

PREA Facility Audit Report: Final

Name of Facility: Garden State Youth Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: 11/27/2023

Date Final Report Submitted: 07/22/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Sonya C Love	Date of Signature: 07/22/2024

AUDITOR INFORMATION	
Auditor name:	Love, Sonya
Email:	sonya.love57@outlook.com
Start Date of On-Site Audit:	08/01/2023
End Date of On-Site Audit:	08/03/2023

FACILITY INFORMATION	
Facility name:	Garden State Youth Correctional Facility
Facility physical address:	55 Hogback Road, Crosswicks, New Jersey - 08515
Facility mailing address:	

Primary Contact

Name:	Lisa Schofield
Email Address:	Lisa.Schofield@doc.nj.gov
Telephone Number:	609-298-6300 x 2009

Warden/Jail Administrator/Sheriff/Director	
Name:	David Richards
Email Address:	DavidW.Richards@doc.nj.gov
Telephone Number:	609-298-6300 x 2200

Facility PREA Compliance Manager

Facility Health Service Administrator On-site	
Name:	Lisa Johnson
Email Address:	JohnsoL2@ubhc.rutgers.edu
Telephone Number:	609-298-6300 x2455

Facility Characteristics	
Designed facility capacity:	2120
Current population of facility:	1254
Average daily population for the past 12 months:	1180
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-27, PRU 18-90
Facility security levels/inmate custody levels:	Max, Med, GM, FM
Does the facility hold youthful inmates?	No

Number of staff currently employed at the facility who may have contact with inmates:	746
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	2
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	74

AGENCY INFORMATION	
Name of agency:	New Jersey Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	1300 Stuyvesant Avenue, Trenton, New Jersey - 08618
Mailing Address:	
Telephone number:	6092924036

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

Agency-Wide PREA Coordinator Information			
Name:	Sandra Capra	Email Address:	Sandra.a.capra@doc.nj.gov

Facility AUDIT FINDINGS
Summary of Audit Findings
The OAS automatically populates the number and list of Standards exceeded, the number of

Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-08-01
2. End date of the onsite portion of the audit:	2023-08-03

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Office of the Corrections Ombudsman, New Jersey Ombudsman's Office PO Box 855 Trenton, NJ 08625 Just Detention International, 3325 Wilshire Blvd., Suite 340, Los Angeles, CA 90010.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2120
15. Average daily population for the past 12 months:	1254
16. Number of inmate/resident/detainee housing units:	19
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1074
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:	5
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:	1
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1
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:	2
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:	5

<p>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:</p>	<p>6</p>
<p>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:</p>	<p>18</p>
<p>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:</p>	<p>12</p>
<p>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:</p>	<p>0</p>
<p>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):</p>	<p>The facility does not track certain groups. The Auditor relied upon informal interviews with inmates, medical and mental health practitioners, and the PREA Compliance Manager and visual observations.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>746</p>
<p>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:</p>	<p>74</p>

<p>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:</p>	<p>2</p>
<p>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:</p>	<p>The contractors who interact with the inmate/confined person population are directly associated with an employment position, such as food service or medical/mental health practitioners. As indicated in the PAQ, seventy-four contract staff interact with the inmate/confined person population, and they are provided specific PREA training related to their role-specific responsibilities in the facility and NJDOC-specific PREA training. The contractors interviewed by this Auditor was based on availability, role, and responsibility with the facility.</p>

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>21</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>This Auditor selected participants using various methods such as housing units, race, age, ethnicity, and by request.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>Random Inmate Interviews: The institutional count on the first day of the on-site audit was 1074. The PCM provided institutional rosters sorted by living unit. The PREA Compliance Manager identified additional groups of inmates/confined persons who are the most vulnerable to sexual abuse and sexual harassment. Random inmates/confined persons were selected from institutional rosters by the housing unit. Based on the required number of targeted interviews, this Auditor randomly selected inmates/confined persons for interviews. Twenty-one formal random inmate interviews were conducted with inmates with differing custody levels. After introductions and a brief discussion about the purpose of the interview, participants were assured that their involvement in the audit process was voluntary. Zero inmates/confined persons refused to be interviewed.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>20</p>

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>3</p>
<p>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:</p>	<p>1</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies to determine if a specific targeted population was inclusive in the overall population included discussions with medical and mental health practitioners and the PREA Compliance Manager. Other methods included a facility tour and informal conversations with inmates/confined persons throughout the facility.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies to determine if this population included discussions with medical and mental health practitioners and with the PREA Compliance Manager. Other strategies also included a facility tour with informal conversations with inmates throughout the facility.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>3</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>

<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>5</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>4</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>1</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>1</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>14</p>

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Staff were randomly selected based on availability, role, area of responsibility, and work schedule.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>14</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- 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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>Specialized staff were chosen from a list of persons working on the days of the on-site audit and their roles in the facility. Given their availability, specific specialized staff interviews were conducted. Staff selected for interviews were scheduled for work on August 1, 2 or 3rd. Other specialized administrative staff were interviewed by telephone.</p>
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SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>

<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>Informally, the transgender population was quite vocal over concerns regarding a term coined by the population called weaponizing PREA. The weaponization of PREA refers to a false claim by one inmate/confined person against another inmate/confined person or staff. The concern is potentially having the accused person moved to another living unit or temporarily removed from an enrichment program due to a false claim. Inmates/confined persons indicated a belief in the investigative process but voiced concerns regarding the length of time required to investigate an allegation of sexual abuse. One transgender inmate/confined person expressed dismay over the choice of undergarments provided by the facility. The same individual indicated a preference for the ability to choose her style of undergarments from a list approved by the agency/facility.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

This Auditor sampled documents selected randomly other than the proof documentation provided by the agency or facility. Custody staff were chosen by assignment. Specialized staff were selected based on their job role in the facility. General staff training records (e.g., random) were chosen based on a random selection of staff assigned to work on August 1-3. From the list of working staff, this Auditor requested proof of background checks, proof of PREA training, proof of cross-gender training, and any applicable PREA-related in-service training. Medical and mental health practitioners' proof of PREA training, specialized training, and any applicable PREA-related in-service training. Investigative staff provided proof of general PREA training, specialized investigation training, and any applicable PREA-related in-service training.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	7	1	3	3
Staff-on-inmate sexual abuse	11	1	8	2
Total	18	2	11	5

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	12	0	12	0
Staff-on-inmate sexual harassment	25	0	25	0
Total	37	0	37	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	1	1	0	0	0
Staff-on-inmate sexual abuse	1	1	0	0	0
Total	2	2	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	1	0	2	0
Staff-on-inmate sexual abuse	0	0	4	0
Total	1	0	6	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 Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	7	0
Staff-on-inmate sexual harassment	1	0	13	0
Total	1	0	20	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

7

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>4</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>4</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>2</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>6</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	6
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	Six staff-on-inmate sexual harassment files and six inmate-on-inmate sexual harassment files were reviewed.
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.	<input type="radio"/> Yes <input checked="" type="radio"/> 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.

Yes

No

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

2

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • 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	
<p>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.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment addresses the requirements of PREA Standard 115.11.</p> <p>115.11 (a): NJDOC has a written policy (See PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment) mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.</p> <p>115.11 (b): NJDOC employs an upper-level, agency-wide PREA Coordinator/Director with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. During her interview, the PREA Coordinator confirmed that she has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities with the aid of two Regional PREA Compliance Managers and one analyst, all dedicated to supporting the agency's approach to preventing, detecting, and responding to such conduct.</p>

	<p>115.11 (c): NJDOC operates more than one facility; by examination, this Auditor confirms each facility designates a PREA Compliance Manager with sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards.</p> <p>Conclusion:</p> <p>1. Based on the evidence relied upon in making the compliance determination for this standard, the Auditor’s analysis and reasoning, and the Auditor’s conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.12 (a): A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity’s obligation to adopt and comply with the PREA standards.</p> <p>NJDOC has entered into or renewed contracts for the confinement of inmates on or after August 20, 2012, or since the last PREA audit. By examination, the contractual request for proposal includes PREA language (See Page 2, Section 1), State of New Jersey Department of Corrections, and Request For Proposal Residential Community Release Program(s).</p> <p>115.12 (b): By examination, this Auditor confirmed that any new contract or contract renewal sampled provides for NJDOC contract monitoring to ensure that the contractor complies with the PREA standards (see Page 28, Section 4).</p> <p>Conclusion:</p> <p>1. Based on the evidence relied upon in making the compliance determination for this standard, the Auditor’s analysis and reasoning, and the Auditor’s conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard

Auditor Discussion

The State of New Jersey, Department of Corrections, Policy Number IMM.001.004, Zero Tolerance Policy: Prison Sexual Assault, and Policy Number PCS.001.008, Prevention, Detection and Response of Sexual Abuse and Harassment, address this standard. Policy PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, NJDOC Annual Staffing Analysis, Internal PREA Audit 2023, Garden State Youth Correctional Facility (GSYCF) staffing plan, Collapse Post Report, Alpha Logbook, CUS 001.CRP (camera review procedures), logbooks of unannounced rounds, addresses the requirements of PREA Standard 115.13.

115.13 (a): The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply regularly with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors.

GSYCF has a documented staffing plan. NJDOC PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, pages 11-13, mandates that each facility it operates shall develop, document, and make its best effort to comply regularly with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. By examination, the Garden State Youth Correctional Facility (GSYCF) calculates adequate staffing levels and determines the need for video monitoring. GSYCF considers (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors.

