#### **PREA Facility Audit Report: Final**

Name of Facility: Northern State Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 09/08/2022

| Auditor Certification   |  |   |
|---|--|---|
| The contents of this report are accurate to the best of my knowledge.   |  |   |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.   |  | V |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. |  | V |
| Auditor Full Name as Signed: Darren Bryant  Date of Signature: 09/08/2022   |  |   |

| AUDITOR INFORMATION          |                    |
|------------------------------|--------------------|
| Auditor name:                | Bryant, Darren     |
| Email:                       | dbryant357@msn.com |
| Start Date of On-Site Audit: | 07/11/2022         |
| End Date of On-Site Audit:   | 07/13/2022         |

| FACILITY INFORMATION       |   |
|----------------------------|---|
| Facility name:             | Northern State Prison                         |
| Facility physical address: | 168 Frontage Road, Newark, New Jersey - 07114 |
| Facility mailing address:  |   |

| Primary Contact   |                        |
|-------------------|------------------------|
| Name:             | Fathom Borg            |
| Email Address:    | Fathom.Borg@doc.nj.gov |
| Telephone Number: | 973-465-0068 x4119     |

| Warden/Jail Administrator/Sheriff/Director |                            |
|--|----------------------------|
| Name:                                      | Patricia McGill            |
| Email Address:                             | Patricia.McGill@doc.nj.gov |
| Telephone Number:                          | 973-465-0068 x 4120        |

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

| Facility Health Service Administrator On-site |                         |
|---|-------------------------|
| Name:   | Kathleen Smith          |
| Email Address:                                | kms627@ubhc.rutgers.edu |
| Telephone Number:                             | 973-465-0068 x 4830     |

| Facility Characteristics  |  |  |
|---|--|--|
| Designed facility capacity:   | 2628   |  |
| Current population of facility:   | 1951   |  |
| Average daily population for the past 12 months:  | 1930   |  |
| Has the facility been over capacity at any point in the past 12 months?                                     | No   |  |
| Which population(s) does the facility hold?   | Males  |  |
| Age range of population:  | 20-80  |  |
| Facility security levels/inmate custody levels:   | els: Close, Medium, Gang Minimum, Full Minimum |  |
| Does the facility hold youthful inmates?  | No   |  |
| Number of staff currently employed at the facility who may have contact with inmates:                       | 808  |  |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 105  |  |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility:             | 1  |  |

| AGENCY INFORMATION                                    |  |
|---|--|
| Name of agency:                                       | New Jersey Department of Corrections                     |
| Governing authority or parent agency (if applicable): |  |
| Physical Address:                                     | Whittlesey Road, PO Box 863, Trenton, New Jersey - 08625 |
| Mailing Address:                                      |  |
| Telephone number:                                     | 6092924036   |

| Agency Chief Executive Officer Information: |                          |  |
|---|--------------------------|--|
| Name:                                       | Victoria L. Kuhn, Esq.   |  |
| Email Address:                              | Victoria.Kuhn@doc.nj.gov |  |
| Telephone Number:                           | 609-292-4036-5656        |  |

| Agency-Wide PREA Coordin | ator Information    |                |                                |
|--------------------------|---------------------|----------------|--------------------------------|
| Name:                    | Jennifer Malinowski | Email Address: | jennifer.malinowski@doc.nj.gov |

| SUMMARY OF AUDIT FINDINGS  |                 |  |
|--|-----------------|--|
| The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.  |                 |  |
| Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited. |                 |  |
| Number of stand  | dards exceeded: |  |
| 0  |                 |  |
| Number of standards met:   |                 |  |
| 45   |                 |  |
| Number of standards not met:   |                 |  |
| 0  |                 |  |

| POST-AUDIT REPORTING INFORMATION  |   |  |  |
|---|---|--|--|
| GENERAL AUDIT INFORMATION   |   |  |  |
| On-site Audit Dates   |   |  |  |
| Start date of the onsite portion of the audit:  | 2022-07-11  |  |  |
| 2. End date of the onsite portion of the audit:   | 2022-07-13  |  |  |
| Outreach  |   |  |  |
| 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?   | ⊙ Yes<br>⊙ No   |  |  |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated:   | Newark Beth Israel  |  |  |
| AUDITED FACILITY INFORMATION  | ON  |  |  |
| 14. Designated facility capacity:   | 2628  |  |  |
| 15. Average daily population for the past 12 months:  | 1930  |  |  |
| 16. Number of inmate/resident/detainee housing units:   | 30  |  |  |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?  | <ul> <li>Yes</li> <li>No</li> <li>Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</li> </ul> |  |  |
| Audited Facility Population Characteristics Audit   | on Day One of the Onsite Portion of the   |  |  |
| Inmates/Residents/Detainees Population Characteristics  | on Day One of the Onsite Portion of the Audit   |  |  |
| 36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:   | 2027  |  |  |
| 38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:  | 37  |  |  |
| 39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit: | 51  |  |  |
| 40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:  | 24  |  |  |

| Random Inmate/Resident/Detainee Interviews  |   |
|---|---|
| Inmate/Resident/Detainee Interviews   |   |
| INTERVIEWS  |   |
| 52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:   | No text provided.                                   |
| 51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:  | 1   |
| 50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:   | 2   |
| 49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:   | 808   |
| Staff, Volunteers, and Contractors Population Characteric   | Stics on Day One of the Onsite Portion of the Audit |
| 48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations): | No text provided.                                   |
| 47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:                                     | 0   |
| 46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:  | 0   |
| 45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:   | 0   |
| 44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:   | 1   |
| 43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:   | 0   |
| 42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:  | 90  |
| 41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:   | 11  |

| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:   | 22  |
|--|---|
| 54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)  | <ul> <li>✓ Age</li> <li>✓ Race</li> <li>✓ Ethnicity (e.g., Hispanic, Non-Hispanic)</li> <li>✓ Length of time in the facility</li> <li>✓ Housing assignment</li> <li>☐ Gender</li> <li>☐ Other</li> <li>☐ None</li> </ul>  |
| 55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?   | Auditor used housing roster and selected inmates from each housing unit.  |
| 56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?   | ⊙ Yes<br>⊙ No   |
| 57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):  | No text provided.   |
| Targeted Inmate/Resident/Detainee Interviews   |   |
| 58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:   | 20  |
| As stated in the PREA Auditor Handbook, the breakdown of targeted in cross-section of inmates/residents/detainees who are the most vulneral questions regarding targeted inmate/resident/detainee interviews below satisfy multiple targeted interview requirements. These questions are a inmate/resident/detainee protocols. For example, if an auditor interview housing due to risk of sexual victimization, and disclosed prior sexual victions questions. Therefore, in most cases, the sum of all the following categories will exceed the total number of targeted inmates/residents/on not applicable in the audited facility, enter "0". | able to sexual abuse and sexual harassment. When completing w, remember that an interview with one inmate/resident/detainee may asking about the number of interviews conducted using the targeted ws an inmate who has a physical disability, is being held in segregated victimization, that interview would be included in the totals for each of responses to the targeted inmate/resident/detainee interview |
| 60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:   | 1   |
| 61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:  | 1   |

| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:  | Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.                                 |
|--|---|
| 62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:   | 2   |
| 63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:  | 0   |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:  | <ul> <li>✓ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</li> <li>☐ The inmates/residents/detainees in this targeted category declined to be interviewed.</li> </ul> |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | Auditor spoke with medical, classification, and security staff about identifying inmates that identify as Deaf or hard of hearing.  |
| 64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:   | 9   |
| 65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:                                     | 1   |
| 66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:                                       | 1   |
| 67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:   | 2   |
| 68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:                    | 3   |

| 69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol: | 0   |
|---|---|
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:   | <ul> <li>✓ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</li> <li>☐ The inmates/residents/detainees in this targeted category declined to be interviewed.</li> </ul> |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).  | Auditor interviewed Facility Administrator and investigators. They explained, no inmates been placed in segregated housing due to sexual victimization.   |
| 70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):  | No text provided.   |
| Staff, Volunteer, and Contractor Interviews   |   |
| Random Staff Interviews   |   |
| 71. Enter the total number of RANDOM STAFF who were interviewed:  | 15  |
| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)  | <ul> <li>✓ Length of tenure in the facility</li> <li>✓ Shift assignment</li> <li>✓ Work assignment</li> <li>✓ Rank (or equivalent)</li> <li>✓ Other (e.g., gender, race, ethnicity, languages spoken)</li> <li>None</li> </ul>  |
| If "Other," describe:   | Auditor selected some female staff to determine if they receive cross gender pat searches, and to determine if they make their announcement when entering male housing units.   |
| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews?   | ⊙ Yes<br>⊙ No   |
| 74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):   | No text provided.   |
| Specialized Staff, Volunteers, and Contractor Interviews  |   |

| Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements. |   |  |  |
|---|---|--|--|
| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):  | 25  |  |  |
| 76. Were you able to interview the Agency Head?   | <ul><li>Yes</li><li>No</li></ul>  |  |  |
| 77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?   | • Yes • No  |  |  |
| 78. Were you able to interview the PREA Coordinator?  | <ul><li>♥ Yes</li><li>♥ No</li></ul>  |  |  |
| 79. Were you able to interview the PREA Compliance Manager?   | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</li> </ul> |  |  |

| 80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply) | <ul> <li>✓ Agency contract administrator</li> <li>✓ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</li> <li>☐ Line staff who supervise youthful inmates (if applicable)</li> <li>☐ Education and program staff who work with youthful inmates (if applicable)</li> <li>✓ Medical staff</li> <li>✓ Mental health staff</li> <li>✓ Non-medical staff involved in cross-gender strip or visual searches</li> </ul> |
|--|---|
|  | Administrative (human resources) staff  |
|  | Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff   |
|  | ✓ Investigative staff responsible for conducting administrative investigations  |
|  | ✓ Investigative staff responsible for conducting criminal investigations  |
|  | Staff who perform screening for risk of victimization and abusiveness   |
|  | ☐ Staff who supervise inmates in segregated housing/residents in isolation  |
|  | ✓ Staff on the sexual abuse incident review team  |
|  | ✓ Designated staff member charged with monitoring retaliation   |
|  | First responders, both security and non-security staff  |
|  | ✓ Intake staff  |
|  | ☐ Other   |
| 81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?                     | ⊙ Yes   |
| ,  | C No  |
| a. Enter the total number of VOLUNTEERS who were interviewed:  | 2   |

| b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)  82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?   | <ul> <li>✓ Education/programming</li> <li>☐ Medical/dental</li> <li>☐ Mental health/counseling</li> <li>✓ Religious</li> <li>☐ Other</li> <li>⑥ Yes</li> <li>ⓒ No</li> </ul>     |  |
|--|--|--|
| a. Enter the total number of CONTRACTORS who were interviewed:   | 1  |  |
| b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)   | <ul> <li>✓ Security/detention</li> <li>☐ Education/programming</li> <li>☐ Medical/dental</li> <li>☐ Food service</li> <li>☐ Maintenance/construction</li> <li>☐ Other</li> </ul> |  |
| 83. Provide any additional comments regarding selecting or interviewing specialized staff.   | No text provided.  |  |
| SITE REVIEW AND DOCUMENTA  | TION SAMPLING  |  |
| Site Review  |  |  |
| PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to mee the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information. |  |  |
| 84. Did you have access to all areas of the facility?  | ⊙ Yes  |  |
|  | ○ No   |  |
| Was the site review an active, inquiring process that inclu  | uded the following:  |  |
| 85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?   | ⊙ Yes<br>⊙ No  |  |

| 86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)? | ⊙ Yes<br>⊙ No   |
|---|---|
| 87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?  | <ul><li>⊙ Yes</li><li>○ No</li></ul>                                |
| 88. Informal conversations with staff during the site review (encouraged, not required)?  | • Yes • No  |
| 89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).  | No text provided.   |
| Documentation Sampling  |   |
| Where there is a collection of records to review-such as staff, contract supervisory rounds logs; risk screening and intake processing records auditors must self-select for review a representative sample of each ty          | ; inmate education records; medical files; and investigative files- |
| 90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?  | ⊙ Yes<br>⊙ No   |
| 91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).   | No text provided.   |
| SEXUAL ABUSE AND SEXUAL H   | IARASSMENT ALLEGATIONS  |

### SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

#### Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

|                                      | # of sexual<br>abuse<br>allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|--------------------------------------|-------------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-<br>inmate sexual<br>abuse | 21                                  | 0                            | 21                                 | 21  |
| Staff-on-inmate sexual abuse         | 11                                  | 0                            | 11                                 | 11  |
| Total                                | 32                                  | 0                            | 32                                 | 32  |

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

|                                    | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|------------------------------------|------------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual harassment | 10                                 | 0                            | 10                                 | 10  |
| Staff-on-inmate sexual harassment  | 10                                 | 0                            | 10                                 | 10  |
| Total                              | 20                                 | 0                            | 20                                 | 20  |

#### **Sexual Abuse and Sexual Harassment Investigation Outcomes**

#### **Sexual Abuse Investigation Outcomes**

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

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

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

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

|                               | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|-------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 15      | 0         | 6               | 0             |
| Staff-on-inmate sexual abuse  | 8       | 0         | 3               | 0             |
| Total                         | 23      | 0         | 9               | 0             |

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

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

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

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

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

|                                    | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|------------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual harassment | 9       | 1         | 1               | 0             |
| Staff-on-inmate sexual harassment  | 9       | 0         | 0               | 0             |
| Total                              | 18      | 1         | 1               | 0             |

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

#### Sexual Abuse Investigation Files Selected for Review 52 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled: Yes 99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? O No NA (NA if you were unable to review any sexual abuse investigation files) Inmate-on-inmate sexual abuse investigation files 100. Enter the total number of INMATE-ON-INMATE SEXUAL 21 ABUSE investigation files reviewed/sampled:

| 101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?  | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</li> </ul> |
|---|---|
| 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?  | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</li> </ul> |
| Staff-on-inmate sexual abuse investigation files  |   |
| 103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:   | 11  |
| 104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?   | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li> </ul>  |
| 105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?   | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li> </ul>  |
| Sexual Harassment Investigation Files Selected for Revie  | w   |
| 106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:  | 20  |
| 107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any sexual harassment investigation files)</li> </ul>             |
| Inmate-on-inmate sexual harassment investigation files  |   |
| 108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:   | 10  |

| 109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?  110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?  | <ul> <li>○ Yes</li> <li>○ No</li> <li>○ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</li> <li>○ Yes</li> <li>○ No</li> <li>○ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</li> </ul> |
|---|--|
| Staff-on-inmate sexual harassment investigation files   |  |
| 111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:  | 10   |
| 112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?  | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</li> </ul>  |
| 113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?  | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</li> </ul>  |
| 114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.  | No text provided.  |
| SUPPORT STAFF INFORMATION   |  |
| DOJ-certified PREA Auditors Support Staff   |  |
| 115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. | ○ Yes  • No  |
| Non-certified Support Staff   |  |
| 116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. | <ul><li>⊙ Yes</li><li>○ No</li></ul>   |

| a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit: | 1   |  |
|--|---|--|
| AUDITING ARRANGEMENTS AND COMPENSATION   |   |  |
| 121. Who paid you to conduct this audit?   | <ul> <li>The audited facility or its parent agency</li> <li>My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</li> </ul> |  |
|  | <ul> <li>A third-party auditing entity (e.g., accreditation body, consulting firm)</li> <li>Other</li> </ul>  |  |
| Identify the entity by name:   | Corrections Management Communication Group  |  |

#### **Standards**

#### **Auditor Overall Determination Definitions**

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

#### **Auditor Discussion Instructions**

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

| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The facility meets this standard. The standard is addressed in the noted policies and procedures:  |
|        | <ul> <li>IMM.001.004 Zero Tolerance of Sexual Assault</li> <li>PCS.011.000 Office f Community Programs Zero Tolerance, PCS.011.008 Prevention, Detection and Response of Sexual Abuse and Harassment</li> </ul>  |
|        | The above was also confirmed by staff and inmate interviews. All were aware of the Zero tolerance policy. Inmates received training upon arrival to the facility. Staff has been trained and is trained annually during their in-service training. The department has an agency wide coordinator, and her sole responsibility is PREA. She coordinates with 7 others institutional PREA Managers. The PREA Coordinator was very knowledgeable about the PREA requirements and worked very hard trying to meet all PREA requirements. |
|        | The auditor interviewed the Facility PREA Compliance Manager. She indicated that she has more than enough time to perform her PREA duties. She has been in this position about 2 years and reports directly to the Facility Administrator. The auditor interviewed staff, and all acknowledged she is the point of contact for PREA.   |
|        | The auditor observed both organizational charts facility and State. The facility organizational chart shows the PREA Manager reports to the Facility Administrator. The State chart shows the PREA Coordinator reports only to the Commissioner of Corrections.  |

| 115.12 | Contracting with other entities for the confinement of inmates   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | A review of the uploaded documentation confirmed the agency requires contracts with other entities. The contractor is expected to adopt and comply with the PREA standards. All agency contractual agreements include the language requiring all contractors to adopt and comply with the PREA standards. The agency has a contract monitoring system to ensure that the contractor is complying with the PREA standards. Northern State Prison met the requirements of Standard 115.12. Evidence relied upon to make auditor determination: |
|        | <ul> <li>Pre-Audit Questionnaire</li> <li>Interview with the PREA Coordinator and Facility PREA Manager</li> <li>PCS.000.000 (Division of Programs and Community Services Vision, Mission, Goals, Objectives and Organizational Structure)</li> </ul>  |
|        | Those contracted facilities are audited internally by New Jersey Department of Corrections PREA Audit Team quarterly.  |

#### 115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility Northern State Prison meets the standard. The facility policy requires upper- level and intermediate level managers each of them to conduct regular and random unannounced rounds to identify and deter staff and inmate sexual misconduct. This auditor interviewed supervisors from each shift and Majors. All of them indicated that their rounds are documented by staff in the housing logbook, but the supervisors are also required to document in the Supervisory Logbook on post. This was verified by this auditor and their times were staggered.

The auditor reviewed logbook documentation and learned unannounced rounds were conducted by upper-level and intermediate-level custody management staff. Random unannounced rounds were examined (April 2021, June2021, and December 2021) by the Auditor. The examination confirmed that Northern State Prison conducted unannounced rounds on every shift and the unannounced rounds were conducted by a member of intermediate-level or upper-level management. Likewise, the facility has a procedure in place that allows correction managers to enter the facility without staff having an opportunity to alert other staff. The Assistant Facility Administrator confirmed during her interview that deviations from the approved staffing plan would be documented. The Auditor confirmed that Northern State Prison documented and justified all deviations from the established staffing plan for reasons such as:

- · Unscheduled medical appointments
- · Constant suicide watch
- · Emergency maintenance
- · An emergency inmate transfer
- · A state of emergency

An interview conducted with both Majors confirmed that they instructed their supervisors to immediately schedule overtime.

The auditor discussed annual reviews of the staffing plan with the facility PREA Compliance Manager. She confirmed that she considers current staffing levels and camera placements during their review. The auditor was provided the staffing review conducted in 2021 and 2022.

Auditor reviewed the following policies CUS 001.CRP.01 (Camera Review Procedures); CUS.001.011 (Searches of Inmates in Facility); and IMM 001.004 (Zero of Tolerance Sexual Assault) address the requirements of PREA standard 115.13. These policies require frequent monitoring of the staffing plan, frequent reporting on the effects of staffing on PREA supervision objectives, and regular facility rounds to assess sexual abuse vulnerabilities caused by staffing issues. In addition, the same policies require that Northern State Prison have a written staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. The Assistant Facility Administrator indicated that during staffing analysis and the development and review of the facility's staffing plan, they would consider generally accepted detention and correctional practices; the need for additional video monitoring; any judicial findings of inadequacy; the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); and the prevalence of substantiated and unsubstantiated incidents of sexual abuse. The Assistant Facility Administrator confirmed that in the past 12 months, 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.

The auditor learned from interviewing the PREA Manager that 20 additional cameras were approved and ordered for Northern State Prison.

| 115.14 | Youthful inmates  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The facility doesn't house youthful offenders. The auditor learned this by the following evidence:  |
|        | <ul> <li>Pre-Audit Questionnaire</li> <li>New Jersey Revised Statutes Title 2A - Administration of Civil and Criminal Justice Section 2A:4A-261</li> <li>Daily population reports</li> <li>Interviews with the Assistant Facility Administrator and PREA Coordinator</li> </ul> |

#### 115.15 Limits to cross-gender viewing and searches Auditor Overall Determination: Meets Standard **Auditor Discussion** The New Jersey Department of Corrections has several policies (CUS.001.011, Searches of Inmates in Facilities, CUS.001.SEA.001, Searches Confidential, and PCS.001, Transgender, Intersex, Non-Binary Inmates) in place prohibiting visual body searches and cavity searches by the opposite gender. A review of the search logs confirmed no cross gender visual body searches or cavity searches were performed. I learned during security staff and medical interviews and the Pre- Audit Questionnaire; One Transgender inmate is housed at this facility during the audit cycle of 2021 & 2022. A transgender sex is determined by medical staff after reviewing medical records, discussions with the inmate, and a broader medical examination. An interview was conducted with this inmate. This inmate verified opportunities of showering privately away from other inmates. A review of the Training Logs and lesson plan confirmed that staff receive training on conducting proper pat searches, inappropriate relationship with inmates, and PREA, during their annual In-service training. Auditor interviewed random and targeted inmates. All interviewed inmates confirmed that all opposite gender staff announce their presence before entering the male living units. Staff sampled (random and specialized) indicated that all opposite gender staff make announcement when entering a unit. A review of logbook documentation, and inmate interviews confirmed that female staff announce their presence, while entering the housing units. I observed several female staff announce their presence in the housing unit, while touring the housing units. The agency and Northern State Prison have an "announce" policy and procedures requiring staff of the opposite sex to announce their presence or otherwise notify the inmates, when entering an inmate housing unit. Auditor observed, during the tour of the housing unit inmates are permitted to shower, perform bodily functions and change clothes privately.

