choose to participate in the counseling. They do not compel the involvement or condition it for access to other programming.
	Based upon the evidence discussed: review of policies, specialized staff interviews onsite, the facility has demonstrated compliance with this standard.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.81 (a)(c) D1-8.13 Offender Sexual Abuse and Harassment, addresses the disclosure of sexual victimization of the perpetration of sexual abuse under § 115.41 ensuring that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.
	At JCCC casework staff conduct the screenings and make the referrals for medical or mental health. A random check of twenty offender files supports that the referral are being made with the offender's consent and within 14 days of the disclosure for every offender who made the disclosure during the screening process. The information obtained during these screenings is limited to classification and other personnel as needed to made security, management, treatment, housing, bed, work, education and programming assignments in compliance with this standard.
	Two offenders who had disclosed sexual abuse confirmed that they were asked if they wanted to meet with medical and/or mental health personnel. Each of the offenders interviewed, indicated that they declined to meet with the medical or mental health staff.
	The three Medical/Mental Health staff interviewed confirm the limitation of information to those who need to make treatment, investigation and other security and management decisions and the site visit supports that medical records are maintained in a secure location without offender access. Medical/Mental Health staff interviewed confirmed that they obtain informed consent from inmates prior to reporting sexual victimization that did not occur in an institutional setting.
	JCCC does not house youthful offenders.
	Based upon the evidence discussed: review of policies, specialized staff/offender interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

5.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.82 D1-8.13 Offender Sexual Abuse and Harassment, ensures the timely access to emergency care and crisis intervention, maintenance of secondary documentation and actions to take in the absence of qualified medical health practitioners. Treatment services are provided without financial cost regardless of whether the victim names the abuser or cooperates in the investigation. These services include timely access to treatment for emergency contraception and sexually transmitted infections prophylaxis, in accordance with professional accepted standard of care. JCCC does not house female offenders.
	To support these actions are taken place, a standardized form is utilized to document that emergency services and crisis intervention was provided, to include the information on sexually transmitted diseases and treatment. This material includes information on contraception.
	Four staff who have acted as First Responders were interviewed and addressed each step taken to ensure a proper response: Ensure the safety of the victim. Request the victim and perpetrator not to take any actions that may destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, when applicable and to notify the Shift Supervisor and Mental/Medical Health personnel immediately.
	JCCC has a 29-bed infirmary and fully-staff medical unit which operates 24 hours a day, 7 days a week. The facility utilizes a SANE qualified nurse and also has several other SANE qualified nurses on call, as needed. Medical and Mental Health staff confirm that treatment is available to offenders and provide it based upon whether the event was "penetration" or "non-penetration" type of event. The penetration event being immediate, the latter occurring within 24 hours. The medical professional is the one who determines the nature and scope of treatment.
	Corizon Contract Section 2.3.3 and Section 2.4.1 Concern the delivery of services and PREA Compliance, which reads, "Corizon will comply with the Prison Rape Elimination Act of 2012 and will follow and enforce the MDOC's D1-1.13 Offender Sexual Abuse and Harassment policy with the assurance that access to medical and behavioral health care will be provided immediately, upon report or discovery, to victims of sexual misconduct." Section 3.1.12 Hospital Care outlines the contractor requirement to obtain a written agreement that outlines the terms of medical care services from hospitals that are used regularly. This includes the billing for services and any billing that would be applicable for Medicaid.
	Of note, all offender health care is covered, they are not currently charged for any medical costs.

Based upon the evidence discussed: review of policies, contractual information, specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