115.13 (b): When the staffing plan is not complied with, GSYCF documents and justifies all deviations from the plan according to the PREA Compliance Manager. The PCM denied any deviation from the staffing plan during this reporting period. GSYCF offered zero documented deviations as evidence—the Auditor samples staffing on weekdays and all shifts to determine compliance with this standard.

115.13 (c): Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA Coordinator required by § 115.11, NJDOC will assess, determine, and document whether adjustments are needed to (1) The staffing plan established under paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan. Problematic GSYCF omitted evidence of compliance with this substandard.

115.13 (d): Each NJDOC facility must implement a policy (See NJDOC PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment) 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. Such policy and practice shall be implemented for night and day shifts. Each agency shall have the policy (See NJDOC PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment) to prohibit staff from alerting other staff members that these supervisory rounds are occurring unless such an announcement is related to the legitimate operational functions of the facility. By examining staffing documents and evidence of unannounced rounds conducted on all shifts, this Auditor determined that GSYCF complies with this substandard—additional documentation of unannounced rounds and evidence that such rounds cover all shifts.

Corrective Action:

1. 115.13 (c): Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA Coordinator required by § 115.11, NJDOC will assess, determine, and document whether adjustments are needed to (1) The staffing plan established under paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan. Problematic GSYCF omitted evidence of compliance with this substandard. GSYCF will submit evidence of consultation with the PREA Coordinator as required in § 115.11.

Conclusion:

GSYCF met the requirements for corrective action. GSYCF provided evidence of consultation with the PREA Coordinator as required in § 115.11. Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period.

115.14 Youthful inmates

	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>This standard is not applicable. GSYCF does not house youthful inmates.</p> <p>115.14 (a): A youthful inmate shall not be placed in a housing unit where the youthful inmate will have sight, sound, or physical contact with any adult inmate using a shared dayroom or other common space, shower area, or sleeping quarters. This standard is not applicable. GSYCF does not house youthful inmates.</p> <p>115.14 (b): In areas outside of housing units, agencies shall either (1) maintain sight and sound separation between youthful inmates and adult inmates or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact. This standard is not applicable. GSYCF does not house youthful inmates.</p> <p>115.14 (c): Agencies shall make their best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible. This standard is not applicable. GSYCF does not house youthful inmates.</p> <p>Conclusion:</p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor’s analysis and reasoning, and the Auditor’s conclusions, this standard is determined to be compliant. This standard complies with all material requirements for the relevant period</p>
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115.15	<p>Limits to cross-gender viewing and searches</p> <hr/> <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>NJDOC Internal Management Procedure CUS.001.SEA.001, Searches of Inmates and Correctional Facilities, NJDOC Policy CUS.001.011, Searches of Incarcerated Persons and Correctional Facilities, NJDOC Policy PCS.001.TGI.01 Gender Identity Housing, and Internal Management Procedure # CUS.001.GRC.001, Gender Restriction of Custody Posts, pages 1-5 address this standard.</p> <p>115.15 (a): All staff sampled (random and specialized) confirmed that GSYCF is prohibited from conducting cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent</p>
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circumstances or when performed by medical practitioners.(See NJDOC Internal Management Procedure CUS.001.SEA.001, Searches of Inmates and Correctional Facilities, Section IV, Procedures, Subsection B Pat Searches, pages 5-6).

NJDOC Policy CUS.001.011, Searches of Incarcerated Persons and Correctional Facilities, Section Procedures, page 5, indicates Except in exigent circumstances, pat searches shall only be conducted by female custody staff members upon female incarcerated persons, including persons whose Gender Identity Search Preference ID Card identifies them as having requested to be searched by female staff. All other incarcerated persons will be pat searched by any available staff member. Facilities must document all cross-gender-pat searches conducted in exigent circumstances and will document the exigent circumstances that warranted the search. Facilities shall not restrict incarcerated persons' access to regularly available programming or other out-of-cell opportunities in order to comply with this requirement.

115.15 (b): GSYCF has a rated capacity that exceeds 50 inmates; therefore, the facility does not permit cross-gender pat-down searches of female inmates absent exigent circumstances. GSYCF is a male adult facility with zero transgender males assigned to the facility at the time of the onsite portion of this audit. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities to comply with this provision. Interviews with the PCM confirmed that GSYCF is a male facility. Further, a review of the facility roster to include the list of transgenders assigned to this facility confirmed that this facility is a male facility with some transgender females assigned. Zero intersex inmates/confined persons were identified by the PCM and medical practitioners during the onsite portion of this audit.

115.15 (c): The facility shall document all cross-gender strip searches, visual body cavity searches, and all cross-gender pat-down searches of female inmates. GSYCF is a male facility with zero transgender males. During interviews with random staff, all confirmed that any cross-gender strip searches, visual body cavity searches, and all cross-gender pat-down searches of female inmates would require the approval of a supervisor and documentation of the incident.

NJDOC Internal Management Procedure CUS.001.SEA.001, Searches of Inmates and Correctional Facilities, Section IV, Procedures, Subsection B Pat Searches, pages 5-6 indicates that pat searches may be conducted by either male or female custody staff members upon male inmates. Except in exigent circumstances, pat searches shall only be conducted by female custody staff members upon female inmates, including cisgender and transgender women and inmates whose Gender Identity Search Preference ID Card identifies them as having requested to be searched by female staff. All other inmates will be pat searched by any available staff member. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply. If there is an exigent circumstance, custody staff shall conduct cross-gender pat-down searches of inmates in a professional and respectful manner and the least intrusive manner possible, consistent with security needs. Facilities must document all pat searches conducted in exigent circumstances.

115.15 (d): The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without a non-medical 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. Such policies and procedures shall require a staff of the opposite gender to announce their presence when entering an inmate housing unit.

115.15 (e): The facility shall not search or physically examine a transgender or intersex inmate to determine the inmate's genital status. If the inmate's genital status is unknown, it may be determined 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. During interviews with a medical and mental health practitioner, each confirmed that an inmate/confined person's genital status could be determined during a broader medical examination. Likewise, during interviews with random and intake staff, all confirmed that nonmedical staff are prohibited from searching or physically examining a transgender or intersex inmate to determine the inmate's genital status.

115.15 (f): The agency shall train security staff to conduct cross-gender pat-down searches and searches of transgender and intersex inmates professionally, respectfully, and in the least intrusive way possible, consistent with security needs. All random custody staff interviewed during the onsite portion of this audit confirmed being trained by NJDOC to conduct cross-gender pat-down searches and searches of transgender and intersex inmates professionally, respectfully, and in the least intrusive way possible, consistent with security needs. The NJDOC Training Application Attendance List 2022 training logs (Search of Persons) confirm that staff are being trained to conduct cross-gender pat-down searches and searches of transgender and intersex inmates professionally, respectfully, and in the least intrusive way possible, consistent with security needs.

NJDOC Searches of Inmates and Correctional Facilities, Internal Management Procedure # CUS.001.SEA.001Section E. Searches of Transgender, Intersex and Non-Binary Inmates, page 7, indicates that Searches/physical examinations of transgender, intersex, and non-binary inmates shall not be conducted for the sole purpose of determining an inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, reviewing medical records, or, if necessary, by learning that information as a part of a broader medical examination conducted in private by a medical practitioner.

Conclusion:

Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis, and reasoning, this standard complies with all material requirements for the relevant period.

115.16

Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy SUP.004.001 Limited English Proficient (LEP) Language Assistance Bilingual Staff and Use of the Language Line, Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault, Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse, Policy PCS.001.DFH.01 Deaf/Hard of Hearing Inmates, Policy IMM.002.003 Americans with Disabilities Act (ADA) and New Jersey Law Against Discrimination – Reasonable Accommodations for Inmates collectively address the policy requirements of Standard 115.16.

115.16 (a): By examination of interpretive language documents and associated policies, this Auditor determined that NJDOC takes appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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. Such steps shall include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing and providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, NJDOC ensures that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates with intellectual disabilities, limited reading skills, or who are blind or have low vision.

NJDOC Policy SUP.004.001, Limited English Proficient (LEP) Language Assistance: Bilingual Staff and Use of the Language Line, Section IV, Procedures, Subsection A-H, page 4, indicates

- A. During the intake process, staff will employ necessary measures to accurately identify LEP inmates and the languages they speak. This should be accurately reflected on each inmate’s face sheet.

- B. The inclusion of a “flag” on the face sheet, denoting LEP status and the inmate’s primary language, will facilitate an ongoing identification and tracking system for each identified inmate.

- C. To change an inmate’s LEP designation after intake, utilize Form 160, “LEP Designation/Change”. A print and fillable version of Form 160 is located on the NJDOC intranet, Forms Management System. Completed forms shall be forwarded to the facility’s LEP coordinator.

- D. Staff shall be trained annually on the availability of the language line services and how to access these services, and a copy of the training attendance shall be sent to

the Office of Training.

E. Staff shall utilize approved language line service vendors that are under a service contract with the NJDOC. All written interpretation services will need to be provided through the Delegated Purchase Authority, or DPA. Each facility's Business Manager will provide their respective DPA information for staff utilization at their parent institution.

F. The DOC will continually monitor the effectiveness of its policy and IMPS and, where needed, implement alternative methods to ensure sufficient communication with LEP inmates.

G. Posters shall be prominently posted at several key areas of each facility to notify the inmate population of the availability of services to assist LEP inmates.