Northern State Prison met standard 115.15.

#### 115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The auditor verified a staff translator list was available. The language line is available for use by staff when a staff translator is not available. There are posters in English and Spanish on all housing bulletin boards. Policy prohibits the use of inmate interpreters except in emergency situations or the inmate's safety would be compromised. Staff interviews supported that inmates would not be relied on as translators.

The Auditor interviewed nine (9) Limited English Proficient (LEP) inmates and each LEP inmate confirmed through an interpreter that they were provided PREA related information and orientation in a language they understood. It should be mentioned that the interpreter was a custody staff person.

The Assistant Facility Administrator indicated that during intake, facility would ensure a bi-lingual staff was working. The facility provides a language line service to meet the need of LEP inmates. The agency provides PREA related videos with closed captions for hearing impaired inmates assigned to the facility. The Assistant Facility Administrator confirmed that the facility does not use inmate interpreters, inmate readers or other types of inmate assistants in the performance of first responder duties or during the investigation of an inmate's allegations. Interviews with first responders, investigators, medical and mental health staff, and the Assistant Facility Administrator confirmed their awareness of the prohibition of using inmate interpreters for any PREA investigative purpose.

Telephone communication devices for the deaf, are also available.

Auditor reviewed and read the following policies:

- PCS.001.DFH.01 (Deaf/Hard of Hearing Inmates)
- IMM.002.003 Americans with Disabilities Act and New Jersey Law Against Discrimination Reasonable Accommodations for Inmates
- ADM.008.LEP.01 Hearings Held on Limited English Proficiency (LEP) Inmates
- SUP.004.001 Limited English Proficient (LEP) Language Assistance: Bilingual Staff and Use of the Language Line

Interviews with staff, reviewing policies, and an examination of supporting documentation confirmed compliance with Standard 115.16.

#### 115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The auditor reviewed policies and determined prior to hiring of new employees who may have contact with inmates, the agency investigators perform criminal background records check, consistent with Federal, State, and local law, makes its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending of an allegation of sexual abuse. The above policy applies to new employees, contract vendors, and volunteers. A random sample of employee files, and an interview with Human Resource Staff, it was confirmed the agency performs criminal background checks on all new hire employees.

Auditor reviewed the following policies:

- ADM.006.007 (ADM.006.007, Pre-Employment Background Checks and Issuance of ID Cards
- PSM.001.001 Reporting of Summons, Arrests, etc. of NJDOC Staff
- PSM.001.011 Staff Selection and Promotions
- PSM.SSP.003 Panel Interviews

The above New Jersey Department of Corrections policies support the requirement that criminal background records check be conducted at least every five years of current employees.

An interview with the Assistant Facility Administrator and Human Resource Manager. Both confirmed Northern State Prison hiring practices were in line with the agency's policies. Both representatives confirmed that the agency attempts to contact prior employers for information on substantiated allegations of sexual abuse or resignations which occurred during a pending investigation of sexual abuse. Human Resource Manager also confirmed that the agency provides 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. New Jersey Department of Corrections notifies appropriate licensing/certifying agencies, when professional personnel are terminated for substantiated allegations of sexual abuse or sexual harassment.

Auditor reviewed the above policies and interviews with the Assistant Facility Administrator, Human Resource Manager, and Investigators confirmed compliance with Standard 115.17.

| 115.18 | Upgrades to facilities and technologies  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor toured all housing and Kitchen areas with Assistant Facility Administrator and Major. Auditor learned 20 additional cameras and monitors was purchased and approved for installation throughout the facility. The placement of these additional cameras will enhance the agency's ability to protect inmates from sexual abuse, while they're working in the Kitchen and other areas. The auditor viewed all cameras throughout the facility. None of the cameras violate inmates' privacy in performing bodily functions. |

#### 115.21 Evidence protocol and forensic medical examinations Auditor Overall Determination: Meets Standard **Auditor Discussion** In accordance with the review of the below policies, it was determined that this agency has policy and procedures in place that enables the Inspector General Office the responsibility of investigating any sexual criminal or administrative investigations. This agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The above information was also confirmed by interviewing three investigators. Auditor reviewed and read the following policies: ADM.SID.014 Sexual Assault/Sexual Offenses Procedures ADM.SID.035 Investigation Procedures Confidential MED.MLI.007 Sexual Assault, MED.MHS.002.001 Emergency Mental Health Services MED.MLI.005 Forensic Specimen Collection The New Jersey Department of Corrections assigns the responsibility of conducting investigations to the Special Investigative Division (SID). Northern State Prison has assigned agency investigators who are responsible for investigating allegations of administrative and criminal sexual abuse/sexual harassment that occur in the facility. NJDOC maintains an investigative department which follows the uniform evidence protocol and maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutorial requirements for investigating allegations of sexual abuse. The agency has a Mutual of Understanding with SAVE of Essex County/Family Service League to provide victim advocate services to inmates of sexual abuse. All inmates of sexual abuse will receive free medical and mental health. The auditor confirmed this by interviewing the Mental Health Manager.

The facility doesn't have a Sexual Assault Nurse Examiners (SANE) nor Sexual Assault Forensic Examiner (SAFE) Nurse at the facility. The facility will transport any sexually abused inmate to the local hospital for access to SAFE or SANE trained medical staff if the need arises. Auditor confirmed this information by interviewing the Nursing Manager and reading the

following policies MED. MLI.007, MED. MLI.005.

# Auditor Overall Determination: Meets Standard Auditor Discussion The auditor interviewed Assistant Facility Administrator, and three investigators. They corroborated that all reports of sexual abuse or harassment are reported to the Inspector General's office for investigations. Auditor also confirmed this by reviewing

The auditor interviewed Assistant Facility Administrator, and three investigators. They corroborated that all reports of sexual abuse or harassment are reported to the Inspector General's office for investigations. Auditor also confirmed this by reviewing the following policies ADM. 006.011 Investigations by SID, ADM. SID.035 Investigation Procedures CONFIDENTIAL, and SID IMP #014 Sexual Offenses. The auditor reviewed all investigative files and interviewed investigators and confirmed 6 sexual abuse allegations were made against staff but closed after completed investigation. They were unfounded. Auditor reviewed 15 other sexual abuse allegations were inmate on inmate, three (3) inmate on inmate allegation of sexual harassment were completed. The auditor located the investigative policy on the Website for the Inspector General's Office. The Inspector General's Office is responsible and authorized for conducting criminal and administrative investigations for New Jersey Department of Corrections.

ADM.006.011, Investigations by the Special Investigations Division is in place to ensure that allegations of sexual abuse or sexual harassment are investigated by a legal authority to conduct criminal investigations.

A review of training documents confirmed that investigators received instruction in conducting sexual assault investigations in confinement. The specialized training received by members of the SID helps to ensure that such investigations are conducted in a thorough, competent, objective manner and using the most current techniques and equipment possible. While remaining cognizant of the limitations and ramifications of the use of such investigatory techniques, any lawful techniques to perform an investigation may be used. Interviews with SID staff and an examination of training documentation, such as the training records confirm the facility's compliance to this Standard 115.22.

| 115.31 | Employee training   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor reviewed the following policies:  |
|        | ADM.010.004 Standards of Professional Conduct: Staff/ Inmate Over Familiarity     10.19 Prison Rape Elimination Act     IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault  |
|        | Staff training files were examined by the Auditor. All training files reviewed reflected that the staff received the appropriate training. Interviews with random and specialized staff, all confirmed that they understood the agency's current sexual abuse and sexual harassment policies and procedures.  |
|        | Agency policy ADM.010.004 Standards of Professional Conduct: Staff/ Inmate Over Familiarity and IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault Random collectively addresses Standard 115.31. The agency trains all employees on the below following who may have contact with inmates:   |
|        | <ul> <li>Zero-tolerance policy for sexual abuse and sexual harassment.</li> <li>How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.</li> <li>Inmates' right to be free from sexual abuse and sexual harassment, 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.</li> <li>How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates</li> <li>How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</li> </ul> |
|        | The above interviews, employee training files and policies confirms compliance with 115. 31.  |

#### 115.32 Volunteer and contractor training Auditor Overall Determination: Meets Standard **Auditor Discussion** The volunteer and contractor training form must show the auditor read and understood the training, after their training they must sign the form. They auditor reviewed some of the training forms, and it showed each volunteer and contractor has completed the read and sign acknowledgement form indicating they read their responsibilities and understood. A review of the training records and interviews with contractors and volunteers confirm they received the training. They were questioned about their responsibilities, and all confirmed they understand the zero tolerance and reporting procedures. PCS.001.003 Volunteer Service Program addresses the agency requirements for Standard 115.32. The Auditor confirmed by interview and review of documentation that volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention and detection. The curriculum the agency utilized for training provide the level and type of training that is based on the services they provide and level of contact they have with inmates. The curriculum also covers the agency's zero tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Evidence relied upon to make auditor determination: • Pre-Audit Questionnaire • Interview with the Assistant Facility Administrator · Acknowledgment of receipt of training Application for clearance · NJDOC volunteer rules and responsibilities • PCS.001.003 Volunteer Service Program • Interview with contractors (Inmate Phone) • Interview with volunteers (Chaplains)

Based on the above evidence Northern State Prison met the requirements of standard 115.32

| 115.33 | Inmate education  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | All interviewed inmates confirmed that they received their PREA Orientation during the first day of arrival. The auditor reviewed policies, inmate handbook, Orientation materials and interviewed intake staff. Inmates complete the acknowledgement form indicating they have reviewed the PREA information.  |
|        | In accordance with the review of policies IMM.004 Zero Tolerance Prison Sexual Assault, PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, SUP.004.001, it was determined that Northern State Prison has policies in place to ensure inmates with limited English, deaf, visually impaired, and inmates with limited reading skills receive staff assistance and equipment to understand the PREA Educational materials. |
|        | Auditor observed PREA Inmate Informational Handouts in both English and Spanish during the facility tour of intake. Auditor observed an inmate going through the PREA orientation and he was provided the PREA handbook.  |
|        | The Assistant Superintendent during her interview confirmed that in addition to providing PREA related education during the intake process, Northern State Prison ensures that key information is continuously and readily available or visible to inmates through posters, inmate handbooks and informal PREA conversations. The Auditor observed PREA related education throughout the facility on posters printed in Spanish and English.          |
|        | All inmates sampled (random and targeted) 100% confirmed to the Auditor that they understood their rights and provided the Auditor with multiple ways to report sexual abuse and sexual harassment.   |
|        | Northern State Prison met the requirements of Standard 115.33.  |

| 115.34 | Specialized training: Investigations  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | This auditor interviewed three investigators, reviewed their training records and reviewed policy ADM.006.000, it was determined that the investigators do receive Specialized Investigative Training annually. This Specialized training was in addition to the mandatory training requirements for sexual assault investigations. The SID investigators receive in- service training that specifically relates to sexual assaults within the confinement setting. The receive training on interviewing sexual abuse victims, appropriate application of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for prosecution referral. |
|        | Northern State Prison utilizes investigators to investigate all PREA allegations. If any allegation is determined to be criminal in nature, investigators will refer the case for prosecution. Any administrative cases will be referred to the facility administrators after investigation. The facility will take immediate disciplinary action up to include termination and loss of certification.  |
|        | Northern State Prison met the requirements of Standard 115.34   |

#### 115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

This auditor interviewed Nursing Supervisor about medical staff receiving PREA Training. This auditor reviewed their Training files and learned they received PREA Training. Auditor questioned the Nursing Supervisor about conducting Forensic exams on sexually abuse victims. Nursing Supervisor explained, MSCF medical staff does not conduct forensic medical exams. Nursing Supervisor further explained, any inmate that experienced sexual abuse will be transported to the hospital for examination.