Auditor Overall Determination: Meets Standard
Auditor Discussion
115.83 D1-8.13 Offender Sexual Abuse and Harassment, concerns timely information and access to emergency contraception and prophylactic treatment for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate. This treatment includes medical and mental health evaluations, and as appropriate, treatment to include appropriate follow-up services and treatment plans consistent with the community level of care. When necessary, referrals will be completed for continued care following their transfer to, or placement in, other facilities or their release from custody. This policy addresses pregnancy tests and pregnancy-related services. JCCC does not house female offenders.
The policy requires tests for sexually-transmitted infections, as medically appropriate and tha these treatment services are offered at no cost to the victim. A mental health evaluation of all known inmate-on-inmate abusers is also attempted within 60 days of learning about the abuse history.
The contract with Corizon, Section 2.3.3 and Section 2.4.1 concerns the delivery of services and PREA Compliance, Section 3.1.12 Hospital Care includes the billing for services and any billing that would be applicable for Medicaid. Of note, all offender care is covered, they are no currently charged for any medical costs.
The three Medical and Mental Health staff interviewed reported that once treatment was initiated they would continue with follow-up services as needed by the offender. Staff reaffirmed that the offenders are offered individual counseling that is consistent with the care provided in the community. The Medical and Mental Health Staff knew of the requirement for following up with the offender on learning of the abuse history but had not done so yet. They indicated that when a referral is made they would follow up and provide therapy as warranted
There were zero instances of staff or inmate sexual abuse that occurred over the past twelve months that would have allowed for a mental health notification. The disclosure information obtained during the screening is routinely reported. The ten random staff interviews, 22 specialized staff interviews, and documentation obtained onsite for the 20 random offender packets supports that those disclosures have taken place in each incident.
Based upon the evidence discussed: review of policies, contracts, specialized staff interviews observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.86 D1-8.13 Offender Sexual Abuse and Harassment, covers the requirement to conduct sexual abuse incident debriefing at the conclusion of every substantiated and unsubstantiated offender sexual abuse investigation or inquiry. JCCC utilizes PREA Sexual Abuse Debriefing form M931-4695 to conduct incident reviews. The reviews cover each of the six (6) criteria outlined in the standard.
	Five (5) cases were provided for review prior to the audit. All the cases were closed as "Unsubstantiated" that were provided for review. There were no substantiated cases over the past twelve months Debriefings were found to be conducted relative to all investigations of sexual abuse that were reviewed pursuant to the review of the investigative files. In the cases provided for review, medical, supervisory and investigative staff were shown to be present in each debriefing held.
	Case 2016090087 was closed on 11/15/16. However, the case was not forwarded to the facility until 12/28/16. The debriefing was held on 1/12/17. This is the only case that appears to be outside of the time limit. Ten randomly selected debriefings checked onsite support that the debriefings are held within the required time frame.
	None of the debriefing forms provided prior to the audit showed any recommendations for changes, to policy, any errors or problems on corrective actions to be taken. This was also the case with the ten additional debriefings reviewed onsite.
	The Warden confirmed the use of the team described above to conduct the debriefings and the information that should be reviewed pursuant to the debriefings. The PREA Compliance Manager confirmed that the debriefings took place and covered the areas above. He added that no recommendations for improvements had been made since the last audit. If the issue would involve a staffing concern, he would contact the state PREA Coordinator for her input. Other members of the Incident Review team confirmed the same information was covered.
	Based upon the evidence discussed: review of policies, specialized staff interviews, observations and documentation obtained onsite, the facility has demonstrated compliance with this standard.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.87 D1-8.13 Offender Sexual Abuse and Harassment address the annual reporting requirement and collection of uniform data using a standardized instrument and definitions necessary to answer the most recent survey of sexual violence conducted by the Department of Justice.
	"The MDOC PREA Annual Report for 2015 reads, "Pursuant to PREA Standards 115.87, 115.88 and 115.89, the department collects data from allegations of offender sexual abuse and harassment in a secure investigative case management system. This data is aggregated and reviewed annually at the facility level and then by the agency in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response to offender sexual abuse and harassment. Below is an overview of upgrades made during the 2015 calendar year." The data includes: progress made in the year, trend analysis with comparisons of data from prior years, investigative summary of cases and corrective action. This report, along with reports from 2010-2014, can be found on the agency website. The web address for the current year is: http://doc.mo.gov/Documents/PREA/2015_PREA_Data.pdf. This report meets the criteria described in the standard.
	The system currently in use is Corrections Information Network (COIN), which is used to aggregate the data required as part of the Survey of Sexual Violence (SSV). This information is provided back to the Division Directors, Wardens and Site Coordinators (PREA Compliance Managers). Policy D1-8.1 Investigations outlines the Investigation Records Intelligence System (IRIS): Case management system as the system that MDOC is transitioning to for the management of investigative data.
	The PREA Coordinator was interviewed and confirmed that they collect data for the state and utilize that data in their efforts to prevent, detect and respond and make changes to their policies and training, accordingly. The COIN system was cited as the tracking currently in use.
	Based upon the evidence discussed: review of policies, specialized staff interviews, observations and documentation obtained, the facility has demonstrated compliance with this standard.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.88 D1-8.13 Offender Sexual Abuse and Harassment, requires the agency to use data collected in 115.87 to address the effectiveness of their sexual abuse prevention program, including the identification of problem areas, corrective actions taken and the preparation of an annual report, with comparative data for the prior years. The department's annual PREA is available to the public on the department's internet website.
	The MDOC PREA Annual Report for 2015 reads, "Pursuant to PREA Standards 115.87, 115.88 and 115.89, the department collects data from allegations of offender sexual abuse and harassment in a secure investigative case management system. This data is aggregated and reviewed annually at the facility level and then by the agency in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response to offender sexual abuse and harassment. Below is an overview of upgrades made during the 2015 calendar year." The data includes: progress made in the year, trend analysis with comparisons of data from prior years, investigative summary of cases and corrective action. This report, along with reports from 2010-2014, can be found on the agency website. The web address for the current year is: http://doc.mo.gov/ Documents/ PREA/2015_ PREA_ Data.pdf. supporting that the agency is in compliance with this standard.