H. Inmates will be advised that the Department will provide LEP inmates with free interpretation and translation services relative to inmate programming, safety, medical, and quasi-legal proceedings.

115.16 (b): By examination of interpretive language documents and associated policies, this Auditor determined that NJDOC takes 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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

115.16 (c): By examination of interpretive language documents and associated policies, this Auditor determined that NJDOC does not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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. Policy SUP.004.001 Limited English Proficient (LEP) Language Assistance Bilingual Staff and Use of the Language Line mandate the contractual use of staff or an interpretive service.

Conclusion:

- 1. Based on the Auditor's analysis and reasoning, including where applicable corrective action, the facility complies with this standard in all material ways.**

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.17 (a): According to the human resource representative, NJDOC does not hire or promote anyone who may have contact with inmates and shall not enlist the services of any contractor who may have contact with inmates who— (1) Have 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); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. (See ADM.006.007 Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee/Volunteer ID Cards and PSM.001.011 Staff Selection and Promotions)</p> <p>115.17 (b): ADM.006.007 Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee/Volunteer ID Cards and PSM.001.011 Staff Selection and Promotions indicates that NJDOC will consider any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist the services of any contractor who may have contact with inmates.</p> <p>115.17 (c): ADM.006.007 Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee/Volunteer ID Cards and PSM.001.011 Staff Selection and Promotions, before hiring new employees who may have contact with inmates, the agency shall (1) Perform a criminal background record check and (2), 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.</p> <p>115.17 (d): ADM.006.007 Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee/Volunteer ID Cards and PSM.001.011 Staff Selection and Promotions, NJDOC will perform a criminal background record check before enlisting the services of any contractor who may have contact with inmates.</p> <p>115.17 (e): ADM.006.007 Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee/Volunteer ID Cards and PSM.001.011 Staff Selection and Promotions, NJDOC will 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 existing employees.</p> <p>115.17 (f): ADM.006.007 Pre-Employment and ID Card Renewal Background Checks: Issuance of Employee/Volunteer ID Cards and PSM.001.011 Staff Selection and Promotions, NJDOC will 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 and in any interviews or</p>

	<p>written self-evaluations conducted as part of reviews of current employees. By examination, this Auditor determined that the agency also imposes a continuing affirmative duty to disclose any such misconduct upon employees. (See PSM.001.001 The Reporting of Summons, Arrests, Incarcerations: The Confiscation of Firearms and Suspension of Firearms Privileges of New Jersey Department of Corrections Employees)</p> <p>115.17 (g): Material omissions regarding such misconduct or the provision of materially false information are grounds for termination. (See PSM.001.001 The Reporting of Summons, Arrests, Incarcerations: The Confiscation of Firearms and Suspension of Firearms Privileges of New Jersey Department of Corrections Employees)</p> <p>115.17 (h): PSM.001.001 The Reporting of Summons, Arrests, Incarcerations: The Confiscation of Firearms and Suspension of Firearms Privileges of New Jersey Department of Corrections Employees, unless prohibited by law, the agency shall 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.</p> <p>Conclusion:</p> <p>Based on the Auditor’s analysis and reasoning, including where applicable corrective action, the facility complies with this standard in all material ways.</p>
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115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.18 (a): According to the facility Warden, when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse.</p> <p>115.18 (b): According to the NJDOC Commissioner, when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency</p> <p>shall consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. Garden State met the standard, which is substantial compliance, and complied with it in all material ways for the relevant review period.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The State of New Jersey Department of Corrections, Policy Number PCS.001.008, Prevention, Detection, and Response of Sexual Abuse and Harassment, Policy Number CUS.001.011, Searches of Incarcerated Persons and Correctional Facilities, Internal Management Procedure #ADM.SID.035 Investigation Procedures, Internal Management Procedure CUS.001.CSM.01, Crime Scene Management, Internal Management Procedure MED.MHS.002.001, Emergency Mental Health Services, Internal Management Procedure # MED.MLI.007, Sexual Assault, Internal Management Procedure # MED.MLI.005, Forensic Specimen Collection, Internal Management Procedure #014, Procedures for Sexual Offenses, Internal Management Procedure MED.MHS.002.010, Counseling Services for Victims of Sexual Assault, Sexual Assault Victim’s Bill of Rights N.J. Stat. Ann. § 52:4B-60.1 et seq., Chapter 4B: Section: 52:4B-50: Findings, Declarations Relative to Sexual Assault Nurse Examiner program, address Standard 115.21.</p> <p>115.21 (a): To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. (See Policy Number PCS.001.008, Prevention, Detection, and Response of Sexual Abuse and Harassment)</p> <p>NJDOC is responsible for investigating allegations of sexual abuse (See. Internal Management Procedure #ADM.SID.035 Investigation Procedures, pages 2-4). Through a staff interview with an investigator during this audit, he confirmed that the agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.</p> <p>115.21 (b): The protocol shall be developmentally appropriate for youth where applicable and, as appropriate, shall be 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.</p> <p>The protocol is 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 as confirmed during an interview with the PREA investigator. Garden State Youth Facility is an adult prison. It does not house youth. It does, however, house transgender females.</p> <p>NJDOC Internal Management Procedure # MED.MLI.007, Sexual Assault, Section IV, Subsection B, pages 2-3, indicates that emergency medical care will be provided as</p>

needed and the mental health provider will be contacted. The institution Administrator, on-call Administrator, and NJDOC Health Services Director will be contacted immediately. Medical and mental health treatment should be provided on-site but only to the extent required for clinical stabilization and transportation to the appropriate hospital system. If there is no clinical indication (physical or mental health trauma) for transportation to an Emergency Department, then the Facility Administrator should be apprised immediately of this fact. The Facility Administrator will report this to SID and a determination will be made if there is sufficient forensic evidence to transport to the Emergency Department.

115.21 (c): According to the PREA Compliance Manager, the agency offers 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. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. Garden State, Youth Correctional Facility, will be transported to Virtua of Mount Holly, 175 Madison Avenue, Mount Holly, NJ, 609-914-6000. GSYCF omitted evidence to support this substandard. This substandard requires corrective action. The agency shall document its efforts to provide SAFEs or SANEs.

115.21 (d): NJDOC makes available a victim advocate (SART), a qualified advocacy response team member. By examination, NJDOC documents its efforts to secure services from rape crisis centers. NJDOC utilizes a qualified rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

New Jersey, N.J.S.A. 52:4B-50 et seq. mandates every county prosecutor's office to establish a Sexual Assault Response Team (SART) and a SART Advisory Board. A victim of sexual assault is eligible for SART services when the following criteria are met:

1. The victim is 13 years of age or older;
2. The assault occurred within the past five days, and
3. The victim consents to SART activation.

SART comprises a law enforcement officer, a sexual assault care advocate, and a sexual assault nurse examiner (SANE). The SART team is available for those in the community and those incarcerated. For PREA allegations at NJDOC, SID contacts the county prosecutor, who gets the SART team for those incarcerated persons housed in that county.

PAQ 115.21 (e): Garden State confirmed that as requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and provide emotional support,

crisis intervention, information, and referrals.

115.21 (f): To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section. NJDOC is responsible for conducting administrative and criminal investigations and then making the appropriate referral to the prosecutor's office for action.

115.21 (g): The requirements of paragraphs (a) through (f) of this section shall also apply to (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails. The Auditor is not required to audit this provision.

115.21 (h): For this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. Internal Management Procedure # MED.MLI.007, Sexual Assault, Section IV, PROCEDURES Subsection A indicates that only licensed healthcare practitioners will assess the inmate/confined person victim for obvious physical and mental health trauma.

Corrective Action:

1. GSYCF will submit evidence in the form of investigative reports (4) to support this standard. See 115.21 (c)-8 The number of forensic medical exams conducted during the past 12 months: 4.
2. 115.21 (c): According to the PREA Compliance Manager, the agency offers 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. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs. GSYCF omitted evidence to support this substandard. GSYCF will submit evidence to confirm that examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible or performed by other qualified medical practitioners.
3. Any additional corrective action is contingent upon the evidence submitted by GSYCF.

Conclusion:

1. GSYCF submitted evidence in the form of investigative reports (4) to support this standard. See 115.21 (c)-8.
2. GSYCF submitted evidence of four investigations that identified SANE/SAFE

forensic exams that occurred in a local hospital and were completed by either a SANE/SANE examiner or a qualified medical practitioner.

3. GSYCF meets this standard in all material ways for the relevant review period.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.22 (a): The NJDOC assigns to the SID the responsibility of investigating violations of the laws of the United States, the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C and NJDOC policies and procedures by inmates, staff and other individuals who visit NJDOC facilities. According to a PREA investigator interviewed during this audit, NJDOC ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Problematic, 115.22 (a) - 3. According to Garden State, in the past 12 months, the number of allegations resulting in an administrative investigation was 60. Standard 115.22 (a)-5 Referring to allegations received during the past 12 months, all administrative and criminal investigations completed were eight incidents, with a 4.8 % completion rate during this reporting period. This substandard requires corrective action.</p> <p>115.22 (b): By examination, this Auditor determined that NJDOC has a policy 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. The agency publishes such policy on its website.</p> <p>115.22 (c): If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity. This substandard is not applicable. NJDOC assigns to the SID the duty of investigating violations of the laws of the United States and the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C, and NJDOC policies and procedures by inmates, staff and other individuals who visit NJDOC facilities.</p> <p>115.22 (d): Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations. NJDOC assigns to the SID the responsibility of investigating violations of the laws of the United States and the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C, and NJDOC policies and procedures by</p>

inmates, staff and other individuals who visit NJDOC facilities.