The auditor contacted the local hospital and spoke with an emergency room nurse. She informed me that her Nurses are trained to conduct Forensic examination.

This auditor interviewed Mental Health Supervisor about PREA Training. Mental Health Supervisor informed this auditor that he receives PREA Training yearly. This auditor confirmed this information by reviewing his Training records. Mental Health Supervisor does the sexual screening and counseling for Northern State Prison.

The New Jersey Department of Corrections policy on training medical and mental health staff is outlined. Both medical and mental health have received their training. NJDOC maintains documentation that medical and mental health practitioners have received the training referenced in this standard and it was verified through upload in section 115.35 (c)-1.

Northern State Prison met the requirements of Standard 115.35. Based on the following evidence:

- Pre-Audit Questionnaire
- IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault
- MED.002.004 Mental Health Services Staff
- Power Point Presentation on "Addressing Sexual Abuse and Harassment of Inmates Medical and Mental Health Staff Training 2021"
- The review of Rutger University Correctional Healthcare Curriculum
- Curriculum for Addressing Sexual Abuse & Harassment of Inmates, Medical & Mental Health Staff Training 2021
- Interviews with Medical and Mental Health Staff
- Interview with the Assistant Facility Administrator
- Review of training certifications for completion of specialized training for medical and mental health staff.

Northern State Prison met standard 115.35.

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

The auditor reviewed:

- PCS.001.008 PREA Compliance
- PCS.001. TGI.01 Transgender Intersex and Non-Binary Inmates
- MED. 001.012 Medical Health Care Services
- MED. IMA.005 Intra-system Transfers
- CLS.002.INT.01 Classification Intake Procedures
- CLS. 002.001 Classification Intake Process
- MED.MHS.002.010 Counseling Services- Sexual Assault

It was determined policies were in place to ensure all inmates are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. Inmates arriving at Northern State Prison are screened within 24- 72 hours of arrival.

The auditor interviewed PREA Manager and Classification staff and learned all inmates are screened upon arrival by using the PREA Screening instrument. The information gather will assist security and classification with housing inmates and identifying the abuser.

This auditor interviewed approximately 10 inmates that were gained during the 2021 cycle. All of them confirmed their initial screening but could not remember being screened the second time within 30 days. I reviewed the inmate information and learned those inmates didn't receive a second assessment.

The agency did not meet the intent of this standard. The agency was conducting the second assessment during the inmate's classification meeting according to their policy, but the standards require the second assessment to be conducted within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

Auditor will monitor this facility becoming compliant with 115.41 (F) -2. A Corrective Action Plan was developed for the facility to come within compliance. The facility will have approximately 180 (January 25, 2023) days to come within compliance. The State PREA Coordinator already developed a plan and made changes to the policy to become compliant within a shorter timeframe. The facility agreed to provide 30 days documentation to the auditor on a monthly basis until facility reaches compliance.

The auditor was provided documentation that showed inmates receiving an initial screening, and the second screening was conducted within 30 days. The auditor was provided sampling for 30- 60-day period. The auditor was provided with updated policy reading the above. This agency now meets the intent of this standard on August 19, 2022.

| 115.42 | Use of screening information  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | All inmates are screen within 72 hours of arrival to Northern State Prison. The information from the screening is used to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high of being sexually abusive.   |
|        | During the interviews with staff responsible for screening, and the PREA Compliance Manager, it was confirmed information collected during the risk screening process is reviewed, and assessed with Classification, security, and medical / mental health staff. The information received is used to assist in the determination of housing, bed, work, education, and program assignments.  |
|        | Inmates identified by medical as Transgender or intersex is noted on their Health Screen. Policy requires transgender and intersex inmates to be assessed biannually. The facility will provide transgender and intersex inmates an opportunity to shower separately from other inmates. Based on the auditor's observations, during the on-site tour, NSP does not have dedicated housing units for transgender offenders. There was one transgender case in the inmate population identified during the on-site audit. NJ DOC policy and staff interviews revealed NSP determines housing and programming assignments for transgender or intersex inmates on a case-by-case basis and careful consideration is given to all assignments, to include whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems. Interviews with staff and an examination of classification documents confirm NSP is compliant with the requirements mandated in Standard 115.42. |

#### 115.43 Protective Custody

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

Inmates placed in Administrative Confinement on Protective status have the same privileges and programs as general population inmates. Segregation housing is used as a last resort. If the inmate is placed in administrative confinement pending investigation, the abuser will be relocated at another Correctional facility and keep separates are entered into the inmate's file.

ADM.019.TCC.01 Temporary Close Custody, CUS-104 Authorization for Temporary Close Custody, ADM.019.002 Restrictive Housing, ADM.019.PCS.01 Protective Custody Status, New Jersey Administrative Code 10A:5-5.1 Assignment to Prehearing Protective Custody or Admission to a Protective Custody Unit, New Jersey Administrative Code 10A:5-7.1, and Placement in temporary close custody status collectively address the requirements of Standard 115.43. The New Jersey Department of Corrections mandates that housing units designated as "Close Custody Units" to be maintained in designated correctional facilities.

NJDOC Policy, ADM.019.002, provides uniform guidelines for placement of inmates into a Restrictive Housing Unit. Restrictive Housing is a form of housing for inmates whose continued presence in the general population would pose a serious threat to life, property, self, staff or other inmates, or to the security or orderly operation of a correctional facility. Restrictive housing also includes the removal of an inmate from the general population for personal protection or as a punitive sanction for the commission of an infraction(s). According to the SID investigator, restrictive housing is designed to support a safe and productive environment for facility staff and inmates assigned to general population as well as to create a path for inmates assigned to the units to successfully transition to a less restrictive setting. The NJDOC has housing units, designated types of "Restrictive Housing", such as: Temporary Close Custody.

A Temporary Close Custody status by definition means the non-punitive removal of an inmate from general population or other assigned housing, with restriction to the inmate's cell or to a close custody unit for a period not to exceed 72 hours, for special observation (other than a healthcare need) or investigation, unless information or evidence warrants an extension beyond 72 hours.

The SID investigator interviewed during the onsite portion of the audit indicated that NJDOC has a policy that also allows involuntary segregated housing placement when a PREA allegation is received that requires victims be separated from perpetrators after all alternative means of separation have been assessed and no alternative means of separation are available (i.e., cell assignment/housing unit assignment change, intra-institutional transfer). More, the same SID investigator indicated that placement in TCC is not default placement for inmates making an allegation of sexual abuse. Northern State Prison met the requirements of Standard 115.43.

# Inmate reporting Auditor Overall Determination: Meets Standard Auditor Discussion The agency has policies (PCS. PREA. OMB, IMM.002 JPG.001 Inmate Electronic Communication, IMM.002 .001 Inmate Remedy System) in place for staff and inmates to report sexual abuse or harassment in multiple ways. The inmates can privately report sexual abuse to ("SAVE of Essex County/ Family Service League.") the tip line. All inmates confirmed by interviews that they could report sexual abuse or harassment in private. During the tour the Tips line number was posted by the phones. During the interviews the inmates were aware they could report sexual abuse or harassment either in person or writing. They were aware of third-party reporting procedures. The auditor called and interviewed a counselor from "SAVE of Essex County/ Family Service League.". She confirmed the above information about her agency receiving calls from inmates regarding sexual abuse reporting. This auditor interviewed staff about reporting sexual abuse or harassment in private. Staff confirmed they could report sexual abuse or harassment of an inmate by emailing the PREA Officer, speaking with the Chain of command, or calling the

This auditor interviewed staff about reporting sexual abuse or harassment in private. Staff confirmed they could report sexual abuse or harassment of an inmate by emailing the PREA Officer, speaking with the Chain of command, or calling the Inspector General's office. After the interview with inmates and staff, it was confirmed they have been trained in reporting procedures.

The Assistant Facility Administrator indicated that NJDOC has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about:

- · sexual abuse and sexual harassment
- · retaliation by other inmates or staff for reporting sexual abuse and sexual harassment
- staff neglect or violation of responsibilities that may have contributed to such incidents.

The Auditor examined procedures for reporting sexual abuse or sexual harassment in the inmate handbook, on the agency's website and observed during the facility tour. Northern State Prison and victim advocacy information easily visible in each common area. In addition, inmates are provided PREA brochures during the intake process. PREA posters were also displayed in English and Spanish throughout the facility. NJDOC also provides reporting access through the Correction Ombudsman Office:

Correction Ombudsman Telephone: (609) 633-2596 Address: Office of the Correction Ombudsman PO Box 855 Trenton, NJ, 08625

The multiple internal ways for inmates to privately report sexual abuse and sexual harassment is also available through the J-Pay grievance process, a hotline and simply telling a trusted staff person.

# 115.52 **Exhaustion of administrative remedies** Auditor Overall Determination: Meets Standard **Auditor Discussion** This agency has policies and procedures in place to answer and investigate inmate grievances concerning sexual abuse, or harassment allegations. The auditor interviewed the PREA Officer and Coordinator about time limits on sexual abuse grievances, it was confirmed by talking with them, no time limits for grievances on sexual abuse. An Inmate Remedy filed that alleges sexual abuse is immediately forwarded to SID and to the facility Administrator. Random and specialized staff (100%) affirmed their understanding that a third-party report can be filed as a remedy on behalf of another inmate when there is an allegation of sexual abuse. Grievances filed alleging sexual abuse/sexual harassment would result in the immediate opening of a formal investigation. Additionally, the policies do not require an inmate to use any informal grievance process before filing an allegation involving sexual abuse/sexual harassment. NJDOC policy requires that a decision on the merits of any portion of a grievance alleging sexual abuse be made within 90 days of the filing. There were three (3) grievances filed concerning sexual abuse or harassment allegations, both of the grievances written against staff. Both grievances were investigated by the Inspector General's office and answered. The final decision was reached within ninety (90) days. Both investigations were determined to be "NOT PREA" thus unfounded. The inmates each received a response within the time allotted for reply. There were zero third-party reports during this reporting period. Zero emergency grievance were submitted by inmates during this reporting period. The NJDOC has a policy that outlines that the agency can discipline an inmate for filing a grievance related to alleged sexual abuse, does it ONLY where the agency demonstrates that the inmate filed the grievance in bad faith. The following policies IMM.002.001 Inmate Remedy System, IMM.002 IRS.001 Inmate Remedy System, and IMM.002.JPG.01 Inmate Electronic Communication System covers sexual abuse.

