

# PREA Facility Audit Report: Final

**Name of Facility:** Adult Diagnostic and Treatment Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 11/14/2024

**Date Final Report Submitted:** 06/09/2025

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"/>
<b>Auditor Full Name as Signed:</b> DeShane Reed	<b>Date of Signature:</b> 06/09/2025

AUDITOR INFORMATION	
<b>Auditor name:</b>	Reed, DeShane
<b>Email:</b>	dreed@drbconsultinggroup.com
<b>Start Date of On-Site Audit:</b>	08/15/2024
<b>End Date of On-Site Audit:</b>	08/19/2024

FACILITY INFORMATION	
<b>Facility name:</b>	Adult Diagnostic and Treatment Center
<b>Facility physical address:</b>	8 Production Way, Avenel, New Jersey - 07001
<b>Facility mailing address:</b>	8 Production Way, Avenel, New Jersey 07001, New Jersey - 07001

Primary Contact
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<b>Name:</b>	Jack Cichocki
<b>Email Address:</b>	Jack.Cichocki@doc.nj.gov
<b>Telephone Number:</b>	732-574-2250 ex 8003

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Patricia Nah
<b>Email Address:</b>	Patricia.McGill@doc.nj.gov
<b>Telephone Number:</b>	732-574-2250

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	629
<b>Current population of facility:</b>	422
<b>Average daily population for the past 12 months:</b>	424
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Mens/boys
<b>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For</b>	

<b>definitions of “intersex” and “transgender,” please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b>	
<b>Age range of population:</b>	21-85
<b>Facility security levels/inmate custody levels:</b>	GM, MED, MAX, CLOSE
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	425
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	41
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	4

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

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

**Agency-Wide PREA Coordinator Information**

<b>Name:</b>	Sandra Capra	<b>Email Address:</b>	Sandra.a.capra@doc.nj.gov
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**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:	2024-08-15
2. End date of the onsite portion of the audit:	2024-08-19

#### 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:	I contacted Middlesex County center for Empowerment to verify MOU with NJDOC's ADTC for Victim Advocacy Services. I also contacted Robert Wood Johnson of JFK community Hospitals to verify SANE/SAFE.

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	629
15. Average daily population for the past 12 months:	422
16. Number of inmate/resident/detainee housing units:	17
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**

<b>18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	422
<b>19. 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:</b>	0
<b>20. 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:</b>	90
<b>21. 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:</b>	2
<b>22. 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:</b>	16
<b>23. 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:</b>	67
<b>24. 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:</b>	0

<b>25. 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:</b>	7
<b>26. 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:</b>	5
<b>27. 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:</b>	252
<b>28. 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:</b>	0
<b>29. 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):</b>	No text provided.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>30. 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:</b>	424
<b>31. 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:</b>	0

<b>32. 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:</b>	4
<b>33. 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:</b>	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	28
<b>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other <input type="checkbox"/> None
<b>If "Other," describe:</b>	I also interviewed inmates based on the targeted population requirements in the PREA Auditor's Handbook
<b>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	I relied on ADTC's PCM, Master Inmate Roster, and Medical to ensure demographics, diversity, and geographics of inmates.



<b>37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="checked" type="radio"/> Yes  <input type="radio"/> No
<b>38. 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):</b>	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	18
<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>	
<b>40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>41. 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:</b>	3

<b>42. 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:</b>	3
<b>43. 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:</b>	1
<b>44. 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:</b>	3
<b>45. 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:</b>	4
<b>46. 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:</b>	4
<b>47. 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:</b>	1
<b>48. 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:</b>	4

<b>49. 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:</b>	0
<b>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
<b>49. 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).</b>	This ADTC do not have isolation/segregation cells in this court-appointed program. Inmates are also voluntarily/assigned to this treatment program from a higher security facility. Inmates who violate the rules of the program are likely sent to a higher security NJDOC facility. This was also verified during this auditor's onsite exhaustive site review.
<b>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	No text provided.
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>51. Enter the total number of RANDOM STAFF who were interviewed:</b>	17

<b>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input type="checkbox"/> Length of tenure in the facility <input type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
<b>If "Other," describe:</b>	I also selected staff from the "Specialized Staff" list per the PREA Auditor's Handbook.
<b>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	No text provided.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
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.	
<b>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	8
<b>56. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>58. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>59. Were you able to interview the PREA Compliance Manager?</b>	<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)

**60. 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
<b>61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>62. Enter the total number of CONTRACTORS who were interviewed:</b>	1
<b>62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<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
<b>63. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No text provided.

## 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.

**64. Did you have access to all areas of the facility?**

☒ Yes

☐ No

**Was the site review an active, inquiring process that included the following:**

**65. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?**

☒ Yes

☐ No

**66. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?**

☒ Yes

☐ No

**67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?**

☒ Yes

☐ No

**68. Informal conversations with staff during the site review (encouraged, not required)?**

☒ Yes

☐ No



<b>69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b>	No text provided.
<b>Documentation Sampling</b>	
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.	
<b>70. 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?</b>	<input checked="checked" type="radio"/> Yes  <input type="radio"/> No
<b>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	Though I received documentation through OAS, while onsite, I requested my own random selection of various documents, physically view documentation and logs, as well as conducted formal and informal interviews with inmates and staff.
<b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>	
<b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>	
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.	

**72. 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
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	0	0	0	0

**73. 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
<b>Inmate-on-inmate sexual harassment</b>	3	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	3	0	0	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.

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

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

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

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	3	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	3	0

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

**Sexual Abuse Investigation Files Selected for Review**

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

0

**78. Explain why you were unable to review any sexual abuse investigation files:**

There were only inmate-on-inmate administrative/non-criminal sexual harassment investigations in the past 12 months.

<b>79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	0
<b>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	0
<b>84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

<b>85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	3
<b>87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	3
<b>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

**Staff-on-inmate sexual harassment investigation files**

**91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:**

0

**92. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?**

☐ Yes

☐ No

☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

**93. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?**

☐ Yes

☐ No

☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

**94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.**

There were only inmate-on-inmate administrative/non-criminal sexual harassment investigations in the past 12 months.