115.22 (e): Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations. Auditor is not required to audit this provision.

Corrective Action:

1. 115.22 (a) - 3, According to Garden State, in the past 12 months, the number of allegations resulting in an administrative investigation was 60. Standard 115.22 (a)-5 Referring to claims received during the past 12 months, the number of administrative and criminal investigations completed was eight incidents, a 4.8 % completion rate during this reporting period. NJDOC SID, in conjunction with the NJDOC agency PREA Coordinator, will develop an action plan to address this issue.
2. This Auditor will continue to monitor the rate at which SID completes investigations during the corrective action period.

Conclusion:

1. NJDOC developed a plan of action.
2. NJDOC produced administrative investigations from prior 12-month period.
3. This Auditor sampled the investigations to determined compliance with this standard.
4. Garden State reduced the number of outstanding investigations.
5. Inmates/confined persons were notified of the outcome of the closed investigations.
6. Garden State provided proof of the notification to inmates/confined persons.
7. The PREA Coordinator and her team and the facility PCM will continue to monitor the process for compliance.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.31 (a): According to the PREA Compliance Manager, Garden State/NJDOC trains all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from

retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Electronic training files support the training of NJDOC employees. Likewise, interviews with a sample of random and specialized staff all confirmed training as outlined in this substandard.

NJDOC Policy Number IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment, Section II., Staff PREA Education and Training, page 7, indicates that all NJDOC employees (both custody and civilian staff), contractors, and volunteers receive PREA-specific training on an annual basis. This training is focused on key issues regarding zero tolerance, staff sexual misconduct, the prevention of prison sexual abuse, incident reporting, and first responder responsibilities.

115.31 (b): Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only female inmates or vice versa. NJDOC provides staff with training tailored explicitly to informing staff regarding PREA. NJDOC electronic training files (State of New Jersey Training Application Class Attendance List 2022) support the training of NJDOC employees. Likewise, interviews with a sample of random and specialized staff all confirmed training as outlined in this substandard.

NJDOC Policy Number IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment, Section II., Staff PREA Education and Training, page 7, indicates that all NJDOC employees (both custody and civilian staff), contractors, and volunteers receive PREA-specific training on an annual basis. This training is focused on key issues regarding zero tolerance, staff sexual misconduct, the prevention of prison sexual abuse, reporting of incidents, and first responder responsibilities. Participation in requisite PREA training shall be documented through employee signature or electronic verification, noting that employees understood the training they have received. Training records will be retained at the Correctional Staff Training Academy. All investigative staff receive specialized training for conducting sexual abuse investigations in correctional facilities. Additionally, all full and part-time medical and mental health care practitioners receive specialized training.

115.31 (c): According to the PREA Compliance Manager, all current employees who have not received such training shall be trained within one year of the effective date of the PREA standards. The agency shall 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. In years when an employee does not receive refresher training, the agency shall provide information on current sexual abuse and sexual harassment policies. NJDOC, by examination, provides PREA-related education during roll call and mandatory training yearly.

	<p>115.31 (d): This Auditor confirmed by examination that the State of New Jersey Training Application Class Attendance List confirms that employees understand the training they have received for GYCF 2022.</p> <p>Conclusion:</p> <p>Garden State met this standard, which is substantial compliance, and complied with it in all material ways for the relevant review period.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.32 (a): By examination of a sample of training records of volunteers and contractors who may have contact with inmates, this Auditor confirms 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.</p> <p>NJDOC Policy Number IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment, Section II., Staff PREA Education and Training, page 7, indicates that all NJDOC employees (both custody and civilian staff), contractors, and volunteers receive PREA-specific training on an annual basis. This training is focused on key issues regarding zero tolerance, staff sexual misconduct, the prevention of prison sexual abuse, reporting of incidents, and first responder responsibilities. Participation in requisite PREA training shall be documented through employee signature or electronic verification, noting that employees understood the training they have received. Training records will be retained at the Correctional Staff Training Academy. All investigative staff receive specialized training for conducting sexual abuse investigations in correctional facilities. Additionally, all full and part-time medical and mental health care practitioners receive specialized training.</p> <p>115.32 (b): By examination, the level and type of training provided to volunteers and contractors shall be based on the services they offer and the level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.</p> <p>NJDOC Policy Number IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment, Section II., Staff PREA Education and Training, page 7, indicates that all NJDOC employees (both custody and civilian staff), contractors, and volunteers receive PREA-specific training on an annual basis. This training is focused on key issues regarding zero tolerance, staff sexual misconduct, the prevention of prison sexual abuse, reporting of incidents, and first responder responsibilities. Participation in requisite PREA training shall be documented through employee</p>

	<p>signature or electronic verification, noting that employees understood the training they have received. Training records will be retained at the Correctional Staff Training Academy. All investigative staff receive specialized training for conducting sexual abuse investigations in correctional facilities. Additionally, all full and part-time medical and mental health care practitioners receive specialized training.</p> <p>115.32 (c): By examination of a sample of training records, this Auditor confirms that NJDOC maintains documentation confirming that volunteers and contractors understand the training they have received.</p> <p>NJDOC Policy Number IMM.001.004, Zero Tolerance Policy: Prison Sexual Abuse and Sexual Harassment, Section II., Staff PREA Education and Training, page 7, indicates that all NJDOC employees (both custody and civilian staff), contractors, and volunteers receive PREA-specific training on an annual basis. This training is focused on key issues regarding zero tolerance, staff sexual misconduct, the prevention of prison sexual abuse, reporting of incidents, and first responder responsibilities. Participation in requisite PREA training shall be documented through employee signature or electronic verification, noting that employees understood the training they have received. Training records will be retained at the Correctional Staff Training Academy. All investigative staff receive specialized training for conducting sexual abuse investigations in correctional facilities. Additionally, all full and part-time medical and mental health care practitioners receive specialized training.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. Garden State substantially complies in all material ways with this standard for the relevant review period.
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.33 (a): According to intake staff, during the intake process, inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Interviews with a sample of random and targeted inmates confirmed receipt of PREA-related education and victim advocacy information during the intake process. The information was provided as a video, face-to-face orientation, and a video. Interviews with a sample of random and targeted inmates confirmed receipt of PREA-related education and victim advocacy information during the intake</p>

process.

NJDOC Policy SUP.004.001, Section IV, Limited English Proficient (LEP) Language Assistance: Bilingual Staff and Use of the Language Line, states E. Staff shall utilize approved language line service vendors that are under service contract with the NJDOC.

Further, during the facility tour, this Auditor observed signage provided in English and translated into Spanish in all living units and throughout the facility. Inmate education orientation documents confirmed that Garden State includes information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Interviews with a sample of random and targeted inmates confirmed receipt of PREA-related education and victim advocacy information during the intake process.

115.33 (b): Within 30 days of intake, NJDOC provides comprehensive education to inmates, either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents and regarding agency policies and procedures for responding to such incidents. Interviews with a sample of random and targeted inmates confirmed receipt of PREA-related education and victim advocacy information during the intake process.

115.33 (c): Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards and shall 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.

115.33 (d): The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. Interviews with a sample of random and targeted inmates confirmed receipt of PREA-related education and victim advocacy information during the intake process.

115.33 (e): The agency shall maintain documentation of inmate participation in these education sessions.

115.33 (f): Besides providing such education, NJDOC ensures that crucial information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats, as confirmed during the facility tour.

Conclusion:

Garden State substantially complies in all material ways with this standard for the relevant review period.

115.34 Specialized training: Investigations

	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.34 (a): Besides the general training NJDOC provides to all employees under § 115.31, NJDOC ensures that to the extent the agency conducts sexual abuse investigations, SID investigators receive training in conducting such investigations in confinement settings.</p> <p>115.34 (b): By examination of the training curriculum, specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral and as confirmed by a PREA investigator during his interview for this audit period.</p> <p>115.34 (c): By examination of the training records, NJDOC maintains documentation that SID investigators have completed the required specialized training in conducting sexual abuse investigations.</p> <p>115.34 (d): Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. Garden State met the requirements of this standard in all material ways for this relevant review period.

115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.35 (a): NJDOC ensures that all full- and part-time medical and mental health care practitioners who regularly work in its facilities have been trained in (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>115.35 (b): If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations. NJDOC medical practitioners do not conduct forensic examinations. Inmates are transported to a local hospital for care.</p>

	<p>115.35 (c): NJDOC shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere. Problematic, Garden State omitted evidence of compliance with this substandard. This requires corrective action.</p> <p>115.35 (d): According to medical and mental health care practitioners interviewed during this audit, NJDOC professional staff receive the training mandated for employees under § 115.31 or contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. Garden State met the requirements of this standard in all material ways for the relevant review period.
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>NJDOC Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse, and Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault, Internal Management Procedure MED.MHS.002.001 Emergency Mental Health Services, Policy Number MED.002.004 Mental Health Services Staff, Policy PCS.001.TGI.01 Transgender and Intersex Inmates, Policy MED.001.012 Inmate Medical/Health Care Services, Internal Management Procedure MED.IMA.005 Intra-system Transfers and Internal Management Procedure MED.IMA.001 Health Appraisals at Reception, CLS.002.001 Classification Intake Process, CLS.005.001 Review of Inmates by Classification and Classification Review Committees collectively address this standard.</p> <p>115.41 (a): Intake staff confirmed that 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. (See NJDOC Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse, and Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault).</p> <p>In PAQ 115.41 (a)-1, Garden State confirmed that NJDOC has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abuse toward other inmates.</p> <p>115.41 (b): Intake staff confirmed that intake screening ordinarily occurs within 72 hours of arrival at the facility. (See NJDOC Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse, and Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault). By examining a sample of intake screenings, this auditor determined that intake screening ordinarily occurs within 72 hours of arrival at the facility.</p>

115.41 (c): Such assessments shall be conducted using an objective screening instrument. Problematic, NJDOC lacks evidence to support compliance with this substandard. This standard requires corrective action.