Northern State Prison met the requirements of Standard 115.52 based on the above evidence.

# 115.53 Inmate access to outside confidential support services Auditor Overall Determination: Meets Standard **Auditor Discussion** The agency has memorandum of understanding with "SAVE of Essex County/ Family Service League." to provide counseling to sexually abused inmates. The facility informs inmates prior to giving them access, of the extent to which such communications will be monitored and 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. The above information is published in the inmate handbook, and they're reminded during orientation. This information was confirmed by staff, and inmate interviews. This auditor reviewed the inmate handbook and located the above information. The facility does not house detainees solely for civil immigration purposes. New Jersey Department of Corrections policy establishes that inmates who are committed to the custody of the department will have access to external sexual abuse emotional support services. Access is provided even if they do not wish to make a report of sexual abuse. Services are based on the county where the inmate is housed and includes at a minimum, written access to emotional support services via correspondence. Where telephone hotline services are available, services can be accessed via the inmate telephone system by dialing \*PREA#. Inmates are advised that PREA external emotional support services are confidential. A review of the "MOU" and confirmation of services, in addition to on-site interviews with staff and inmates, confirm the facility's compliance with Standard 115.53.

| 115.54 | Third-party reporting   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | Policies IMM.001.004, and PCS.001.PREA.OMB address the requirements of this standard. Family members or other third-party individuals on behalf of an inmate may report sexual abuse/sexual harassment. A third party can file an inmate remedy form on behalf of an inmate when there is an allegation of sexual assault. Policy also establishes guidelines for handling contacts received in the Office of the Corrections Ombudsman that pertain to allegations of sexual abuse, sexual assault, or harassment. It is the policy of the Office of the Corrections Ombudsman to serve as an available resource to inmates in custody of the New Jersey Department of Corrections to report incidents of sexual abuse, assault, harassment or retaliation. The Office of the Corrections Ombudsman, upon receiving such information, shall immediately forward inmate reports of sexual abuse or sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. |
|        | This agency has developed several methods to receive third party reports of sexual abuse and sexual harassment. Third party reporting is available by New Jersey Department of Corrections Web, Tips line, grievances, and Ombudsmen's Office.  |
|        | During the on-site audit, the auditor observed informational postings regarding third party reporting. Additionally, interviews with random staff and inmates confirmed that they have a sufficient understanding that anonymous and third-party reporting procedures are acceptable sexual abuse/sexual harassment reporting practices at NSP.   |
|        | This auditor also interviewed the PREA Manager, PREA Coordinator, and SID Investigator. A review of the webpage confirmed the above information, and the facility's compliance with Standard 115.54.  |

# 115.61 Staff and agency reporting duties Auditor Overall Determination: Meets Standard **Auditor Discussion** The auditor interviewed random staff, contractors, volunteers, and medical staff. All staff members confirmed their obligations to immediately report sexual abuse or harassment of an inmate so an investigation can be initiated, and the victim immediately protected against his abuser. • The auditor reviewed the policies and determined it addresses the requirement of standard 115.61 • IMM.001.004 Zero Tolerance Policy • PCS.001.VOL.001 Volunteer Services • PCS.001.008 PREA Compliance The above policies cover reporting of retaliation against inmates and staff who reported an incident of sexual abuse or harassment, or 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. Medical and mental health practitioners interviewed during the audit confirmed they are required to inform inmates the limitations of confidentiality, at the initiation of services. An employee, contractor or volunteer who fails to report an allegation, or coerces or threatens another person to submit inaccurate, incomplete or untruthful information with the intent to alter a report, may face disciplinary charges, up to and including dismissal, even on a first offense. All interviewed staff (random and specialized) reported receiving annual training on their responsibility to prevent, respond, and report all allegations of sexual abuse and sexual harassment in accordance with the Prison Rape Elimination Act (PREA). Interviews with staff (random and specialized) supported compliance with Standard 115.61.

Northern State Prison does not house youthful inmates therefore 115.61 (d) does not apply to this facility

standard.

After reviewing policies and also interviewing the PREA Coordinator and Manager, it was determined this facility meets the

| 115.62 | Agency protection duties   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | This agency has a policy (IMM.001.PSA.001) and procedures in place to protect inmates from sexual abuse. Interviews conducted with Assistant Facility Administrator, PREA Manager, and random sample of staff confirmed upon becoming aware that an inmate is subject to a substantial risk of imminent sexual abuse, each case is evaluated by the Assistant Facility Administrator and the PREA Manager.   |
|        | New Jersey Department of Corrections policies direct staff who staff learn that an inmate is subject to a substantial risk of imminent sexual abuse to take immediate action to protect the inmate. These same policies require NJDOC staff to be committed to ensuring the protection of victims of sexual assault, and will employ multiple measures, including but not limited to, 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 harassment or for cooperating with investigations in order to fulfill this commitment. In the past 12 months, the PREA Manager confirmed that the number of times Northern State Prison determined that an inmate was subject to a substantial risk of imminent sexual abuse was zero. Northern State Prison met the requirements of Standard 115.62. |

| 115.63 | Reporting to other confinement facilities   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | This agency has policies PCS.001.008 PREA Compliance, and IMM.001 .004 Zero Tolerance Prison Sexual Assault and procedures in place to ensure where upon receiving an allegation that an inmate was sexually abused at another facility, the head of the facility that received the allegation shall notify the head of the facility where the alleged abuse occurred. This notification shall occur within 72 hours. |
|        | Interviews with the Administrator and Facility PREA Manager confirm their understanding of the notification and documentation requirements of this standard. There were no reports received of sexual abuse, while confined at another facility.  |
|        | Based on the above evidence Northern State Prison met the requirements of Standard 115.63.  |

| 115.64 | Staff first responder duties  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | This auditor reviewed policies ADM.SID.035 Investigation Procedures, and CUS.001.CSM.01 Crime Scene Management.  Both policies specify procedures to respond to an allegation of sexual abuse for both security and non-security staff.  Random staff interviews confirm both security and non-security knew what to do upon learning an inmate was sexually abused to include separating the alleged victim and abuser, how to preserve the crime scene, and what actions inmates should not take in order not to destroy physical evidence. |
|        | This auditor reviewed training records of certified and non-certified staff. The files' confirmed staff is trained as First Responders. This auditor reviewed investigative files of sexual abuse allegations. All cases showed staff separating the victim and securing the crime scene. All victims were escorted to medical and mental health for evaluations.   |
|        | Based on the above interviews and policies Bay State Prison met the standard 115.64.  |

# 115.65 Coordinated response Auditor Overall Determination: Meets Standard **Auditor Discussion** This facility has a plan institutional plan, which outlines what is to take place in response to an incident of sexual abuse among first responders, medical, and mental health practitioners, inspectors, and facility leadership. This auditor interviewed specialized staff and confirmed they were knowledgeable about their individual and collaborative responsibilities. The auditor read and reviewed the plan signed by the Facility Administrator. It describes first responders' response and responsibilities. Policies MED.ML1.007(Sexual Assault), and ADM.SID.035 (Investigation Procedures) address the requirements of this standard. New Jersey Department of Corrections mandates that the following medical and health care services be available in all Operational Units housing inmates and in compliance with any existing PREA standard. Each policy outlines specific instructions for security, healthcare, and investigative staff relative to post sexual abuse protocols such as: • Twenty-four (24) hours per day, 7 days per week emergency medical, dental and mental health care. • A physician will be available twenty-four hours a day, seven days a week for consultation. On call physician's schedules with pager/telephone numbers and pertinent names and telephone numbers of local emergency medical services to be used will be accessible to the medical staff. • NJDOC also mandates that the healthcare staff shall follow the institution's written plan for responding to allegations of sexual assault of inmates. The assaulted inmate will be transported to an Emergency Department properly equipped to assess (i.e., SANE Nurse), treat, and provide required prophylaxis, contraceptives, pregnancy termination counseling and gathering of forensic evidence. Healthcare staff shall not be involved in the management or treatment of sexual assault cases unless it is necessary to stabilize the inmate before the transfer to the appropriate community facility. Such care may include the control of bleeding or stabilizing of other injuries incurred, but most frequently would involve emotional support and understanding. The Northern State Prison Coordinated Response Plan defers to IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault

was reviewed, and it meets the requirements of Standard 115.65.

# 115.66 Preservation of ability to protect inmates from contact with abusers Auditor Overall Determination: Meets Standard **Auditor Discussion** All new and renewed contracts are identified as PREA covered contracts when appropriate. These contracts will include the following language to ensure compliance with the National PREA Standards. The most current Collective Bargaining Agreement, dated October 2019, does not limit the agency 's ability to remove alleged staff accused of sexual abuse from contact with any inmates pending the outcome of an investigation, and discipline, or termination. Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault supports the removal of staff alleged to have committed sexual abuse pending the outcome of the investigative process. Collective bargaining Agreements between the NJDOC and at least seven employee unions were reviewed: • Agreement State of New Jersey and Local Union 30 International Brotherhood of Electrical Workers (IBEW), AFL-CIO State Government Managers' Unit. • Operations, Maintenance and Services and Crafts Unit and Inspection and Security Unit • IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault • New Jersey Law Enforcement Commanding Officers Association and State of New Jersey Memorandum of • State of New Jersey Governor's Office of Employee Relations (GOER) and New Jersey Law Enforcement Supervisors Association (NJLESA) Tentative Agreement • New Jersey Superior Officers Law Enforcement Association and State of New Jersey Memorandum of Agreement • New Jersey State Policeman's Benevolent Association Law Enforcement Unit Local No. 105, and State of New Jersey Memorandum of Agreement • New Jersey Investigators Association Affiliated with the New Jersey State Fraternal Order of Police Lodge 174

Northern State Prison met standard 115.66

# Agency protection against retaliation Auditor Overall Determination: Meets Standard Auditor Discussion

The Assistant Facility Administrator is designated to monitor staff retaliation and the PREA Officer monitors inmates for retaliation. Both inmates and staff are monitored up to 90 days or more if needed. PREA Manager monitoring inmates includes reviewing inmate disciplinary reports, housing or program changes. The Assistant Facility Administrator monitor staff for any negative job performances. If there is a suggestion of possible retaliation, any evidence of possible retaliation will be referred to the SID for investigation and the agency wide PREA Coordinator will be advised of same. The Assistant Facility Administrator reported zero incidents of retaliation in the past 12 months.