**SUPPORT STAFF INFORMATION****DOJ-certified PREA Auditors Support Staff**

**95. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

☐ Yes

☒ No

## Non-certified Support Staff

**96. 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

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

1

## AUDITING ARRANGEMENTS AND COMPENSATION

**97. 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"> <li>Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard (requires corrective actions)</li> </ul>
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
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.11. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.11. This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.11.</p> <p>While onsite, this PREA auditor also observed, interacted with, and interviewed NJDOC's PREA Coordinator. NJDOC's PREA Coordinator explained that she has the time and support of NJDOC's Commissioner to effectively engage in her role. This auditor also interviewed ADTC's Institutional PREA Compliance Manager/Assistant Superintendent, who explained that ADTC has carved out time within his role to</p>

	<p>engage in her Institutional PREA Compliance Manager's duties. Finally, this auditor reviewed NJDOC's Employee Handbook, which stated NJDOC's disciplinary process for employees violating NJDOC's codes of conduct. This auditor also reviewed NJDOC's Department Organizational Chart, as well as the ADTC's Organizational Chart, which showed NJDOC's PREA Coordinator reporting to the Assistant Commissioner for PREA-related duties/efforts. NJDOC's PREA Coordinator reported that she has direct access to the Commissioner if needed. This was confirmed by the Commissioner during this auditor's interview with her.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA Standard 115.11.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.12. The Adult Diagnostic &amp; Treatment Center (ADTC) submitted their contracts with 13 fully executed contracts for their Residential Community Release Programs as evidence of compliance with PREA Standard 115.12, for contracting for confinement. Each of the reviewed contracts did not contain the necessary language within them, which identifies the requirements for the contracting entity to "adopt and comply with PREA Standards."</p> <p>Per PREA Standard 115.12: <i>"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. (b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards."</i></p> <p>This auditor recommended that NJDOC complete addendums to all new and existing contracts that specifically state that the facility "agrees and is obligated to adopt and comply with PREA Standards" based on PREA Standard 115.12. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.12. Corrective Action was required.</p> <p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2</p>

	<p>Regional PREA Compliance Managers) shared, that the Agency added an addendum to the existing contract that clearly states: "<i>Contracted Entity agrees and is obligated to adopt and comply with PREA Standards based on PREA Standard 115.12.</i>" NJDOC's PCU also submitted their "<i>State of New Jersey Department of Corrections Request for Proposal Residential Community Release Programs General Information</i>" (Sections 1.0, 10.0, 10.1, and 10.9) as evidence of compliance. The 4 sections require the contracting for confinement awarded entities to adopt and comply with PREA Standards, as well as receiving the required PREA facility audits.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.12.</p>
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115.13	Supervision and monitoring
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.13. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.13. This auditor reviewed "NJDOC's Policy PCS.001.008," concluding that it has the necessary language to align with PREA Standard 115.13.</p> <p>This auditor interviewed ADTC's Institutional PREA Compliance Manager/Assistant Facility Administrator who shared that ADTC complies with the protocol identified in their staffing plan. When call-offs and time-offs occur, ADTC provides coverage through adjusting/rotating on-shift staffing, voluntary, or mandatory overtime. They also adjust and modify programming if necessary. This allows ADTC's staffing plan and staffing coverage to remain fulfilled. Furthermore, ADTC's Institutional PREA Compliance Manager/Assistant Facility Administrator shared that staff could also voluntarily work shifts or switch shifts/dates.</p> <p>This auditor also reviewed ADTC's "Staffing Plan Review (2023)" which documented ADTC's process of ensuring adequate staffing to protect inmates from sexual abuse. ADTC's Staffing Plan contains all the components which need consideration when identifying staffing needs. ADTC's Institutional PREA Compliance Manager/Assistant Facility Administrator submitted ADTC's "Staffing Rosters." This PREA auditor observed the facility's staffing roster for the past 21 days, which seemed to have adequate staffing coverage to protect inmates from sexual abuse.</p> <p>Additionally, while onsite, this auditor interviewed the ADTC's IPCM/Assistant Facility Administrator, who shared that supervisory unannounced rounds are conducted at a</p>

	<p>minimum of once daily. ADTC submitted “All Supervisory Rounds” from 8/16/23 through 8/16/24. This auditor reviewed multiple unannounced supervisory rounds documented at a minimum every 24 hours. Supervisors were noted to complete rounds at least twice per shift.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.13.</p>
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<b>115.14 Youthful inmates</b>	
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA auditor reviewed multiple randomly selected dates of ADTC facility rosters and counts while onsite. No youthful inmates were present on the rosters. NJDOC’s PREA Coordinator and ADTC’s Institutional PREA Compliance Manager/Assistant Facility Administrator also shared that ADTC did not house youthful inmates. The daily counts while this auditor was onsite did not show youthful inmates being housed at ADTC. This auditor also interviewed a random selection of 17 specialized security staff. Each responded that youthful inmates are not housed at ADTC. This auditor also interviewed a random selection of 28 inmates, selected from ADTC’s daily inmate roster. All 28 interviewed inmates shared that ADTC did not house youthful inmates. During this auditor’s exhaustive site assessment, this auditor informally asked multiple inmates if there were inmates under 18 housed at ADTC. Each response was similar, stating that there were no inmates under 18 years old at this facility.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA Standard 115.14.</p>

<b>115.15 Limits to cross-gender viewing and searches</b>	
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed the Adult Diagnostic &amp; Treatment Center’s (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.15. The Adult Diagnostic &amp; Treatment Center’s (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.15. An excerpt from NJDOC’s Prevention, Detection, and Response Policy PCS.001.008 states, “<i>Pat searches may be conducted by either male or female custody staff members upon male incarcerated persons. Except in exigent circumstances, pat searches shall only</i></p>

*be conducted by female custody staff members upon female incarcerated persons, including persons whose Gender Identity Search Preference ID Card identifies them as having been approved to be searched by female staff. Except in exigent circumstances, transgender and medically verified intersex persons will be searched by custody staff of the gender designated on the approved Gender Identity Search Preference ID Card. Facilities shall not restrict incarcerated persons' access to regularly available programming or other out-of-cell opportunities in order to comply."*

This auditor reviewed "NJDOC's Policy PCS.001.008" and concluded that it has the necessary language to align with PREA Standard 115.15.