By examination, this Auditor confirmed that 115.41 (d): The intake screening considers, 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; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes. however, the screening instrument was not objective. This substandard requires corrective action.

115.41 (e): The initial screening shall consider prior acts of sexual abuse, previous convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

This substandard requires corrective action. NJDOC will submit evidence of compliance from a group selected by the Auditor.

115.41 (f): 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.

This substandard requires corrective action. NJDOC will submit evidence of compliance from a group selected by the Auditor.

115.41 (g): An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

This substandard requires corrective action. NJDOC will submit evidence of compliance from a group selected by the Auditor.

115.41 (h): Inmates may not be 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.

During random and targeted interviews, zero inmates indicated ever being 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.

115.41 (i): The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard to ensure

that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

During this facility tour, the Auditor observed physical files located in designated secure file rooms with limited access based on role and responsibility. The file rooms and cabinets contained locks.

Corrective Action:

1. 115.41 (c): Such assessments shall be conducted using an objective screening instrument. Problematic, NJDOC lacks evidence to support compliance with this substandard. This standard requires corrective action. NJDOC/Garden State will submit a select sample of risk assessments for this Auditor to review to determine compliance. Any additional corrective action is contingent on full compliance with this substandard.
2. 115.41 (e): The initial screening shall consider prior acts of sexual abuse, previous convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. This substandard requires corrective action. NJDOC will submit evidence of compliance from a group selected by the Auditor.
3. 115.41 (f): 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. This substandard requires corrective action. NJDOC will submit evidence of compliance from a group selected by the Auditor
4. 115.41 (g): An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. This substandard requires corrective action. NJDOC will submit evidence of compliance from a group selected by the Auditor.

Conclusion:

1. NJDOC provided proof in the form of completed assessments (6) from a select group of assessments using an objective screening instrument and compliance with corrective actions listed above. NJDOC complies with corrective actions for 115.41 e-f.
2. NJDOC now meets this standard, complies in all material ways with this standard during the relevant review period.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard

Auditor Discussion

115.42 (a): NJDOC Policy PCS.001.008 PREA Compliance directs facilities to use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Problematic, the screening instrument is not objective. This standard, in conjunction with Standard 115.42, requires corrective action.

115.42 (b): According to the PREA Compliance Manager, Garden State makes individualized determinations about how to ensure the safety of each inmate. Inmates have the ability on intake to provide information to NJDOC regarding their gender identity. When gender identity information is provided, NJDOC provides the inmate a Gender Identity Information Form and a Gender Identity Housing Request Form, which is completed to provide facilities with information to guide placement considerations. Moreover, inmates identified as transgender, intersex, or non-binary, including those who self-identify, are referred to the PCM for a face-to-face meeting and allowed to express their views regarding their sexual safety housing rights. The agency's PREA Accommodations Committee then reviews the inmate's Gender Identity Form to schedule a PAC housing/program consideration review under PCS.001.TGI.01, Gender Identity Housing.

The PREA Accommodation Committee (PAC) is a sub-committee of the agency's Sexual Assault Advisory Council responsible for making individualized determinations about transgender, intersex, or non-binary incarcerated persons' privacy, housing, and programming assignments. The PAC has an Executive representative from Women's Services, Health Services, and Operations. An LGBTQIA+ representative, who may be internal to the NJDOC or external, is invited to participate in the PAC hearing in an advisory capacity, as confirmed by the PREA Coordinator.

115.42 (c): By examination of PCS.001.TGI.01 Gender Identity Housing policy confirms that NJDOC considers whether to assign a transgender or intersex inmate to a facility for male or female inmates. In making other housing and programming assignments, the agency considers on a case-by-case basis whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems. Further, this Auditor examined a sample of PREA Accommodation Committee (PAC) minutes to determine compliance with this substandard.

115.42 (d): By examination of semi-annual reassessments for placement and programming assignments, this Auditor determined that each transgender or intersex inmate sampled during the audit was reassessed at least twice each year to review any threats to safety experienced by the inmate.

115.42 (e): A transgender or intersex inmate's views concerning their safety shall be seriously considered. By examination of semi-annual reassessments for placement and programming assignments, this Auditor determined that Garden State seriously considers inmates' views concerning their safety.

	<p>115.42 (f): Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Interviews with transgender inmates sampled during this audit confirmed the ability to shower separately with a measure of privacy.</p> <p>115.42 (g): In an interview with the Commissioner for NJDOC, she confirmed that the agency refrains from placing inmates identified as lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on such identification or status unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment to protect such inmates.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with the standard for the relevant review period.
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115.43	Protective Custody
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse, Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault, Policy IMM.002.003 Americans With Disabilities Act (ADA) and New Jersey Law Against Discrimination - Reasonable Accommodations for Inmates, Internal Management Procedure CLS.002.INT.001 Classification Intake Procedures, Policy ADM.019.003 Close Custody Units, Internal Management Procedure ADM.019.003.IHU Investigative Housing Unit, Internal Management Procedure ADM.019.003.TAH Temporary Administrative Housing and Internal Management Procedure MED.MHS.002.001 Emergency Mental Health Services address Standard 115.43.</p> <p>115.43 (a): This Auditor interviewed staff supervising inmates in segregated housing. The staff interviewed confirmed that inmates at Garden State at high risk for sexual victimization are not to be placed 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. If Garden State cannot conduct an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p>115.43 (b): Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document (1) The opportunities that have been limited, (2) The</p>

	<p>duration of the limitation, and (3) The reasons for such limitations. The facility tour included touring segregation. Zero inmates were housed in segregation for protection from an abuser.</p> <p>115.43 (c): Staff interviewed who supervised inmates in segregated housing confirmed that Garden State would assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed 30 days. During this reporting period, documents sampled confirmed zero inmates were placed in segregation for protection from an abuser during this reporting period.</p> <p>115.43 (d): Staff interviewed who supervised inmates in segregated housing confirmed that Garden State would document if an involuntary segregated housing assignment is made under paragraph (a) of this section, (1) The basis for the facility's concern for the inmate's safety and (2) The reason why no alternative means of separation can be arranged.</p> <p>115.43 (e): Staff interviewed who supervised inmates in segregated housing confirmed that Garden State would document every 30 days. Garden State would afford the inmate a placement review to determine whether there is a continuing need for separation from the general population.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. Garden State met the requirements for this standard in all material ways for the relevant review period.
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse, Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault, Policy IMM.002.001 Inmate Remedy System, Internal Management Procedure, IMM.002.IRS.001 Inmate Remedy System, Internal Management Procedure IMM.002.JPG.001 JPAY Guidelines, and Internal Management Procedure PCS.001.PREA.OMB Allegations of Sexual Abuse, Assault, Harassment, and Retaliation Reported to the Office of the Ombudsman address the requirements of Standard 115.51.</p> <p>115.51 (a): NJDOC provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.</p>

	<p>115.51 (b): NJDOC provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency and that can receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.</p> <p>115.51 (c): Staff interviewed during this audit confirmed the acceptance of reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports and notify a supervisor.</p> <p>115.51 (d): NJDOC, by examination, provides a method for staff to report sexual abuse and sexual harassment of inmates privately.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC will continue to monitor this standard for compliance post-audit. 2. NJDOC meets compliance in all material ways with this standard for the relevant review period.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse, Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault, Policy IMM.002.001 Inmate Remedy System, Internal Management Procedure, IMM.002.IRS.001 Inmate Remedy System and Internal Management. Procedure IMM.002.JPG.001 JPay Guidelines collectively address Standard 115.52.</p> <p>115.52 (a): By examination, this Auditor determined that NJDOC has an administrative procedure to address inmate grievances regarding sexual abuse. Likewise, the PREA Compliance Manager indicated that Garden State adheres to IMM.002.IRS.001 Inmate Remedy System. This Auditor observed whether signage throughout Garden State could be easily read/accessed by the population, specifically: Signage language is clear and easy to understand. Signage specific to services, such as emotional support services, civil immigration, and external reporting, included information detailing administrative procedures available to the population. Garden State facility signage was posted in English and Spanish, consistent with the languages most commonly spoken in the facility.</p> <p>115.52 (b): (1) By examination, this Auditor determined that NJDOC does not impose a time limit on when an inmate may submit a grievance regarding an allegation of</p>

sexual abuse. (2) The agency may apply otherwise applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) NJDOC does not require an inmate to use any informal grievance process or to attempt otherwise to resolve with staff an alleged incident of sexual abuse. (4) Nothing in this section restricts NJDOC's ability to defend against an inmate lawsuit because the applicable statute of limitations has expired.

115.52 (c): NJDOC ensures that— (1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and (2) Such grievance is not referred to a staff member who is the subject of the complaint.