	The Warden indicated that he utilized the data to determine if there were blind spots or other areas of concern that he could address. The Warden approves facility-generated reports submitted by the PREA Compliance Manager. The Warden further indicated that he did not approve the reports submitted by the agency pursuant to this standard, but that the Director would be the one to make the approval for those reports. The PREA Coordinator stated that the agency was in compliance with this standard.
	The PREA Coordinator indicated that nothing would be redacted from the annual report.
	Based upon the evidence discussed: review of policies, specialized staff interviews, observations and documentation obtained, the facility has demonstrated compliance with this standard.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.89 The Agency Records Disposition Schedule for the Department of Corrections, Section Inspector General shows retention of 25 years for investigative files and 50 years for sexual abuse cases of offenders and employees within the Department of Corrections. This may include, but is not limited to investigations involving volunteers, interns, contractors and inmates.
	The MDOC PREA Annual Report for 2015 reads, "Pursuant to PREA Standards 115.87, 115.88 and 115.89, the department collects data from allegations of offender sexual abuse and harassment in a secure investigative case management system. This data is aggregated and reviewed annually at the facility level and then by the agency in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response to offender sexual abuse and harassment. Below is an overview of upgrades made during the 2015 calendar year." The data includes: progress made in the year, trend analysis with comparisons of data from prior years, investigative summary of cases and corrective action. This report, along with reports from 2010-2014, can be found on the agency website. The web address for the current year is: ttp://doc.mo.gov/Documents/PREA/2015_PREA_Data.pdf.
	When interviewed, the PREA Coordinator cited the use of the COIN system as a means of record retention.
	Based upon the evidence discussed: review of policies, specialized staff interviews, observations and documentation obtained, the facility has demonstrated compliance with this standard.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401 The agency publishes the names of each facility and location. This list was compared with the posting of audits from 2014 to the present. The audits show that each facility listed was audited once from 2014-2016. Western Missouri Correctional Center (WMCC) is shown as being audited again for 2017. Note, the dates of audits shown on the website is the date of publication. The site visit may have occurred in the prior year, as is the case with the posting for WMCC.
	Contracts were awarded under the numbers CS160754001, CS160754002 and CS160754003. Each contract for residential facilities contained language requiring adherence to PREA and to the audit standards, and two of the three recipients included their PREA Audit history and PREA Operating Standards as part of the contract.
	In 2014, Missouri had two (2) facility audits shown on the website. In 2015, that number was fourteen (14). In 2016, the number is ten (10). The total audited is 26, which matches the number of facilities, to include community correction facilities. The information on the site does not include information for the three contracted agencies that operate the residential facilities.
	The auditor toured the entire facility finding that most of the housing units were structurally identical.
	The auditor received one letter from an offender. The letter did not concern a PREA issue.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 (f) The agency publishes the names of each facility and location. This list was compared with the posting of audits from 2014 to the present. The audits show that each facility listed was audited once from 2014-2016. Western Missouri Correctional Center (WMCC) is shown as being audited again for 2017. Note, the dates of audits shown on the website is the date of publication. The site visit may have occurred in the prior year, as is the case with the posting for WMCC.

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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.)	yes

115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)	yes

115.13 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into	yes

consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?	
Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ?	yes

115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes

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

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)	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 here for facilities with less than 50 inmates before August 20,2017.)	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?	yes

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement a policy and practice 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	yes

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?	
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, or 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.)	yes

115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	15.21 (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 entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na

115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.)	yes

115.22 (a)	5.22 (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 such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	.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)	.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 such education?	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 have received 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?	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?	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?	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?	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.)	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?	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?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?	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?	no

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, when 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, when 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, when 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 a: Incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: 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?	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?	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?	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 access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	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?	no

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from 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?	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 residents 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).)	na

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.73 (c)	Reporting to inmates	
	Following a 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 posted within the inmate's unit?	yes
	Following a 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 a 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 a 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	
	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?	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?	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.)	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.)	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 three-year period starting on August 20, 2013, and during each three-year period thereafter, 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.? (N/A before August 20, 2016.)	yes

115.401 (b)	Frequency and scope of audits	
	During each one-year period starting on August 20, 2013, 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?	yes

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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 that there has never been a Final Audit Report issued.)	yes