ADTC is an all-male inmate prison that provide sex offender treatment. While on-site, this PREA auditor interviewed 28 randomly selected inmates. Each inmate verified that they are searched by staff of both genders except transgender inmates. This auditor verified that training is provided in the new employee orientation that addresses proper search procedures of inmates. This auditor also reviewed ADTC's "Training Spreadsheet," which showed that all active ADTC custody and civilian staff were up to date on their "Body Search Clothed and Unclothed" training. Training dates ranged from 9/2023 to 9/2024. When this auditor interviewed a random selection of 17 ADTC specialized staff, security staff, contractors/volunteers and asked, "Which gender staff pat searches a transgender or intersex?" There were consistent responses from the 2 interviewed security staff, with most stating, "The transgenders have cards where they have identified the gender of staff, they feel most comfortable being pat searched by." Additionally, this auditor reviewed "NJDOC's Searches of Incarcerated Persons and Correctional Facilities Policy CUS.001.SEA.001" which also states, "Pat searches may be conducted by either male or female custody staff members upon male incarcerated persons. Except in exigent circumstances, pat searches shall only be conducted by female custody staff members upon incarcerated persons assigned to women's facilities and/or satellites including persons whose Gender Identity Search Preference ID Card identifies them as having requested to be searched by female staff. All other incarcerated people will be pat searched by any available staff member. Facilities shall not restrict incarcerated persons' access to regularly available programming or other out-of-cell opportunities in order to comply."

Finally, this auditor interviewed 5 targeted LGB inmates, as well as 4 transgender inmates. All 9 interviewed inmates shared that transgender inmates must be approved by a NJDOC committee. When approved by the committee, the transgender inmate receives a "Gender Identify Search Preference ID Card" to carry around on their person. This ID card allows ADTC staff to understand the requirements by staff regarding the preferences of the transgender. Only approved transgender/intersex inmates receive this "Gender Identify Search Preference ID Card."

During this auditor's extensive onsite site review/tour, this auditor observed that there were PREA shower curtains (clear on the top and bottom with the middle portion solid), however the current curtains have too much visual access to inmates and staff walking by the area not conducting official duties. This auditor observed that the clear top portion of the curtains drape down too low considering the nature

of the program. Additionally, the toilet areas have a long full makeshift curtain (used to provide privacy for those using the urinal) which disallows ease of visual access when conducting security checks to prevent consensual and non-consensual sexual activity. Additionally, this auditor interviewed a random selection of 28 inmates who shared that most of the sexual activity occurs in the toilet area especially during overnight hours when there is only one officer assigned to four housing dormitories of multiple inmates per unit. There were 16 of 28 interviewed inmates who shared that they feel that they have enough privacy to shower, use toilet, perform bodily functions, and get dressed without being viewed by non-medical staff of the opposite gender. There were 12 of the 28 interviewed inmates who stated that they somewhat have enough privacy.

Furthermore, ADTC submitted a "Interoffice Communication" from NJDOC's Office of Policy and Planning Director (from May 27, 2015)" which stated, *"Consistent with PREA Standard 115.15(d), all IPCMS are reminded that when an opposite gender staff enters a housing unit, their presence is to be verbally announced by stating, "male/female on the floor." This policy applies to custody and non-custody staff (including COHQ staff, institutional staff, and any other staff who may enter the unit). Reference to the "knock and announce" procedure can also be found in CUS.003.001. Gender Restrictions of Custody Posts. Additionally, IPCMs should advise all staff how to report the absence of a knock and announce procedure on a housing unit so it can be promptly addressed."* When this auditor interviewed a random selection of 17 ADTC specialized staff, security staff, contractors/volunteers and asked, *"Do female staff announce themselves prior to entering inmate shower areas, inmate toilet areas, and when they enter inmate dorm where inmates sleep and get dressed?"* Each member of staff shared a similar response stating that upon entering any dorm they make an announcement each time. However, 15 out of 28 inmates stated that female staff do consistently announce their presence when they are entering the inmates' sleeping/showering dorms. There were 13 out of 28 inmates who stated that female staff do not consistently announce their presence when they are entering the inmates' sleeping/showering dorms.

This auditor recommended ADTC conduct and document *"Refresher Staff Training"* for ADTC staff, focused on "Opposite Gender Announcing," referencing CUS.003.001, as well as the May 27, 2015 "Interoffice Communication" from NJDOC's Office of Policy and Planning Director, which provides direction to IPCMs and their respective institutions. This PREA auditor concluded that ADTC was not in compliance with PREA standard 115.15. Additionally, this auditor recommended that ADTC make adjustments to their current curtains at the entrance to all their inmate toilet areas. The goal was to provide staff with better monitoring of activity inside toilet areas and to monitor how many inmates are present inside the toilet area at one time, thus blending security, sexual safety and privacy. Finally, this auditor recommended ADTC current inmate shower curtains to be lifted approximately 6 inches to provide better coverage of the upper part of each inmate's bodies. The curtains in public housing area were too low, where inmates walking by can visually see the entire upper body of the showering inmate. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.15. Corrective Action was required.

	<p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted a <b>"Memo"</b> from ADTC's Associate Administrator, directing all ADTC Shift Lieutenants to conduct <i>"Daily Recap Refreshers"</i> for each shift daily, for 7 consecutive days. The <i>"Daily Recap Refreshers"</i> focused on: 1) staff searching of opposite gender inmates in a professional manner and procedures, as well as opposite gender staff requirements to announce when to entering ADTC Tiers/Dorms. NJDOC's PREA Compliance Unit also submitted ADTC's 7-day staff roster (each roster per shift, covering 3 shifts) for the dates of 5/1/25 through 5/7/25, as well as the <i>"Daily Recap Refresher"</i> topics aligning with this PREA Standard.</p> <p>Furthermore, ADTC uploaded photo evidence showing improvements made to the curtains which are used to provide separation and privacy for inmates using the toilets from the rest of the observing inmates and staff. The lower section of the curtains was raised, to better show the calves and feet of the inmate occupying the bathroom at any given timeframe. Additionally, ADTC submitted photo evidence showing their inmate shower curtains lifted by 6 to 8 inches, providing better privacy without compromising ADTC staff's ability to view who's inside the shower.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA Standard 115.15.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.16. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.16. An excerpt from NJDOC's Policy PCS.001.008 states, <i>"Assistance for LEP incarcerated persons includes the use of certified bi-lingual staff and language line services. Each facility ensures that newly arrived incarcerated persons to the facility receive verbal, written and video presentations about incarcerated person sexual abuse/harassment in English and/or Spanish. For deaf and hard of hearing incarcerated persons, videos are available in closed caption. For incarcerated persons speaking languages other than</i></p>

*English and/or Spanish, the ADA and LEP coordinator at each facility ensures the incarcerated person receives information specific to NJDOC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.in accordance to SUP.004.001 Limited English Proficient (LEP) Language Assistance.*

*PREA orientation/educational informational materials and posters are provided in both English and Spanish. In instances where an LEP incarcerated person speaks in a language other than English or Spanish, translation services are provided in accordance with SUP.004.001 Limited English Proficient (LEP) Language Assistance."*

ADTC also shared their policy SUP.004.001, "Policy for Limited English Proficient (LEP) Language Assistance: Bilingual Staff and use of the language line" and policy IMM.002.003 "American with Disabilities Act & New Jersey Law Against Discrimination—Reasonable Accommodations for Inmates," which provides guidance and procedures to NJ-DOC staff for providing meaningful access for those inmates with disabilities.