115.52 (d): (1) The agency issues 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. (2) Computation of the 90 days does not include inmates' time to prepare any administrative appeal. (3) The agency may claim an extension of time to respond of up to 70 days if the normal period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for the reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

115.52 (d)-2 In the past 12 months, the number of grievances filed that alleged sexual abuse was zero. It should be noted that the investigative report 2022-06-29-*** contains allegations regarding an inmate being impeded access to the kiosk. The kiosk is one method available to IPs to report allegations of sexual abuse/harassment. The Office of the Ombudsman contacted the SID/Special Victims Unit (SVU) Central Office Headquarters (COHQ). The Office of the Ombudsman indicates that Jane Doe #1 alleged being raped, being subjected to "hang beatings," kept without clothes under constant watch, stripped and searched by male correctional staff, and denied access to the kiosk to submit a PREA-related grievance, being falsely accused, being returned to a male prison without due process, and staff use of male pronouns when referring to Jane Doe #1, a transgender female. Investigative reports confirmed that NJDOC initiated several investigations due to the email. Further, one investigative report linked to the allegations made by Jane Doe #1 suggests that at the time a request was made by the IP for access to the kiosk to file a PREA-related complaint, the IP was under a behavior health observation. Records indicate Jane Doe #1 was given the opportunity to speak with healthcare practitioners to report a PREA incident. Jane Doe#1 reported a PREA allegation to staff because management and behavioral health concerns for the IP impeded access to the kiosk. The IP's PREA-related complaint was immediately reported to NJDOC/SVU, and several investigations were initiated to address each allegation. According to investigative records, the allegations of rape did not occur at Garden State, according to the statement obtained from the IP. Due to the seriousness of the allegations NJDOC/SVU began an investigation into the matter.

	<p>115.52 (e): (1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be permitted to file such requests on behalf of inmates. (2) 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 agreed to have the request filed on their behalf and may also require the alleged victim to pursue any subsequent steps in the administrative remedy process personally. (3) If the inmate declines to have the request processed on their behalf, the agency shall document the inmate’s decision. During this reporting period, Garden State affirmed zero third-party reports and zero declination of third-party assistance.</p> <p>115.52 (f): (1) NJDOC has an established procedure for filing an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the allegation is immediately forwarded to SID and the facility Administrator to a level of review at which immediate corrective action may be taken. NJDOC will issue an initial response within 48 hours and shall issue a final agency decision within five calendar days. The initial response and final agency decision document the agency’s determination of whether the inmate is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. SID will forward the findings from the Inmate Remedy Form that allege sexual assault to the institutional Inmate Remedy System Coordinator within the required time frames. The coordinator will forward a response to the inmate.</p> <p>115.52 (g): NJDOC may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets standard, complies in all material ways with the standard for the relevant review period.
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.53 (a): According to the PREA Compliance Manager, Garden State provides 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, and, for persons detained solely for civil immigration purposes, immigrant services agencies. Further, Garden State enables reasonable communication between inmates and these organizations and agencies as confidential as possible. Services at this correctional facility can be accessed via the inmate telephone system by dialing: *PREA# Calls to the PREA Emotional Support Line are free. The hours of operation at this correctional facility are 7:00 a.m. - to 10:00 p.m., seven days per week (subject to operational needs and requirements). Calls to The PREA Emotional Support Hotline are classified as confidential. However, the service provider will notify the NJDOC if the caller communicates a threat of imminent harm against self or others. Additionally, inmates are informed that any misuse/abuse of the PREA Emotional Support Line and the inmate telephone system may result in discipline by NJAC 10A Chapter 4 inmate Discipline.

115.53 (b): By examining intake educational documents provided to inmates during the orientation process, this Auditor determined that inmates are informed of the extent to which such communications will be monitored and how reports of abuse will be forwarded to authorities under mandatory reporting laws. NJDOC calls to The PREA Emotional Support Hotline are classified as confidential.

115.53 (c): The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that can provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

Corrective Action:

1. Garden State will provide evidence of copies of signed agreements or documentation showing attempts to enter into such agreements with Burlington County’s SAS Program for Emotional Advocacy Services.

Conclusion:

1. NJDOC provided proof of an agreement with a local advocacy organization.
2. NJDOC meet standards, complies in all material ways with the standard for the relevant review period.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse, Policy

	<p>IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault, Policy IMM.002.001 Inmate Remedy System, Internal Management Procedure, IMM.002.IRS.001 Inmate Remedy System, Internal Management Procedure IMM.002.JPG.001 JPay Guidelines, and Internal Management Procedure PCS.001.PREA.OMB Allegations of Sexual Abuse, Assault, Harassment, and Retaliation Reported to the Office of the Ombudsman collectively address Standard addresses the requirements of Standard 115.54.</p> <p>115.54 (a): NJDOC has established a method to receive third-party reports of sexual abuse and sexual harassment and distributed publicly on how to report sexual abuse and sexual harassment on behalf of an inmate. Inmates may contact the Corrections Ombudsman (Confidential. Anonymous upon request): Office of the Corrections Ombudsman, PO Box # 855 Trenton, NJ 08625, Inmate Telephone System Number 1-555-555-5555 (Confidential/free call).</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with the standard for this relevant period.
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115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault, and Internal Management, Procedure PCS.001.VOL.001 Volunteer Services collectively address the requirements of Standard 115.61.</p> <p>115.61 (a): NJDOC requires 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, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>115.61 (b): Apart from reporting to designated supervisors or officials, staff shall not reveal 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.</p> <p>115.61 (c): Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.</p>

	<p>115.61 (d): If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.</p> <p>115.61 (e): The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC met standards, complies in all material ways with the standard for the relevant period.
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>NJDOC PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment; ADM.019.003 Close Custody Units; ADM.019.003.IHU Investigative Housing Unit; ADM.019.003.TAH Temporary Administrative Housing and IMM.001.004 Zero Tolerance Prison Sexual Assault addresses the requirements of Standard 115.62.</p> <p>115.62 (a): When NJDOC learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate, as confirmed during interviews with random and specialized staff. (See NJDOC PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment and IMM.001.004 Zero Tolerance Prison Sexual Assault).</p> <p>PAQ 115.62 (a)-1 NJDOC confirmed that when the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay) according to the PREA Compliance Manager.</p> <p>PAQ 115.62 (a)-2 NJDOC confirmed that in the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse was zero.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC met this standard, complies in all material ways with the standard for the relevant period.

115.63	Reporting to other confinement facilities
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <p data-bbox="256 344 1453 456">PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault addresses the requirement of Standard 115.63.</p> <p data-bbox="256 501 1469 748">115.63 (a): NJDOC/Garden State confirmed that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the director of the facility or the appropriate office of the agency where the alleged abuse occurred. Problematic, during a review of investigative reports, this Auditor determined that an inmate made allegations of being raped during her incarceration at another NJDOC facility.</p> <p data-bbox="256 792 1469 972">115.63 (a)-2 In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was zero. The investigative report examined indicates that Jane Doe made PREA-related allegations, which she indicated occurred at Edna Mahan and Northern. Garden State failed to provide documents to support compliance with this standard.</p> <p data-bbox="256 1016 1437 1128">115.63 (b): Such notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation. Garden State should have provided documents to support compliance with this standard.</p> <p data-bbox="256 1173 1469 1285">115.63 (b): NJDOC/Garden State notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation. Garden State should have provided documents to support compliance with this standard.</p> <p data-bbox="256 1330 1422 1442">115.63 (c): The facility head confirmed that NJDOC/Garden State would document that it has provided such notification. Problematic: Garden State should have provided documents to support compliance with this standard.</p> <p data-bbox="256 1487 1453 1599">115.63 (d): Upon receiving such notification, the facility head or NJDOC agency office receiving such notification shall ensure that the allegation is investigated per these standards.</p> <p data-bbox="256 1644 544 1677">Corrective Action:</p> <ol data-bbox="320 1744 1453 2024" style="list-style-type: none"> 1. To comply with this standard, NJDOC will develop a system to address facility communication of allegations of PREA-related incidents that occur at other confinement locations. 2. NJDOC will provide this Auditor with evidence of a corrective action and institutionalization of the process to address this standard. 3. Additional correctional measures will be contingent upon the evidence provided and the institutionalization of the process to support this standard.