During an interview with the Assistant Facility Administrator, she confirmed that the agency employs multiple protection measures, such as facility 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.

All New Jersey Assistant Facility Administrators receive training annually on monitoring inmates and staff for retaliation. All interviewed staff knew who was responsible for monitoring them against retaliation.

This auditor reviewed the following policies:

- PCS.001.008 PREA Compliance
- IMM.001.004 Zero Tolerance Policy

The above policies discuss retaliation, and protection for staff and inmates that report sexual abuse or cooperate during the investigation. This policy clearly protects inmates and staff who report sexual abuse or harassment.

The auditor interviewed Random Staff, PREA Manager, and State PREA Coordinator. The above policy was read and reviewed by the auditor. Northern State Prison met the requirements of Standard 115.67.

#### 115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The agency has a policy prohibiting the placement of inmates who alleged sexual abuse 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. This auditor interviewed the Assistant Facility Administrator, Major, Shift Supervisors, and some Random line staff all indicted compliance with their policy and this standard.

This auditor reviewed the following policies:

- PCS.001.008 PREA Compliance
- ADM.019.003 Close Custody
- ADM.019.003 IHU Investigative Housing Unit
- ADM.019.003 TAH Temporary Administrative Housing
- ADM.019.003 PCS Protective Custody Status

The above policies confirmed that procedures were in place to use Segregated Housing to protect inmates from sexual abuse. The first review happens within 72 hours, and every 14 days afterwards.

ADM.019.TCC.01, New Jersey Administrative Code 10A.5-7.1, and CUS-104 (Authorization for Temporary Close Custody) address the requirements of Standard 115.43. The New Jersey Department of Corrections mandates that housing units designated as "Close Custody Units" be maintained in certain correctional facilities, where appropriate. Whenever it becomes necessary to administratively limit an inmate's activities and contacts with others on a short term basis, for increased observation or pending the completion of an investigation, the inmate shall be placed into Temporary Close Custody (TCC) status to provide for the safety and security of staff, inmates and the institutions, when circumstances suggest potential harm to the inmate, or the inmate is engaged in, or planning to be engaged in, a serious violation of correctional facility rules or regulations, for a period not to exceed 72 hours, unless emergent reasons exist and proper review and authorization is given. New Jersey Department of Corrections policy allows for placement in temporary close custody status placement when a PREA allegation is received that requires victims be separated from perpetrators after all alternative means of separation have been assessed and no alternative means of separation are available (i.e., cell assignment/housing unit assignment change, intra-institutional transfer). Such assessment will occur within 24 hours of the allegation.

Placement in TCC status as a result of a PREA allegation is not automatic. Such placement will be considered on a case-by-case basis taking into account factors that include but are not limited to the nature and severity of the PREA prohibited act, medical, mental health, disciplinary and investigatory considerations, an inmate victim's access to property, services and privileges that are afforded to general population inmates, and any circumstances that would pose a threat to the safety, security and orderly running of the correctional facility. If it is determined that an inmate requires placement in TCC status as a result of a PREA allegation, the reasons for the placement shall be documented.

The Assistant Facility Administrator and SID each confirmed that the facility will only restrict an inmate to a room as a last measure to keep an inmate who alleges sexual abuse safe and then only until an alternative means for keeping the inmate safe can be arranged. The policy requires an assessment within 24 hours if these measures are imposed. A review of inmate placement forms indicated that in the last 12 months the number of inmates at risk of sexual victimization who were held in involuntary segregated housing for one to 24 hours awaiting completion of assessment was none. Zero inmates remained in segregation for thirty days.

The auditor determined Northern State Correctional Facility met the requirements of Standard 115.68.

## 115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

All allegations of sexual abuse or sexual harassment are investigated by the Inspector General's Office. They're trained to conduct criminal and administrative investigations. All investigators for the Office of Inspector General received training on PREA. They received specialized training for investigating sex crimes in a correctional facility.

Auditor reviewed the following policies

- IMM.001.004
- ADM.006.011
- SID.IMP#14
- SID.IMP#35

The above policies collectively address the requirements of Standard 115.71. SID is the division within the Office of the Commissioner whose duties include, but are not limited to, ensuring that possible violations of the laws of the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), the NJ Criminal Code Title 2C, the Prison Rape Elimination Act (PREA) of 2003 and NJDOC policies and procedures by inmates, employees and individuals who visit NJDOC correctional facilities are investigated. New Jersey Department of Corrections conducts its own investigations into allegations of sexual abuse and sexual harassment, it does so promptly, thoroughly, and objectively. Additionally, SID serve as the NJDOC liaison to all other law enforcement agencies, conduct cooperative investigations in conjunction with federal, state, county and municipal law enforcement agencies.

The auditor reviewed 26 PREA cases reported at Northern State Prison, fifteen (15) of those cases alleged sexual abuse, twelve (12) of those cases were inmate on inmate, six (6) of those cases were staff on inmate, five (5) alleged sexual harassment, which was inmate on inmate. Three (3) of those cases alleged staff involvement. All three (3) cases involving staff were unfounded. The other inmate on inmate cases fifteen (15) were found unsubstantiated, and eight (8) were unfounded.

The auditor interviewed three investigators about the investigative process into sexual abuse. They detailed the investigative process to the auditor. The investigators will gather and preserve evidence, they will review the video monitoring system for any video evidence showing signs of abuse, they will review the reports and speak with the victim and abuser, and they will try and locate any witnesses. After the gathering of all evidence, documentation and video surveillance, the evidence will be forwarded to the Prosecuting Attorney's Office for prosecution.

The auditor reviewed policies and interviewed investigators. It was determined policies and procedures were in place for criminal and administrative investigations. Auditor further determined Northern State Prison met standard 115.71.

| 115.72 | Evidentiary standard for administrative investigations  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor interviewed the IG Investigator and confirmed the agency imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment substantiated. A review of investigative files revealed interviews are conducted with the alleged victim, suspected perpetrator and potential witnesses. |
|        | The assigned investigator for Northern State Prison investigative office retains all written reports. Interviews revealed the departure of perpetrators or victims from employment or confinement at the facility does not provide a basis for terminating the investigation.   |
|        | The auditor confirmed the above by reading policy ADM.006.011 Investigations by The Special Investigations Unit, reviewing Training files and interviewing the IG investigator.   |

| 115.73 | Reporting to inmates  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The inmate is informed of the outcome of the investigation by the PREA Officer, or IG Investigator. The auditor reviewed policies IMM.001.004 Zero Tolerance Prison Sexual Assault and PCS.001.008 PREA Compliance, it was determined procedures were in place to inform the inmate about the out of the investigation. This also was confirmed by interviewing an inmate that alleged sexual abuse. The inmate confirmed, he was informed about the end results of the investigations by the PREA Manager. |
|        | A review of investigative files reveals that, in all closed full protocol cases, inmates were informed of the decision related to their allegation.   |
|        | Northern State Prison met the requirements of Standard 115.73.  |

| 115.76 | Disciplinary sanctions for staff   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | IMM.001.004, IMM.001.PSA.001, and E3-HRB 84-17 are broad guiding principles regarding PREA related staff disciplinary actions. The Human Resource Bulletin 84-17 Disciplinary Action Policy predates PREA and does not directly address definitive disciplinary sanctions for PREA violations. The "bulletin" does, however, outlines broad ranges of sanctions depending on the severity of charges relating to all aspects of employment. Specifically, the "bulletin" addresses supervisory sexual harassment collectively address Standard 115.76.   |
|        | The agency policies indicate staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual misconduct, and sexual harassment policies and for failing to report. The New Jersey Department of Corrections will fully investigate and aggressively prosecute those who are involved in such conduct if, in fact, a crime has been committed. Any staff who is terminated for a violation of the zero-tolerance prison sexual assault policy shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. An employee, contractor or volunteer who fails to report an allegation, or coerces or threatens another person to submit inaccurate, incomplete or untruthful information with the intent to alter a report, may face disciplinary charges, up to and including dismissal, even on a first offense. The failure to participate in an investigation would be grounds for terminating employment. |
|        | All employees are subject to administrative disciplinary sanctions for violating agency sexual abuse/sexual harassment policies. The Collective Bargaining Agreements with the NJDOC allows for disciplinary sanctions against staff, including termination, for the sexual abuse/sexual harassment of an inmate. All terminations for violations of agency sexual abuse/sexual harassment policies, or resignations by staff in lieu of termination, may be reported to criminal investigators and to any relevant professional, certifying, or licensing agencies, unless the activity was clearly not criminal. The Auditor interviewed the Assistant Administrator, she confirmed that a presumptive disciplinary sanction for staff who engages in sexual abuse will be termination. Zero Northern State Prison staff was discipline for sexual abuse nor sexual harassment. This was confirmed by an interview with the Facility Administrator.  |

Northern State Prison met the requirements of Standard 115.76.

| 115.77 | Corrective action for contractors and volunteers   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The following policies IMM.001.004, and IMM.001.PSA.001 collectively address the requirements of Standard 115.77. Any contractor or volunteer who engages in sexual abuse/sexual harassment would be prohibited from contact with inmates and would be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. A contractor or volunteer who fails to report an allegation, or coerces or threatens another person to submit inaccurate, incomplete or untruthful information with the intent to alter a report, may face disciplinary charges, up to and including dismissal, even on a first offense. In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the facility would take appropriate remedial measures and consider whether to prohibit further contact with inmates. |
|        | Policy states that any contractor or volunteer engaging in sexual abuse of inmates will be subject to referral to local law enforcement. The policy further requires that the contractor or volunteer is prohibited from having contact with inmates. The Assistant Facility Administrator confirmed during the interview that during the past 12 months, zero (0) contractors have been reported to law enforcement. Northern State Prison met the requirements of Standard 115.77  |
|        | The New Jersey Department of Corrections did not utilize any volunteers, during the 2021 audit cycle due to COVID restrictions.  |

| 115.78 | Disciplinary sanctions for inmates  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | The auditor reviewed NJAC 10A 4-12-2 Inmate Discipline Zero Tolerance and NJAC 4- 12-3 Zero Tolerance Disciplinary Sanctions, it was determined policies and procedures were in place to deal with inmates guilty of sexual abuse or harassment. The inmates that report sexual abuse or harassment will not be discipline as long as they made it in good faith. Inmates can be punished if they falsely report an incident of sexual abuse. If mental disabilities or mental illness is a factor, the facility considers the offer of therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse. |
|        | The auditor reviewed the Inmate's Handbook, it clearly prohibits inmates from engaging in sexual acts whether it's consensual or non-consensual. The auditor interviewed PREA Manager and learned no inmate received disciplinary sanctions for falsely reporting sexual abuse. Auditor interviewed SID investigator and confirmed that there were no administrative or criminal findings of guilt for inmate on-inmate sexual abuse in the past 12 months.   |
|        | Policy ADM.008.000 Inmate Disciplinary Hearing Program: Mission, Goals and Objectives states that inmates may receive disciplinary sanctions following an administrative finding or a criminal investigation that an inmate engaged in inmate-on-inmate sexual abuse and sanctions shall be commensurate with the nature and circumstances of the sexual abuse, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.   |
|        | Northern State Prison met the requirements of Standard 115.78.  |