This auditor reviewed "NJDOC's Policy PCS.001.008," concluding that it has the necessary language to align with PREA Standard 115.16.

While on site, this auditor interviewed NJDOC's PREA Coordinator (PC) and ADTC's PREA Compliance Manager (IPCM). Both shared that ADTC provide translation/ interpretation to non-English speaking inmates through "*Linguistica International Sustainable Language Services*." This auditor contacted the "*Linguistica*" toll free number (1-866-908-5744) and provided the name of ADTC and provided the account code. "*Linguistica's*" representative confirmed that the New Jersey DOC agency and ADTC had an active contract. While on site, this auditor did observe PREA reporting postings in English and Spanish. This auditor reviewed PREA inmate education videos in English, Spanish, closed captioned and ASL for the hearing impaired. Additionally, this auditor observed ADTC's Video Relay System (VRS Logbook System) which assists the deaf and hard of hearing inmates to have visits with their family. There were also deaf/hard of hearing signs posted in Spanish and English strategically around the facility to inform inmates of their rights to sign language interpretation services.

Furthermore, while onsite, this auditor interviewed 6 randomly selected targeted Limited English Proficient (LEP), physically disabled, low-vision, and hard of hearing/ deaf inmates. The physical disabled and low vision inmates shared that ADTC, and the contracted providers make accommodation for their "challenges." The interviewed LEP inmates stated that they rely on other specific staff, provided translation services, and other inmates to translate. During this auditor's onsite review, this auditor observed some inmate cells with magnets with universal signs for the deaf on the outside. When this auditor asked these inmates, each shared that the magnet allows ADTC staff to immediately understand that the inmate is deaf or hard of hearing. ADTC's PCM shared that the same universal sign is also on the back of the inmate's identification cards. Moreover, each inmate signs a "Deaf and Hard of Hearing Waiver" to accept or deny the magnets on their cells and notice on the back of their identification card.



	This PREA auditor concludes that ADTC is in compliance with PREA standard 115.16.
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.17. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Staff Selection and Promotion Policy PSM.001.011" and "NJDOC Pre-employment background check &amp; ID Card Renewal Background Check Policy ADM.006.007" as evidence of compliance with PREA Standard 115.17. This auditor reviewed "NJDOC's Policy PCM.001.011 and ADM.006.007," concluding that it has the necessary language to align with PREA Standard 115.17.</p> <p>While on sight, this PREA auditor interviewed NJDOC's Human Resource (HR) liaison and the Special Investigations Division (SID) Investigator/PREA Liaison, and SID Principal Investigator who identified that NJDOC conducts background checks on all civilian employees, volunteers and contractors. They further shared that the background screenings include motor vehicle, state and NCIC checks. New Hire employees receive exhaustive background screenings. The application for clearance asks three PREA reaffirming acknowledgement questions regarding any past sexual convictions or involvement. Per the policy submitted for evidence, employees are asked to submit to additional background checks for promotions as well as ID renewal. Employee IDs are issued upon successful completion of the hire process and require employees to renew every three years (not to exceed five) to gain access to their assigned facility. This renewal process is based on an honor system.</p> <p>This auditor randomly selected 17 employee files, 7 specialized staff, 9 custody/ security staff, 1 volunteer, and 2 contractors files. This auditor's random selection consisted of employees of various positions, years of service and promotions. ADTC's HR representative and SID Investigator were unable to provide this auditor with background check documentation for this auditor to determine compliance with PREA Standard 115.17. After further inquiring into NJDOC's HR practices, ADTC's HR representative and ADTC's SID investigator explained the following about background checks and screenings: 1) NJDOC's "Recruitment Unit" conducts new hire background checks for "custody staff;" 2) NJDOC's "Special Investigations Department (SID)" conducts 3-year badge renewal background checks for all staff and contractors, staff promotions, as well as new volunteers of ADTC; 3) NJDOC's "Central Office" conducts background checks on contractors and administrative staff. This auditor further understood that each background check entity is located in different parts of New</p>

	<p>Jersey and there is no electronic system to gather information into one central location for accessibility. Also, there are no procedures to provide information sharing amongst each and the facility level HR.</p> <p>This auditor recommended that this auditor randomly make another selection of 20 NJDOC custody, contracted, administrative, civilian staff, and volunteers for NJDOC to provide this auditor with sufficient/accurate background check evidence regarding compliance. This auditor also recommended that NJDOC's ADTC establish a procedure for all staff background check information to be centrally accessed, as well as demonstrate consistency in practice before compliance can be determined. This PREA auditor concluded that ADTC was not in compliance with PREA standard 115.17. Corrective Action was required.</p> <p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted background checks of 23 randomly selected ADTC staff. This auditor reviewed and verified that each had sufficient "background checks," "PREA acknowledgements" (showing no previous sexual misconduct), and ID card reinstatement background checks (conducted every 3 years).</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.17.</p>
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115.18 Upgrades to facilities and technologies	
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.18. Adult Diagnostic &amp; Treatment Center (ADTC) did not submit evidence of any facility upgrades in the OAS. ADTC did acquire new cameras for the facility in certain areas. While onsite, this auditor observed the newly installed cameras around the facility which has enhanced visibility and supervision of inmates considerably. This auditor did observe however that there was a blind spot in the staff breakroom where there were no cameras observed. This is an area that inmates have access to therefore requiring visibility in this area.</p> <p>This auditor recommended that a window be placed into ADTC's staff breakroom door, as well as install a larger 2-way mirror in the designated corner location</p>