	<p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC developed a system to address communication of PREA-related incident that occur at other confinement locations. The notification process will come from the office of the Warden to the facility head where the incident was alleged to have occurred. Garden State will document all communication. 2. The PREA Coordinator provided proof of the corrective action. 3. NJDOC met this standard, complies in all material ways for this relevant period.
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment; ADM.SID.035 Investigation Procedures; CUS.001.CSM.01 Crime Scene Management; and IMM.001.004 Zero Tolerance Prison Sexual Assault, Internal Management Procedure ADM.SID.035 Investigation Procedures, Internal Management Procedure MED.MLI.007 Sexual Assault and Policy ADM., 006.011 Investigations by the Special Investigations Division, address the requirements of Standard 115.64.</p> <p>115.64 (a): During interviews with random and specialized staff all confirmed that upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a period that still allows for the collection of physical evidence, 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.</p> <p>115.64 (b): Further, specialized staff also confirmed if the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways for this relevant

	period.
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, ADM.SID.035 Investigation Procedures; CUS.001.CSM.01 Crime Scene Management; and IMM.001.004 Zero Tolerance Prison Sexual Assault, Internal Management Procedure ADM.SID.035 Investigation Procedures, Internal Management Procedure MED.MLI.007 Sexual Assault and Policy ADM.006.011 Investigations by the Special Investigations Division, Internal Management Procedure MED.MHS.002.001 Emergency Mental Health Services, Internal Management Procedure MED.MHS.002.010 Counseling Services for Victims of Sexual Assault, MED.002.004 Mental Health Services Staff Emergency Mental Health Services addresses Standard 115.65.</p> <p>115.65 (a): According to the facility head, Garden State has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. Problematic, the plan was omitted. This standard requires a corrective action plan.</p> <p>Corrective Action:</p> <ol style="list-style-type: none"> 1. Garden State will provide the Auditor with evidence to confirm compliance. 2. Additional corrective action is contingent upon the evidence provided by Garden State. <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with the standard for the relevant review period.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Final Agreement IBE Local 30; International Federation of Professional and Technical Engineers (IFPTE) Contract 7-1-15 to 6-30-19; New Jersey Law Enforcement Commanding Officers Association (NJLECOA) contract settlement; New Jersey Law Enforcement Supervisors Association (NJLESA) Contract 7-1- 15 to 6-30-19; New Jersey Superior Officers Law Enforcement Association (NJSOLEA) 2015 - 2019 MOA (002); New Jersey State Policemen's Benevolent Association Law Enforcement Unit Local No. 105 (PBA) Local 105 Memorandum of Agreement (MOA) 2015-2019; and New Jersey Special Investigators Association affiliated with New Jersey State Fraternal Order of Police as Lodge 174 (SID) Agreement 7-1-15 - 6-30-19 are the collective bargaining agreements in effect for applicable NJDOC employees. Agency PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment and IMM.001.004 Zero Tolerance Prison Sexual Assault supports removing staff alleged to have committed sexual abuse pending the outcome of the investigative process were provided as evidence of compliance with Standard 115.66. According to the PREA Coordinator, NJDOC Collective bargaining contracts remain in negotiations.

115.66 (a): Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter or renew any collective bargaining agreement or additional agreement that limits 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. Problematic: the contract is outdated and does not mention 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. This standard requires corrective action. According to the PREA Coordinator, NJDOC Collective bargaining contracts remain in negotiations.

115.66 (b): Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or (2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated. This standard requires corrective action. According to the PREA Coordinator, NJDOC Collective bargaining contracts remain in negotiations.

Conclusion:

1. NJDOC meets this standard, complies in all material ways with the standards for the relevant review period.

Auditor Overall Determination: Meets Standard

Auditor Discussion

PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault, NJDOC PREA Retaliation Monitoring Form address the requirements of Standard 115.67.

115.67 (a): NJDOC has established a policy (See: PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment) 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 and shall designate which staff members or departments are charged with monitoring retaliation.

115.67 (b): PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment directs facilities to 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.

115.67 (c): During her interview, the designated staff member charged with monitoring/PREA Compliance Manager confirmed that she would monitor a victim for retaliation for at least 90 days following a report of sexual abuse. The agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and 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 and shall act promptly to remedy any such retaliation. NJDOC would monitor inmate disciplinary reports, housing, program changes, negative performance reviews, or staff reassignments. Garden State/NJDOC will continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. Problematic evidence suggests inconsistent completion of 90-day monitoring as stipulated in this standard. This standard requires corrective action.

115.67 (d): In the case of inmates, such monitoring shall also include periodic status checks.

115.67 (e): If any other individual who cooperates with an investigation fears retaliation, NJDOC will take appropriate measures to protect that individual against retaliation, according to the designated staff member charged with monitoring/PREA Compliance Manager.

115.67 (f): An agency's obligation to monitor terminates if the agency determines that the allegation is unfounded, according to the designated staff member charged with monitoring/PREA Compliance Manager. (See PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment).

Corrective Action:

	<p>1. 115.67 (c): During her interview, the designated staff member charged with monitoring/PREA Compliance Manager confirmed that she would monitor a victim for retaliation for at least 90 days following a report of sexual abuse. The agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and 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 and shall act promptly to remedy any such retaliation. NJDOC would monitor inmate disciplinary reports, housing, program changes, negative performance reviews, or staff reassignments. Garden State/NJDOC will continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. Problematic: Garden State omitted sufficient evidence to confirm the institutionalized compliance with this standard. This standard requires corrective action.</p> <p>2. 115.67 (c)-5 The number of times an incident of retaliation occurred in the past 12 months was 10. The Auditor will continue to monitor this standard for applying the corrective action initiated by the PREA Coordinator.</p> <p>Conclusion:</p> <p>1. After corrective action NJDOC now meets this standard. NJDOC complies in all material ways with the standard for the relevant review period.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, Policy ADM.019.003 Close Custody Units, ADM.019.003.IHU Investigative Housing Unit, ADM.019.003.TAH Temporary Administrative Housing and ADM.019.003 PCS Protective Custody Status, ADM.019.003 ADJU Adjustment Unit, ADM.019.003 PHDH Pre-hearing Disciplinary Housing, ADM.019.003 EMCT Emergency Confinement, IMM.004.RHU.01 Admission to Restorative Housing, IMM.001.RHU.02 Special Administrative Review Committee (SARC), IMM.004.RHU.03 Restorative Housing Amenities and Privileges, IMM.004.RHU.04 Step Down, Unit collectively addresses the requirements of Standard 115.68.</p> <p>115.68 (a): Staff interviewed who supervise inmates in segregated housing confirmed that the use of segregated housing to protect an inmate alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43. During the facility audit, this Auditor toured the segregation unit and informally spoke to inmates assigned to this unit. One inmate requested to speak to the Auditor privately. Garden</p>

	<p>State made arrangements for his interview; the inmate declined the interview. The inmate's placement in segregation was unrelated to PREA and behavior related.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with the standard for the relevant review period.
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Policy PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment, Internal Management Procedure ADM.SID.035 Investigation Procedures, Internal Management Procedure ADM.006.SID. 002 Arrest Procedures, Policy ADM.006.011 Investigations by the Special Investigations Division, Internal Management Procedure CUS.0010CSM.01 Crime Scene Management, Internal Management Procedure MED.MLI.005 Forensic Specimen Collection, Internal Management Procedure MED.MLI.007 Sexual Assault, Policy ADM.006.000 Special Investigations Division Mission, Goals and Objectives, and Organizational Structure collectively address the requirements of Standard 115.71.</p> <p>115.71 (a): NJDOC conducts its investigations into allegations of sexual abuse and sexual harassment. It shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Problematic, Standard 115.64 Garden State indicates in the past 12 months, the number of allegations that an inmate was sexually abused was 19, with eight sexual abuse/harassment investigations completed. This standard requires corrective action.</p> <p>115.71 (b): Where sexual abuse is alleged, the agency shall use investigators with special training in sexual abuse investigations under § 115.34. By examination, the auditor determined that the assigned investigator had completed specialized training under this standard.</p> <p>115.71 (c): Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. Problematic by examination, this Auditor determined that investigators routinely omitted evidence of a review of prior complaints and reports of sexual abuse involving the suspected perpetrator. This substandard requires corrective action.</p>

115.71 (d): When the quality of evidence appears to support a criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors about whether compelled interviews may be an obstacle to subsequent criminal prosecution. During his interview, the PREA investigator confirmed that Garden State consults with the Burlington County Prosecutor's Office when the quality of evidence supports criminal prosecution. A review of investigative documents supports the investigator's claim that the South Woods consults with the Burlington Prosecutors Office. In cases where evidence is insufficient for prosecution, Burlington County's Prosecutor's Office recommends administrative action at the facility level.

115.71 (e): The credibility of an alleged victim, suspect, or witness shall be assessed individually and shall not be determined by the person's status as an inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for investigating such an allegation. This Auditor found no evidence to indicate inmates/confined persons were subjected to polygraph examination or other truth-telling device as a condition for investigating such an allegation. During an interview with an investigator, he denied subjecting inmates/confined persons to examination or other truth-telling devices as a condition for investigating such an allegation.

115.71 (f): Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

South Woods conducts Special Incident Reviews (except unfounded allegations) to determine if staff actions or failures to act contributed to the abuse. (2) The incident reviews are documented in a written report and include a description of the summary of the investigative report (e.g., physical and testimonial evidence, the reasoning behind credibility assessments) and findings.

115.71 (g): Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

115.71 (h): According to the SID/PREA investigator interviewed during this audit, substantiated allegations of conduct that appear criminal are referred for prosecution.

115.71 (i): The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years confirmed by the PREA Compliance Manager and Regional PREA Compliance Manager.

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

115.71 (k): Any State entity or Department of Justice component that conducts such investigations shall do so under the above requirements.

	<p>115.71 (l): When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and endeavor to remain informed about the progress of the investigation. NJDOC investigates sexual abuse allegations.</p> <p>Corrective Action:</p> <ol style="list-style-type: none"> 1. Garden State/NJDOC thoroughly and objectively for all allegations, including third-party and anonymous reports. 2. The Auditor will monitor the development of a method to address 115.71 (a): NJDOC conducts its investigations into allegations of sexual abuse and sexual harassment. It shall do so promptly, which is the standard for the duration of the corrective action period. 3. Any additional corrective actions will depend on the evidence provided during the corrective action period. <p>Conclusion:</p> <ol style="list-style-type: none"> 1. After corrective action NJDOC now meets this standard, complies in all material ways with this standard for the relevant review period.
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment, Internal Management Procedure ADM.SID.035 Investigation Procedures, Internal Management Procedure ADM.006.SID. 002 Arrest Procedures, Policy ADM.006.011 Investigations by the Special Investigations Division, Internal Management Procedure CUS.0010CSM.01 Crime Scene Management, Internal Management Procedure MED.MLI.005 Forensic Specimen Collection, Internal Management Procedure MED.MLI.007 Sexual Assault, Policy ADM.006.000 Special Investigations Division Mission, Goals and Objectives, and Organizational Structure collectively address the requirements of Standard 115.72.</p> <p>115.72 (a): According to investigative staff, SID/NJDOC imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with the standard

for the relevant period.