# 115.81 Medical and mental health screenings; history of sexual abuse Auditor Overall Determination: Meets Standard **Auditor Discussion** Inmates answering yes to the SRI assessment or medical assessment about being sexually abused or perpetrated sexually abuse are offered follow up counseling with Mental Health within 14 days of screening. This questionnaire is conducted by medical and mental health when the inmate arrives from another facility. That information is secured and only given to staff with a need-to-know basis. The facility obtains informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. To ensure the guidelines are met the facility follows a PREA Monitoring Multidimensional Sexual Victimization and Abusiveness Risk Assessment Checklist. The auditor interviewed three inmates that reported sexual victimization before being incarcerated. All three inmates confirmed that they were seen by Medical and Mental Health. Those inmates were offered additional treatment services free of charge and given the Victim Advocates number. The auditor reviewed policies Med. IMA.001 Health Appraisals, Med. MHS.001.002 MHS Reception Evaluation and reviewed the SRI Questionnaire sheet, it was determined procedures were in place for inmates to receive treatment for prior victimizations before confinement. The auditor conducted an interview with Mental Health Supervisor, Medical Supervisor, and PREA Manager. All three verified the above information. Northern State Prison does not house inmates under the age of 18 or youthful inmates. Northern State Correctional Facility

met the requirements of Standard 115.81.

## 115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The auditor reviewed MED.MLI.007 (Sexual Assault) interviewed Nursing Supervisor, and a Mental Health Supervisor, it was confirmed that inmates sexually abused, while in prison receive free Medical and Mental Health treatment. There is no charge per policy for medical services for PREA related incidents. Medical staff will follow the sexual battery protocol as outlined in DC4-638M Form. A refusal must be signed should the inmate refuse treatment. Both Medical and mental health providers confirmed that the nature and scope of rendered services are determined according to their professional judgment. Auditor interviewed PREA Manager and confirmed that inmate victim will be afforded a forensic examination at no cost to the victim.

MRD.MLI.007 and MED.IMHC.010 Co-Pay collectively address the requirements of Standard 115.82. The New Jersey Department of Corrections (NJDOC) mandates that medical and health care services be available in all Operational Units housing inmates and in compliance with any existing PREA standard. Policy excludes co-pays for emergency services. It is recommended however, that the governing policy specifically excludes emergency treatment due to sexual abuse, to victims at no financial cost. NJDOC policy requires 24 hours per day, 7 days per week emergency medical, and mental health care. A physician will be available twenty-four hours a day, seven days a week for consultation. On-call physician's schedules with pager/telephone numbers and pertinent names and telephone numbers of local emergency medical services to be used will be accessible to the medical staff. NJDOC also requires accurate, timely reporting, investigation and notification of appropriate staff and family of all critical illnesses, injuries or deaths. Emergency cardiopulmonary resuscitation (CPR) will be available from trained custody and healthcare staff. Properly trained custody and healthcare staff will carry out emergency medical transfer procedures. Interviews with specialized staff during the onsite portion of the audit confirmed inmate victims of sexual abuse are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

The New Jersey Department of Corrections also mandates that the healthcare staff shall follow the institution's written plan for responding to allegations of sexual assault of inmates. The assaulted inmate will be transported to an Emergency Department properly equipped to assess (i.e., SANE Nurse), treat, and provide required prophylaxis, contraceptives, pregnancy termination counseling and gathering of forensic evidence. Healthcare staff shall not be involved in the management or treatment of sexual assault cases unless it is necessary to stabilize the inmate before the transfer to the appropriate community facility. Such care may include the control of bleeding or stabilizing of other injuries incurred, but most frequently would involve emotional support and understanding. First Responders interviewed confirmed their responsibility to immediately notify the appropriate medical and mental health practitioners in the event of an allegation of sexual abuse.

Based on the above Northern State Prison met the requirements of Standard 115.82.

# 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers Auditor Overall Determination: Meets Standard **Auditor Discussion** The auditor interviewed Medical and Mental Health Supervisors. Both of them confirmed ongoing Medical and Mental Health care is provided to sexual abuse victims and abusers who have been victimized by sexual abuse in any prison, jail. The evaluations and treatment of victims includes, follow-up services, treatment plans, and referrals for continued care following their transfer to, other facilities, or their release from custody. The care is provided at no cost for PREA related incidents. The facility has staffed its medical and mental health departments and offers sexual abuse victims with medical and mental health services consistent with the standard of care available in the community. The auditor reviewed the following policies: PCS. 001.PREA.001 Sexual Assault PCS.001.PREA.ICM (Institutional Prison Rape Elimination Act (PREA) Compliance Manager) • MED.MHS.002.010 Counseling Services for Victims of Sexual Assault It was determined policies and procedures were in place to provide ongoing Medical and Mental Health care for sexual victims and abusers. Norther State Prison met the requirements of Standard 115.83.

| 115.86 | Sexual abuse incident reviews  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor interviewed the Facility Administrator, Assistant Superintendent, Major, Classification Supervisor, and the PREA Coordinator, it was confirmed all incidents of sexual abuse are reviewed by the Sexual Incident Review Team. This team conducts a review of the incident within 30 days. This team will review the investigation file, speak with line staff, and medical / mental health for input. Their findings and recommendations will be forwarded to the Facility Administrator. The Facility Administrator reviews this information and starts the implementation process of the findings. The report is then forwarded to the Central Office. |
|        | Auditor confirmed from the PREA Manager, the sexual assault incident review team includes upper-level management officials and allows for input from supervisors, investigators and medical or mental health practitioners.  |
|        | The auditor reviewed the below policies:   |
|        | <ul> <li>PCS. 001.PREA.001 Sexual Assault/Prison Rape Elimination Act (PREA) Advisory Council</li> <li>PCS.001.PREA.ICM Institutional Prison Rape Elimination Act (PREA) Compliance Manager</li> <li>IMM.0001.004 Zero Tolerance Prison Sexual Assault</li> </ul>  |
|        | Auditor reviewed two Sexual Abuse Incident Review Facility Investigation Summaries; It was determined policy and procedures were in place to conduct Incident Reviews of PREA / Sexual abuse incidents within 30 days of incident.   |
|        | Northern State Prison met standard 115.81.   |

| 115.87 | Data collection  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | The auditor reviewed PCS. 001.PREA.001, it was confirmed a policy was in place to collect yearly data of PREA related incidents for the Department of Justice. The data is collected from the PREA E- Management System. Every incident of sexual abuse is reported using the PREA E- Management reporting system. The data is collected by the Facility PREA Manager and sent to the New Jersey Statewide PREA Coordinator. This facility data is reviewed and forwarded to the Department of Justice for publications no later than June 30. |
|        | The above information was confirmed through an interview with the Facility PREA Manager, Statewide PREA Coordinator.   |
|        | Northern State Prison met the requirements of Standard 115.87.   |

| 115.88 | Data review for corrective action   |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | Policy PCS. 001.PREA.001 addresses the requirements of Standard 115.88. The New Jersey Department of Corrections institution reviews and assesses all sexual abuse/sexual harassment data at least annually to improve the effectiveness of its sexual abuse prevention, detection and response policies, to identify any trends, or problematic areas and to take corrective action, if needed. NJDOC utilizes a standardized instrument with definitions to collect accurate, uniform data for every allegation of sexual assault. During a previous interview with the PREA Coordinator she indicated that NJDOC data is 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. The instrument includes the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. A review of several annual report revealed that annual reports 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. NJDOC's annual reports are approved by the agency head and made readily available to the public through its website. |
|        | Auditor verified the above information by interviewing the Facility PREA Manager and Statewide PREA Coordinator.  |
|        | Northern State Prison met the requirements of Standard 115.88.  |

| 115.89  | Data storage, publication, and destruction   |
|---|--|
|   | Auditor Overall Determination: Meets Standard  |
|   | Auditor Discussion   |
| The auditor reviewed PCS.001.008 PREA Compliance, it was determined policy was in place for the secure dat publication, and destruction. This was confirmed by interviewing the Statewide PREA Coordinator, and Facility Manager. |  |
|   | The department ensures that incident based, and aggregate data are securely retained. The departmental policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website. The agency will remove all personal identifiers before making the sexual abuse publicly. The Department maintains sexual abuse data collected following state statue. The up-to-date survey information is submitted and verified by the PREA Coordinator. In addition to keeping paper documents according to retention schedule a retention folder is located on the computer. |
|   | The review of the agency Sexual Assault Prevention Program Annual Reports confirms the above practice.   |
|   | Northern State Prison met the requirements of Standard 115.89  |

| 115.401 | Frequency and scope of audits  |
|---------|--|
|         | Auditor Overall Determination: Meets Standard  |
|         | Auditor Discussion   |
|         | The Northern State Prison previous PREA Audit was successfully completed June 2019. The previous audit documentation was made available for auditor review as needed. Any documentation that was pertinent to the audit was made available to the auditor. During the tour of the facility, the upcoming audit notices was posted throughout the facility. The facility provided electronic verification of the PREA notices being posted within the required timelines. |
|         | The facility provided inmates with information about the PREA audit at least six weeks prior to the site visit and demonstrated based on their base and clinical files that PREA has been a continued practice.  |
|         | Corrective actions taken by the facility second assessment within 30 days of admission. The corrective actions required did not present impactful defects in internal controls or performance issues.  |
|         | All interviews with staff and inmates were conducted in a private setting, except for the Limited English. The Agency has followed the PREA Standards since the early 2000's.  |
|         | Northern State Prison met the requirements of Standard 115.401.  |

| 115.403 | Audit contents and findings   |
|---------|---|
|         | Auditor Overall Determination: Meets Standard   |
|         | Auditor Discussion  |
|         | The agency places completed audit reports on the agency website as required by the standard. It has provided these documents since 2016 and continued to post them within 2 weeks of the documents being provided to them by the auditor. |
|         | Auditor verified the above information by viewing the website and interviewing the Statewide PREA Coordinator.  |