	<p>discussed while onsite and one 2-way mirror in the middle of the staff breakroom. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.18. Corrective Action was required.</p> <p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) uploaded photo evidence showing the window in ADTC's staff breakroom door, as well as 1 large 2-way mirror in the corner location, facing the serving line and the staff breakroom and one medium 2-way mirror in the middle of the staff breakroom. This now provides coverage to the blind spot areas in the staff breakroom.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.18.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.21. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" and "Internal Management System Policy CUS.001.CSM.01" as evidence of compliance with PREA Standard 115.21. An excerpt from policy CUS.001.CSM.01 states, <i>"The following procedures shall be followed when a custody staff member believes that a crime has been committed within a correctional facility (e.g. large quantity of CDS, major contraband, escape, serious assault, sexual assault, murder, etc.):</i></p> <ol style="list-style-type: none"> <li><i>1. Any suspected crime scene shall be immediately reported to and secured by the area custody supervisor as soon as possible. The custody supervisor shall then query persons in the area regarding the circumstances of the suspected crime.</i></li> <li><i>2. Once a suspected crime scene has been designated and secured by the area custody supervisor, the Shift Commander shall be immediately notified, who shall then notify the designated on-call Administrator and Special Investigations Division (SID) contact person. The Shift Commander will</i></li> </ol>

*complete the Shift Commander's Action Sheet for Alleged Sexual Assaults.*

3. *Crime scene preservation must override any other consideration at the scene except for staff and inmate safety, medical assistance and facility security. If an injured person is at the suspected crime scene, they must receive immediate medical attention; however, every possible attempt shall be made to document and preserve evidence;*
4. *The scene of a suspected crime within a facility is a delicate area and must be treated with the utmost care so as not to contaminate or destroy potential evidence. Until the arrival of a designated SID Investigator, the custody area supervisor shall be responsible for the management and security of any suspected crime scene, including the following minimum standards:*
  - *a. Establishing a perimeter to protect the scene;*
  - *b. Preventing any damage or further damage;*
  - *c. Preventing anyone from leaving the crime scene unless the evacuation of person(s) is necessary due to exigent ,circumstances .i.e. remaining in the area would be life threatening;*
  - *d. Preventing anyone from contaminating the scene or evidence;*
  - *e. Preventing all unauthorized persons from entering the scene;*
  - *f. Maintaining an accurate log using CUS-100 (Special Custody Report) and CUS-101 (Preliminary Incident Report) of the names, times and circumstances surrounding the suspected crime scene;*
  - *g. Maintaining control of the suspected crime scene until the designated SID Investigator assumes control of the scene through the on-duty Shift Commander; and*
  - *h. Providing assistance and the necessary custody staff in support role once the responsibility for the suspected crime scene has been transferred to the on-scene SID Investigator."*

This auditor reviewed "NJDOC's Policy PCS.001.008 and CUS.001.CSM.01" and has concluded that it has the necessary language to align with PREA Standard 115.21.

This auditor also reviewed NJDOC's Memorandum of Understanding (MOU) between NJDOC and "Middlesex County Center for Empowerment." The MOU states that it serves as ADTC's provider for emotional support and victim advocacy services for ADTC's inmates. All languages related to victim advocacy and emotional support services were present in the Memorandum of Understanding. However, the MOU submitted to this auditor was only signed by NJDOC's representative (dated 12/4/2018). There was no signature from "Middlesex County Center for Empowerment's" representative/leadership.

While onsite, this auditor observed the posting of the victim advocacy telephone number posted on signage within the facility. This auditor was able to contact the Assistant Ombudsman who reported that he receives hotline calls and forwards them immediately to the Special Investigations Division (SID). SID then begins to coordinate services to assist inmates who report sexual abuse through the activation of the Sexual Abuse Response Team that is made up of security transport, SANE/

SAFE, hospital staff, the Prosecutors Office, SID staff, Medical staff and Mental health staff. They shared that ADTC transports victim inmates to Robert Wood Johnson of JFK community Hospitals for SANE/SAFE.

This auditor also interviewed specialized medical and mental health staff members who shared that when the inmate is discharged and returns to the facility, that emotional support continues, and the mental health team places them on the special needs roster. This auditor interviewed a random selection of 28 ADTC inmates. When asked about their knowledge of outside victim advocacy and emotional support services provided for sexual abuse victims at ADTC, only 3 out of 28 knew that there were local victim advocacy and emotional support services available for ADTC residents. It is unclear whether this information is reviewed with the inmates during the PREA education period.

Additionally, this auditor interviewed a random selection of 9 ADTC security staff. This auditor shared a scenario with each security staff. This auditor shared a scenario of a sexual assault occurring in the shower area, the victim immediately runs out and reports the assault to the security staff. Each knew their responsibilities if they were first to be informed, notified, or observe sexual abuse/sexual harassment of an inmate. All 9 interviewed security staff also shared their duties to preserve the potential crime scene of the scenario in accordance with policy.

This auditor recommended submit an officially signed/executed MOU between NJDOC and *"Middlesex County Center for Empowerment."* This is due to the submitted MOU copy not having both parties' signatures and date. This auditor also recommended that ADTC provide *"Comprehensive PREA Refresher Education"* to all ADTC inmates, with special focus on the purpose of the *"Middlesex County Center for Empowerment,"* its confidentiality, how and where to appropriately access these advocacy/emotional support services. Additionally, this auditor recommended ADTC update their "Inmate Handout" with the necessary PREA information for reporting as well as victim advocacy and emotional support services. Finally, this auditor recommended that ADTC incorporate victim advocacy information into the PREA education session during "Inmate Orientation" (that is provided to inmates within the 30-day days of their arrival). ADTC should submit documented evidence that the "Inmate Education Supervisor" has added this information about victim advocacy services to the inmate education presentations. This PREA auditor concluded that ADTC was not in compliance with PREA standard 115.21. Corrective Action was required.

During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, this auditor randomly selected 38 ADTC inmates, requesting to see their acknowledgements of receiving *"Refresher Victim Advocacy Education,"* focused on ADTC's Victim Advocacy community partner (*"Middlesex County Center for Empowerment"*). NJDOC's PREA Compliance Unit (PCU) submitted the 45 randomly

selected signed inmate acknowledgements, showing evidence of that ADTC inmates received “*Refresher Victim Advocacy Education*” (on 3/30/25 and 3/31/25), were made aware of who their victim advocates inmate access to emotional support services, how to access a victim advocate, and that victim advocates are available to all ADTC inmates. NJDOC’s PCU also submitted ADTC’s supervisory “*PREA Orientation Inmate Education*” meeting agenda, where ADTC discussed PREA Standards needing to be addressed within the “*Inmate Refresher Educations*” sessions.” “*PREA Orientation Inmate Education*” meeting consisted of the following discussion:

***Purpose/Goals:***

*To discuss and refine the agency's protocols for investigating allegations of sexual abuse, ensuring compliance with established standards and improving support for victims and access to resources. Video and opportunity for open discussion to be utilized with incarcerated population with intent to educate and promote understanding and knowledge of applicable PREA Standards and Zero Tolerance policy of the NJDOC. Incarcerated population participants to have access to relevant documents prior to the meeting, for effective discussion.*