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy PCS.001.008 Prevention, Detection and Response of Sexual Abuse and Harassment, Internal Management Procedure ADM.SID.035 Investigation Procedures, Internal Management Procedure ADM.006.SID. 002 Arrest Procedures, Procedure MED.MLI.007 Sexual Assault, Policy ADM.006.000 Special Investigations Division Mission, Goals and Objectives, and Organizational Structure both address the requirement of Standard 115.73.

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

115.73 (b): If the agency did not conduct the investigation, it should request the relevant information from the investigative agency to inform the inmate.

115.73 (c): Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility, or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

115.73 (d): Following an inmate's allegation that another inmate has sexually abused him or her, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

115.73 (e): All such notifications or attempted notifications shall be documented.

115.73 (f): An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

Conclusion:

	<p>1. NJDOC meets this standard, complies in all material ways with this standard for the relevant review period.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>PCS.001.008 Prevention, Detection, and Response of Sexual Abuse and Harassment and IMM.001.004 Zero Tolerance Prison Sexual Assault address the requirements of standard 115.76.</p> <p>115.76 (a): According to the facility head, all staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>115.76 (b): According to the facility head, termination is considered a presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>115.76 (c): Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>115.76 (d): 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, shall be reported to law enforcement agencies unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>Conclusion:</p> <p>1. NJDOC meets this standard, complies in all material ways with the relevant review period.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>PCS.001.008 PREA Compliance, IMM.001.004 Zero Tolerance Prison Sexual Assault and Internal Management Procedure PCS.001.VOL.001 Volunteer Services collectively address and outline the agency’s disciplinary response related to violations of PREA policies by staff in support of compliance with Standard 115.77.</p> <p>115.77 (a): According to the PREA Compliance Manager, any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies unless the activity was not criminal and to relevant licensing bodies.</p> <p>115.77 (b): According to the PREA Compliance Manager, the facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with the standard for the relevant review period.
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.78 (a): The facility head confirmed that inmates are subject to disciplinary sanctions under a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.</p> <p>115.78 (b): The facility head confirmed that sanctions are 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.</p> <p>115.78 (c): The facility head confirmed that the disciplinary process considers whether inmates' mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed.</p> <p>115.78 (d): The facility head confirmed that if the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.</p>

	<p>115.78 (e): The facility head confirmed that disciplining an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.</p> <p>115.78 (f): The facility head confirmed that a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred should not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>115.78 (g): At its discretion, NJDOC prohibits all sexual activity between inmates and may discipline inmates for such action. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with this standard for the relevant review period.
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.81 (a): According to medical and mental health practitioners confirmed, if the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p>115.81 (b): According to medical and mental health practitioners confirmed, 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 the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.</p> <p>115.81 (c): See 115.81(a)</p> <p>115.81 (d): According to medical and mental health practitioners confirmed, any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.</p> <p>115.81 (e): According to medical and mental health practitioners interviewed during this audit each confirmed that medical and mental health practitioners obtain</p>

	<p>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.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC met this standard, complies in all material ways with the standard for the relevant review period.
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.82 (a): According to medical and mental health practitioners confirmed, inmate victims of sexual abuse shall 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.</p> <p>115.82 (b): According to medical and mental health practitioners confirmed, if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim under § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.</p> <p>115.82 (c): According to medical and mental health practitioners confirmed, inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis by professionally accepted standards of care, where medically appropriate.</p> <p>115.82 (d): According to medical and mental health practitioners confirmed, treatment services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC met this standard, complies in all material ways with the standard for the relevant review period.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.83 (a): Medical and mental health practitioners confirm that the facility offers 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.</p> <p>115.83 (b): Medical and mental health practitioners confirmed 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.</p> <p>115.83 (c): Medical and mental health practitioners confirmed that Garden State provides such victims with medical and mental health services consistent with the community level of care.</p> <p>115.83 (d): This substandard does not apply. Garden State is an "all-male" facility. Note: There were no transgender men who may have female genitalia in the facility during this onsite audit.</p> <p>115.83 (e): If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. Garden State is an "all-male" facility. Note: There were no transgender men who may have female genitalia in the facility during this onsite audit.</p> <p>115.83 (f): Medical and mental health practitioners confirmed that inmate victims of sexual abuse, while incarcerated, are offered tests for sexually transmitted infections as medically appropriate.</p> <p>115.83 (g): Medical and mental health practitioners and treatment services are provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.</p> <p>115.83 (h): Medical and mental health practitioners, all prisons 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.</p>
	<p>Conclusion:</p> <p>1. NJDOC met this standard, complies in all material ways with the standard for the relevant review period.</p>

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.86 (a): By examination, this Auditor confirmed that Garden State conducts a sexual abuse incident review after every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been deemed unfounded.</p> <p>115.86 (b) By examination of an investigative report, this Auditor confirmed that Garden State conducts such reviews shall ordinarily occur within 30 days of the conclusion of the investigation.</p> <p>115.86 (c): By examination of an investigative report, this Auditor confirmed that Garden State's incident review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.</p> <p>115.86 (d): By examination of an investigative report, this Auditor confirmed that Garden State's incident review team: (1) Considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Considers whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assesses the adequacy of staffing levels in that area during different shifts; (5) Assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepares a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submits such reports to the facility head and PREA Compliance Manager.</p> <p>115.86 (e): According to the PREA Compliance Manager, the facility shall implement the recommendations for improvement or document its reasons for not doing so.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC met this standard, complies in all material ways with the standard for the relevant review period.

115.87	Data collection
	Auditor Overall Determination: Meets Standard

Auditor Discussion

115.87 (a): NJDOC collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

This Auditor confirmed that NJDOC collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

115.87 (b): NJDOC aggregates the incident-based sexual abuse data at least annually.

This Auditor confirmed that NJDOC aggregates the incident-based sexual abuse data at least annually.

115.87 (c): NJDOC incident-based data collected includes, 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.

This Auditor confirmed that NJDOC incident-based data collected includes, 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.

115.87 (d): NJDOC maintains, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

This Auditor confirmed that NJDOC maintains, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

115.87 (e): NJDOC obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

This Auditor confirmed that NJDOC obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

115.87 (f): NJDOC, upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

This Auditor confirmed that NJDOC upon request, the agency would provide such data from the previous calendar year to the Department of Justice no later than June 30 according to the PREA Coordinator.

Conclusion:

1. NJDOC met this standard, complies in all material ways with the standard for the relevant review period.

115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.88 (a): NJDOC reviews data collected and aggregated under § 115.87 to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.</p> <p>115.88 (b): NJDOC reports include comparing the current year’s data and corrective actions with those from prior years and shall assess the agency’s progress in addressing sexual abuse.</p> <p>115.88 (c): The NJDOC commissioner agency head approves the NJDOC report and makes it readily available to the public through its website.</p> <p>115.88 (d): NJDOC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted as confirmed by the PREA Compliance Manager.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with the standard for the relevant review period.

115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.89 (a): By examination, this Auditor confirmed that NJDOC ensures that data collected under § 115.87 are securely retained.</p> <p>115.89 (b): By examination, this Auditor confirmed that NJDOC makes 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.</p> <p>115.89 (c): By examination, this Auditor confirmed that before making aggregated sexual abuse data publicly available, NJDOC removes all personal identifiers.</p> <p>115.89 (d): NJDOC maintains sexual abuse data collected under § 115.87 for at least</p>

	<p>ten years after the initial collection date unless Federal, State, or local law requires otherwise.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meets this standard, complies in all material ways with the standard for the relevant review period.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.401 (a): During the three years starting on August 20, 2013, and during each three years after that, NJDOC, by examination, ensures that each facility operated by the agency or by a private organization on behalf of the agency is audited at least once.</p> <p>115.401 (b): During each year starting on August 20, 2013, NJDOC ensures that at least one-third of each facility type operated by the agency or by a private organization on behalf of the agency is audited.</p> <p>115.401 (h): The Auditor was given access to and observed all areas of Garden State and other audited facilities.</p> <p>115.401 (i): The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>115.401 (m): The Auditor was permitted to interview inmates privately.</p> <p>115.401 (n): Garden State inmates were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Conclusion:</p> <ol style="list-style-type: none"> 1. NJDOC meet this standard, complies in all material ways with this standard for the relevant review period.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>115.403 (f): By examination of the agency website, this Auditor determined that NJDOC ensures that the Auditor's final reports are published on its website and thus made readily available to the public.</p> <p>Conclusion:</p> <ol style="list-style-type: none">1. NJDOC meets this standard, complies in all material ways with the standard for the relevant review period.
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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	yes

	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.)	
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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	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.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	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?	
	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.)	na
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	no
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	no
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).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	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	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	no
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
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)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
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	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

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

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

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	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.)	
	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	yes

	abuse or sexual harassment or retaliation?	
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	no

	response to an incident of sexual abuse?	
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	yes

	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?	
	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	yes

	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).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

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

	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?	
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	yes

	evidence sufficient to substantiate the allegation?	
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	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	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?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	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	Audit contents and findings	

(f)		
	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