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

| 115.13 (a) | Supervision and monitoring  |     |
|------------|---|-----|
|            | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?  | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?  | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?  | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?  | yes |
| 115.13 (b) | Supervision and monitoring  |     |
|            | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  | yes |
| 115.13 (c) | Supervision and monitoring  |     |
|            | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?                       | yes |
|            | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?       | yes |
|            | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?   | yes |

| 115.13 (d) | Supervision and monitoring  |                   |
|------------|---|-------------------|
|            | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?  | yes               |
|            | Is this policy and practice implemented for night shifts as well as day shifts?   | yes               |
|            | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?  | yes               |
| 115.14 (a) | Youthful inmates  |                   |
|            | Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | na                |
| 115.14 (b) | Youthful inmates  |                   |
|            | In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | na                |
|            | In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na                |
| 115.14 (c) | Youthful inmates  |                   |
|            | Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | na                |
|            | Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na                |
|            | Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na                |
| 115.15 (a) | Limits to cross-gender viewing and searches   |                   |
|            | Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?   | yes               |
| 115.15 (b) | Limits to cross-gender viewing and searches   |                   |
|            | Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)   | yes               |
|            | Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)  | yes               |
| 115.15 (c) | Limits to cross-gender viewing and searches   |                   |
|            | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  | yes               |
|            |   |                   |
| 115.15 (a) | inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)  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).)  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).)  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).)  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?  Limits to cross-gender viewing and searches  Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)  Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)  Limits to cross-gender viewing and searches  Does the facility document all cross-gender strip searches and cross-gender visual body cavity | na na yes yes yes |

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

| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient   |     |
|------------|--|-----|
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?                           | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?                          | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?                        | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?                         | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?                              | yes |
|            | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.) | yes |
|            | Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  | yes |
|            | Do such steps include, when necessary, providing access to interpreters who can interpret 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 |

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

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

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

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

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

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

| 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 ascural abuse and sexual harassterner (NA if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  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? (NA if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities in the professionally to victims of sexual abuse and sexual infareasment? (NA if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  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 report at legations or suspicions of sexual abuse and sexual harassment? (NA if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  The part-time medical or mental health care acreated to the part-time medical staff receive appropriate training to conduct such assaminations? (NA if agency medical staff are the facility do not conduct forence examinations? (NA if agency medical staff are the facility do not conduct forence examinations? (NA if agency medical staff are proved the training referenced in this standard either from the agency of elsewhere? (NA if the agency does not have any full- or part-time medical or mental health care.  Does the agency all of the part-time medical or mental health care practitioners employed by the agen   | 115.35 (a) | Specialized training: Medical and mental health care  |     |
|--|------------|---|-----|
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| Do intake screenings ordinarily take place within 72 hours of arrival at the facility?  115.41 (c) Screening for risk of victimization and abusiveness   |            |   | yes |
| 115.41 (c) Screening for risk of victimization and abusiveness   | 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 |
| Are all PREA screening assessments conducted using an objective screening instrument?  | 115.41 (c) | Screening for risk of victimization and abusiveness   |     |
|  |            | Are all PREA screening assessments conducted using an objective screening instrument?   | yes |

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

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

| 115.42 (d) | Use of screening information   |     |
|------------|--|-----|
|            | Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?   | yes |
| 115.42 (e) | Use of screening information   |     |
|            | Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?  | yes |
| 115.42 (f) | Use of screening information   |     |
|            | Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  | yes |
| 115.42 (g) | Use of screening information   |     |
|            | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.) | yes |
|            | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)                | yes |
|            | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)                   | yes |
| 115.43 (a) | Protective Custody   |     |
|            | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?  | yes |
|            | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?   | yes |

| 115.43 (b) | Protective Custody   |              |
|------------|--|--------------|
|            | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?   | yes          |
|            | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?   | yes          |
|            | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?  | yes          |
|            | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?   | yes          |
|            | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes          |
|            | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)               | yes          |
|            | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)             | yes          |
| 115.43 (c) | Protective Custody   |              |
|            | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?   | yes          |
|            | Does such an assignment not ordinarily exceed a period of 30 days?   | yes          |
| 115.43 (d) | Protective Custody   |              |
|            | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?   | yes          |
|            | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?  | yes          |
| 115.43 (e) | Protective Custody   |              |
|            | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?      | yes          |
| 115.51 (a) | Inmate reporting   |              |
|            | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?  | yes          |
|            | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?  | yes          |
|            | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?  | yes          |
|            |  | <del>!</del> |

| 115.51 (b) | Inmate reporting  |     |
|------------|---|-----|
|            | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?   | yes |
|            | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  | yes |
|            | Does that private entity or office allow the inmate to remain anonymous upon request?   | yes |
|            | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)   | yes |
| 115.51 (c) | Inmate reporting  |     |
|            | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?   | yes |
|            | Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  | yes |
| 115.51 (d) | Inmate reporting  |     |
|            | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?   | yes |
| 115.52 (a) | Exhaustion of administrative remedies   |     |
|            | Is the agency exempt from this standard?  NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | yes |
| 115.52 (b) | Exhaustion of administrative remedies   |     |
|            | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)   | yes |
|            | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
| 115.52 (c) | Exhaustion of administrative remedies   |     |
|            | Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)   | yes |
|            | Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  | yes |
|            | I   | L   |

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

| 115.53 (a) | Inmate access to outside confidential support services  |     |
|------------|---|-----|
|            | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?     | yes |
|            | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) | yes |
|            | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  | yes |
| 115.53 (b) | Inmate access to outside confidential support services  |     |
|            | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?  | yes |
| 115.53 (c) | Inmate access to outside confidential support services  |     |
|            | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?  | yes |
|            | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  | yes |
| 115.54 (a) | Third-party reporting   |     |
|            | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?   | yes |
|            | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?   | yes |
| 115.61 (a) | Staff and agency reporting duties   |     |
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?  | yes |
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?   | yes |
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?                                      | yes |
| 115.61 (b) | Staff and agency reporting duties   |     |
|            | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?              | yes |

| 115.61 (c) | Staff and agency reporting duties   |     |
|------------|---|-----|
|            | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?  | yes |
|            | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?   | yes |
| 115.61 (d) | Staff and agency reporting duties   |     |
|            | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?  | yes |
| 115.61 (e) | Staff and agency reporting duties   |     |
|            | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?  | yes |
| 115.62 (a) | Agency protection duties  |     |
|            | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?   | yes |
| 115.63 (a) | Reporting to other confinement facilities   |     |
|            | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?  | yes |
| 115.63 (b) | Reporting to other confinement facilities   |     |
|            | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?   | yes |
| 115.63 (c) | Reporting to other confinement facilities   |     |
|            | Does the agency document that it has provided such notification?  | yes |
| 115.63 (d) | Reporting to other confinement facilities   |     |
|            | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  | yes |
| 115.64 (a) | Staff first responder duties  |     |
|            | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?   | yes |
|            | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?  | yes |
|            | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?     | yes |
|            | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |

| 115.64 (b) | Staff first responder duties  |     |
|------------|---|-----|
|            | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  | yes |
| 115.65 (a) | Coordinated response  |     |
|            | Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?   | yes |
| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers  |     |
|            | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| 115.67 (a) | Agency protection against retaliation   |     |
|            | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?  | yes |
|            | Has the agency designated which staff members or departments are charged with monitoring retaliation?   | yes |
| 115.67 (b) | Agency protection against retaliation   |     |
|            | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?   | yes |

| 115.67 (c) | Agency protection against retaliation   |     |
|------------|---|-----|
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?          | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?  | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?   | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?   | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?  | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?   | yes |
|            | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  | yes |
| 115.67 (d) | Agency protection against retaliation   |     |
|            | In the case of inmates, does such monitoring also include periodic status checks?   | yes |
| 115.67 (e) | Agency protection against retaliation   |     |
|            | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?   | yes |
| 115.68 (a) | Post-allegation protective custody  |     |
|            | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?   | yes |
| 115.71 (a) | Criminal and administrative agency investigations   |     |
|            | When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)  | yes |
|            | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)   | yes |

| 115.71 (b) | Criminal and administrative agency investigations  |     |
|------------|--|-----|
|            | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?  | yes |
| 115.71 (c) | Criminal and administrative agency investigations  |     |
|            | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?   | yes |
|            | Do investigators interview alleged victims, suspected perpetrators, and witnesses?   | yes |
|            | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  | yes |
| 115.71 (d) | Criminal and administrative agency investigations  |     |
|            | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?   | yes |
| 115.71 (e) | Criminal and administrative agency investigations  |     |
|            | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?   | yes |
|            | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?   | yes |
| 115.71 (f) | Criminal and administrative agency investigations  |     |
|            | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?   | yes |
|            | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?  | yes |
| 115.71 (g) | Criminal and administrative agency investigations  |     |
|            | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?   | yes |
| 115.71 (h) | Criminal and administrative agency investigations  |     |
|            | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?   | yes |
| 115.71 (i) | Criminal and administrative agency investigations  |     |
|            | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?   | yes |
| 115.71 (j) | Criminal and administrative agency investigations  |     |
|            | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?   | yes |
| 115.71 (I) | Criminal and administrative agency investigations  |     |
|            | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |

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

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

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

| 115.82 (c) | Access to emergency medical and mental health services  |     |
|------------|---|-----|
|            | Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?  | yes |
| 115.82 (d) | Access to emergency medical and mental health services  |     |
|            | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |
| 115.83 (a) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|            | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  | yes |
| 115.83 (b) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|            | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?  | yes |
| 115.83 (c) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|            | Does the facility provide such victims with medical and mental health services consistent with the community level of care?   | yes |
| 115.83 (d) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|            | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)   | yes |
| 115.83 (e) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|            | If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | yes |
| 115.83 (f) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|            | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?   | yes |
| 115.83 (g) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|            | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |
| 115.83 (h) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|            | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)   | yes |
| 115.86 (a) | Sexual abuse incident reviews   |     |
|            | Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?   | yes |

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

| 115.88 (a)  | Data review for corrective action  |     |
|-------------|--|-----|
|             | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?   | yes |
|             | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?  | yes |
|             | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? | yes |
| 115.88 (b)  | Data review for corrective action  |     |
|             | Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?  | yes |
| 115.88 (c)  | Data review for corrective action  |     |
|             | Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?   | yes |
| 115.88 (d)  | Data review for corrective action  |     |
|             | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?  | yes |
| 115.89 (a)  | Data storage, publication, and destruction   |     |
|             | Does the agency ensure that data collected pursuant to § 115.87 are securely retained?   | yes |
| 115.89 (b)  | Data storage, publication, and destruction   |     |
|             | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?  | yes |
| 115.89 (c)  | Data storage, publication, and destruction   |     |
|             | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?   | yes |
| 115.89 (d)  | Data storage, publication, and destruction   |     |
|             | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  | yes |
| 115.401 (a) | Frequency and scope of audits  |     |
|             | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)                                      | yes |

| 115.401 (b) | Frequency and scope of audits   |     |
|-------------|---|-----|
|             | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)   | yes |
|             | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)   | yes |
|             | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)  | yes |
| 115.401 (h) | Frequency and scope of audits   |     |
|             | Did the auditor have access to, and the ability to observe, all areas of the audited facility?  | yes |
| 115.401 (i) | Frequency and scope of audits   |     |
|             | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  | yes |
| 115.401 (m) | Frequency and scope of audits   |     |
|             | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?   | yes |
| 115.401 (n) | Frequency and scope of audits   |     |
|             | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?   | yes |
| 115.403 (f) | Audit contents and findings   |     |
|             | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) | yes |