*Introduction and Overview of PREA and applicable Standards, to include:*

***115.21 Victim Access to Forensic Medical Examinations***

*- access/process for examinations and role of SAFEs/SANEs*

***115.21 (d) & 115.53 Victim Advocacy and Support Services***

*- review of victim advocate and emotional support services availability for support*

***115.33 Inmate Education on Rights***

*- review/accessibility of current educational programs regarding sexual abuse rights.*

***115.53 Access to External Support Services (115.53)***

*-access to outside emotional support services and review of communication methods*

***115.54 Third-party Reporting Mechanism (115.54)***

*- review the current process/accessibility for third-party reporting of sexual abuse*

*Opportunity for Open Discussion/Q&A to address any questions or concerns from participants/sharing of ideas and improvement suggestions, if any.*

*Written acknowledgment of participation and understanding completed by incarcerated population.*

Finally, ADTC submitted multiple photo evidence of posters throughout ADTC’s facility and Tiers/Dorms, showing reporting, victim advocacy information, and how to access

	<p>victim advocates. These posters were in English and Spanish.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.21.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.22. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” and “NJDOC Special Investigation Division Investigation Procedures ADM.SID.035” as evidence of compliance with PREA Standard 115.22. An excerpt from NJDOC’s Policy PCS.001.008 states, <i>“The NJDOC responds to, investigates, and supports the prosecution of sexual abuse and sexual harassment within the correctional system and externally in partnership with state and local authorities. NJDOC assigns to the Special Investigations Division 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 incarcerated persons, staff and other individuals who visit NJDOC facilities. In instances where an investigation that originated as a PREA allegation has been determined, through the investigative process, not to be PREA related, such cases will be referred to Administration to address whether any other appropriate action should be taken. Notification of this determination shall be supplied by SID to the facility Institutional PREA Compliance Manager (IPCM) within a reasonable timeframe. Notification of this determination will then be provided to the Incarcerated Person (IP) who made the allegation as soon as it has been received by the facility IPCM. All such notifications or attempted notifications to the IP by the facility IPCM shall be documented.</i></p> <p><i>NJDOC SID accepts and investigates all verbal, written, third party, and anonymous reports of sexual abuse, misconduct and harassment, and documents all such referrals. This policy, NJDOC Policy Number PCS.001.008 is published on NJDOC’s website.</i></p> <p><i>NJDOC’s Special Investigations Division, which is a division under the Office of the Commissioner, is responsible for investigating all allegations of sexual abuse.”</i></p> <p>This auditor reviewed “NJDOC’s Policy PCS.001.008 and Investigation Procedure ADM.SID.035,” concluding that it has the necessary language to align with PREA Standard 115.22. Furthermore, this auditor reviewed NJDOC’s website and verified</p>

	<p>that NJ-DOC's Investigations of Sexual Abuse policy is published/posted on its website, as well as 3rd party reporting of PREA allegations.</p> <p>While onsite, this auditor also interviewed two investigators which were the Institutional SID Investigator and the SID Compliance Unit Principal Investigator. This auditor shared a scenario of an inmate running out of the shower and immediately reports to staff that they were sexually assaulted by another inmate. SID's Principal Investigator shared SID's coordinated response responsibilities with the Sexual Assault Response Team when a sexual abuse incident occurs/alleged. The Institutional SID investigator discussed evidence preservation and reporting protocols. Additionally, ADTC's investigators shared their investigating procedures/ responsibilities when a sexual abuse allegation is assigned to them. Further, the investigative team shared that they are the entity within the department that is qualified to conduct criminal investigations as each investigator in the Special Investigations Division undergoes correctional academy training as well as prosecutor/law enforcement academy training to become law enforcement officials and possess arresting authority. Finally, this auditor interviewed a random selection of 17 ADTC specialized and security staff, 16 out of 17 responded confidently and shared their knowledge as first responders and their coordinated response.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA Standard 115.22.</p>
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<b>115.31</b>	<b>Employee training</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.31. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.31. This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.31.</p> <p>While onsite, this PREA interviewed 17 randomly selected security staff, specialized, support, volunteer, and contractors. Each acknowledged receiving PREA New Hire and/or PREA refresher training. Each knew their responsibilities as first responders and coordinated duties. This auditor also requested, received, and viewed the training files of the 17 randomly selected staff interviewed to verify up-to-date annual PREA training. ADTC's Institutional PREA Compliance Manager/Assistant Superintendent printed showed ADTC's electronic training tracking spreadsheet, which included the</p>



	<p>staff's name, name of the training course, the training type, and the date of training completion. The training tracking spreadsheet showed each staff's training verification of attending. This auditor also reviewed the classroom in-person video training curriculum, PREA Staff Training Lesson Plan, and basic course and annual refresher training curriculum used to train employees, contractors, and volunteers. The curriculum and lesson plans for training covered the components identified in PREA Standard 115.31.</p> <p>This PREA auditor concludes ADTC is in compliance with PREA standard 115.31.</p>
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115.32	Volunteer and contractor training
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.32. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.32. An excerpt from NJDOC's Policy PCS.001.008 states, <i>"All volunteers and contractors receive annual PREA-specific training on their duties and responsibilities under the Department's zero-tolerance policy. They are provided information regarding sexual misconduct and consequences for violating the required conduct. They are also informed that they are required to immediately report any incident or allegation of sexual abuse/sexual harassment to custody staff, the NJDOC facility Shift Commander or Administrator, SID, or confidentially on the SID confidential tip line."</i></p> <p><i>Training receipt forms are issued for signature to each contractor and volunteer that will have the potential to interact with incarcerated persons. Copies of these signed receipt forms are to be maintained at each facility."</i></p> <p>This auditor reviewed "NJDOC's Policy PCS.001.008," concluding that it has the necessary language to align with PREA Standard 115.32.</p> <p>While onsite, this PREA auditor interviewed 3 randomly selected contractors. Each acknowledged receiving PREA training and refresher trainings. Each was able to thoroughly share their responsibilities if informed, observe, or gain knowledge of sexual abuse or sexual harassment. Additionally, ADTC's Clinical Secretary was able to show certificates for the mental health contractors but could not provide certificates for completing PREA training with the contractor's name, name of training and training type. This auditor also reviewed the classroom in-person video training curriculum, PREA Staff Training Lesson Plan/script, and basic course and annual</p>

	<p>refresher training curriculum used to train employees, contractors, and volunteers. The curriculum and lesson plans for training covered the components identified in PREA Standard 115.32.</p> <p>ADTC was not able to provide evidence to support the volunteers or contractors receiving training and that they understood the contents of what was presented during the training period. NJDOC's "Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" (p. 27 section C) states, <i>"(c) The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received. All volunteers and contractors receive annual PREA-specific training on their duties and responsibilities under the Department's zero-tolerance policy. They are provided information regarding sexual misconduct and consequences for violating the required conduct. They are also informed that they are required to immediately report any incident or allegation of sexual abuse/sexual harassment to custody staff, the NJDOC facility Shift Commander or Administrator, SID, or confidentially on the SID confidential tip line. Training receipt forms are issued for signature to each contractor and volunteer that will have the potential to interact with incarcerated persons. Copies of these signed receipt forms are to be maintained at each facility."</i></p> <p>This auditor recommended that ADTC develop a documented procedure/system to verify that ADTC volunteers receive and understand the training they have received. PREA training. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.32. Corrective Action was required.</p> <p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (PCU) submitted their <i>"Volunteer PREA Training Spreadsheet,"</i> which contains ADTC volunteers and volunteers who are interchanged between NJDOC's other managed facilities. This auditor identified 168 volunteers on this spreadsheet with the specific 2024 or 2025 date they received their PREA Training. If the volunteers have not received their PREA Training in 2025, the spreadsheet has their 2024 date with <i>"scheduling"</i> next to the date, to indicate that their 2025 PREA Training has not been completed yet. Finally, NJDOC's PCU submitted PREA Training spreadsheet/transcripts of 40 Rutgers University medical/mental health contractors.</p> <p>This PREA auditor concludes ADTC is in compliance with PREA standard 115.32.</p>
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<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

This PREA Auditor reviewed Adult Diagnostic & Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.33. Adult Diagnostic & Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.33. An excerpt from NJDOC's Policy PCS.001.008 states, *"NJDOC provides incarcerated persons with comprehensive education regarding NJDOC's zero tolerance of sexual abuse and sexual harassment, within 30 days of intake at each NJDOC facility. All incarcerated persons receive information regarding the following:*

- *NJDOC's zero-tolerance policy regarding sexual abuse and harassment*
- *Definitions of sexual abuse and sexual harassment*
- *The right to be free from sexual abuse and sexual harassment and from retaliation for reporting such incidents*
- *The right to be free from verbal abuse, including name calling, and sexually explicit, profane, vulgar, or degrading language*
- *How to confidentially report incidents or suspicious of sexual abuse and harassment, including the availability of non-prisoner interpreters for incarcerated persons with limited ability to speak or write in English*
- *How to contact the Special Investigation Division*
- *How to contact the Office of the Corrections Ombudsperson Upon intake at a NJDOC facility, all incarcerated persons are provided with written and video materials detailing the zero tolerance for sexual abuse/harassment policy, along with PREA informational handouts and reporting instructions.*

*Upon assignment to a correctional facility, incarcerated persons are issued facility-specific handbooks, which include a PREA section. They are provided information at their orientation on how to report an incident or allegation, along with methods for third party and confidential reporting."*

This auditor reviewed "NJDOC's Policy PCS.001.008," concluding that it has the necessary language to align with PREA Standard 115.33.

While onsite, this auditor interviewed ADTC's Supervisor of Education. They shared that they oversee the "Inmate Orientation" process, which is where inmates receive PREA Comprehensive Education (amongst many other topics). They further shared, "Inmate Orientation" is conducted within 2-weeks of the inmate's arrival, but all inmates may not participate if they have conflicting appointments or elect not to go." This auditor asked ADTC's Supervisor of Education to explain the "Inmate Orientation" process. They shared, "PREA Comprehensive Education is conducted with several other inmate orientation topics and discussions. PREA Education entails showing a PREA video, then having each inmate sign an acknowledgement form stating that they received PREA Comprehensive Education." This auditor asked if the inmates are allowed to ask questions for clarity, ADTC's Supervisor of Education shared that they

are educators by trade and do not know enough about PREA to be confident in answering questions related to PREA. When this auditor reviewed the "PREA Education Acknowledgement Form" inmates sign during "Inmate Orientation," the form was an "Intake PREA Information" Acknowledgement Form. This auditor concludes that ADTC is not consistently providing PREA Information to inmates at intake. Instead, ADTC is utilizing "Inmate Orientation" (2 weeks later) to combine the requirements in PREA Standard 115.33(a) (PREA Information at Intake) and 115.33(b) (Comprehensive PREA Education within 30 days of intake).

Finally, this auditor interviewed a random selection of 28 inmates. There were 21 out of 28 interviewed who reported that they did not receive PREA Information or a PREA pamphlet at intake. There were 32 out of 41 interviewed inmates who stated that they did not recall receiving PREA Education or recall viewing a PREA video.

This auditor recommended that ADTC provide documented "*Refresher Comprehensive PREA Education*" to all ADTC inmates. If a video is being shown, inmates should be allowed to ask questions following the video ADTC staff should share with inmates where they can report, how to report, confidential victim advocacy access/emotional support access and how to contact, as well as investigations for all PREA allegations and retaliation monitoring. This auditor also recommended that ADTC provide PREA Information and PREA Pamphlet to all inmates at intake, which consists of ADTC's zero-tolerance for SA and SH, inmate rights, how to report, investigations of allegations, and retaliation protection. This auditor recommends that ADTC provide a procedure for documenting and tracking inmate receipt of PREA Information/PREA Pamphlet provided at intake. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.33. Corrective Action was required.

During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, this auditor randomly selected 27 inmate names for ADTC to provide documentation of "*Refresher Comprehensive PREA Education*" and inmates receipt of "*PREA Pamphlets*." NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted signed inmate "*Prison Rape Elimination Act Pamphlet Receipts*" of the 27 randomly selected ADTC inmates. These receipts/acknowledgements were signed by inmates on 9/20/24, 11/7/24, 11/8/24, and 4/08/25, stating receipt of "*PREA Pamphlet*," viewing of the PREA Video, and Receipt of an inmate Handbook which includes PREA Information. These "*PREA Pamphlets*" are provided in English and Spanish. Furthermore, ADTC's revised procedures for providing PREA information and a "*PREA Pamphlet*" at intake are as follows: **1)** At intake, the inmate reviews the PREA video, then receives and reviews the "*PREA Pamphlet*" with the intake staff. **2)** Within 30 days of the inmate's intake, the inmate is provided "*Comprehensive PREA Orientation/Education*," where the inmate can ask further questions for understanding.

Moreover, NJDOC's PCU also submitted ADTC's supervisory "*PREA Orientation Inmate*

*Education” meeting agenda, where ADTC discussed PREA Standards needing to be addressed within the “Inmate Refresher Educations” sessions. “PREA Orientation Inmate Education” meeting consisted of the following discussion:*

***Purpose/Goals:***

*To discuss and refine the agency's protocols for investigating allegations of sexual abuse, ensuring compliance with established standards and improving support for victims and access to resources. Video and opportunity for open discussion to be utilized with incarcerated population with intent to educate and promote understanding and knowledge of applicable PREA Standards and Zero Tolerance policy of the NJDOC. Incarcerated population participants to have access to relevant documents prior to the meeting, for effective discussion.*

*Introduction and Overview of PREA and applicable Standards, to include:*

***115.21 Victim Access to Forensic Medical Examinations***

*- access/process for examinations and role of SAFEs/SANEs*

***115.21 (d) & 115.53 Victim Advocacy and Support Services***

*- review of victim advocate and emotional support services availability for support*

***115.33 Inmate Education on Rights***

*- review/accessibility of current educational programs regarding sexual abuse rights.*

***115.53 Access to External Support Services (115.53)***

*-access to outside emotional support services and review of communication methods*

***115.54 Third-party Reporting Mechanism (115.54)***

*- review the current process/accessibility for third-party reporting of sexual abuse*

*Opportunity for Open Discussion/Q&A to address any questions or concerns from participants/sharing of ideas and improvement suggestions, if any.*

*Written acknowledgment of participation and understanding completed by incarcerated population.*

Finally, ADTC submitted multiple photo evidence of posters throughout ADTC’s facility and Tiers/Dorms, showing reporting avenues and victim advocacy information. These posters were in English and Spanish.

This PREA auditor concludes that ADTC is in compliance with PREA Standard 115.33.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.34. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.34. This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.34.</p> <p>This PREA auditor also reviewed NJDOC's "Specialized Investigator's Training" via DVD, as evidence of compliance. This auditor also interviewed 2 randomly selected ADTC administrative PREA investigators. Both knew their responsibilities in, evidence collection, Miranda/Garrity rights, interviewing procedures, understanding victim trauma, and investigation report-writing protocols. Both investigators identified the specialized training they received regarding investigating sexual abuse in confinement facilities. This auditor reviewed both interviewed PREA investigator's training transcripts, submitted by ADTC's SID Investigators Division. These training transcripts verified the specialized training all the ADTC PREA investigators received training through the classroom or through the National Institute of Corrections (NIC) web-based training.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.34.</p>

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.35. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.35. This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.35.</p>

	<p>While onsite, this PREA auditor interviewed ADTC's Clinician Supervisor, Chief Psychologist and Director of Nursing. Each staff identified the training they received regarding effective and professional responding to sexual abuse victims, evidence preservation, reporting procedures, and forensic examination protocols. All knew their coordinated response responsibilities if an inmate is sexually abused at ADTC. This auditor also reviewed the ADTC PREA video, which is used to train new medical and mental health staff. This auditor also reviewed ADTC's Clinician Supervisor, Director of Nursing, and other medical staff training transcripts, submitted by ADTC's Clinical Secretary. These training certificates did not verify the annual PREA training received through in-service or specialized training verification.</p> <p>This auditor recommended that all medical and mental health staff at ADTC take approved specialized training for mental health and medical professionals working in confinement. This PREA auditor concluded that ADTC was not in compliance with PREA standard 115.35. Corrective action was required.</p> <p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, this auditor requested specialized training of 51 randomly selected Rutgers University medical and mental health contractors. NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted completed specialized training signature acknowledgements of the 51 Rutgers University contracted medical and mental health staff working at ADTC. The 51 verified Rutgers University staff acknowledge viewing NJDOC's approved specialized medical and mental health training video and comprehending the content.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.35.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.41. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.41. This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.41.</p>

While on site, this auditor interviewed the Institutional PREA Compliance Manager (IPCM)/Assistant Superintendent, and the Clinical Supervisor explained the process of obtaining the inmate's risk of victimization and abusiveness history information. During the interview the IPCM shared that Garden State Correctional Facility is the Assessment Hub for the male inmates committed to the NJDOC. This exhaustive screening process entails screener observations, inmate self-report and a "receiving chart" review which aligns with 115.41. ADTC is unique in that all inmates receive a mental health screening upon intake. The mental health team conducts all PREA Initial Screenings upon arrival for those committed to the program. Those who come into the program voluntarily receive a transfer screening from the medical department. Upon completion of their initial screening, they receive a PREA risk score and status.

This auditor then interviewed the Medical Nurse Manager who administers ADTC's "PREA Transfer Screening" tool for inmates who voluntary enter the program. They shared that upon arrival to the transferred facility; the facility medical staff conducts a Transfer PREA Screening within 72 hours of inmate arrival and it is based on four self-report questions. Based on the inmate response to these questions, the ADTC's Medical Electronic Screening allows the inmates self-reported response to override Garden State's initial PREA screening outcome. This auditor reviewed this screening tool which had the following questions therein:

1. *Does the inmate report being sexually abused by others in the past? If yes, does the inmate verbally consent to allow the reporting of this information to NJDOC?*
2. *Does the inmate report currently being sexually abuse by others?*
3. *Does the inmate report being sexually abusive towards others in the past?*
4. *Does the inmate report currently being sexually abusive towards others?*

This auditor does not believe the 4 above questions alone gather enough information to close the gap to provide enough information to guide programming assignments, education, work, housing and bedding decisions. Additionally, the system should not override the initial PREA risk level and status based on inmate self-reporting. This skews the scoring process making it less reliable with the possibility of inaccuracy when considering an inmate's risk level and status.

This auditor asked the Medical Nurse Manager, *"What happens when an inmate answers "yes" to any of the questions on the assessment screening that identifies the inmate as having a history of being a victim or predatory?"* ADTC's Nurse Manager shared that she shares the information with the Clinical Supervisor. This auditor further shared that there should be a referral to mental health staff for a follow-up meeting with the inmate within 14 days of the intake screening. This auditor also shared that risk screening reassessments should also be completed within 30-days of intake. This auditor requested evidence of the 30-day reassessment screenings but did not receive them while onsite and could not determine compliance.

This auditor also interviewed the Clinician Supervisor who discussed the mental



	<p>health team's role in the screening process. This auditor further shared PREA Standards 115.41, 115.42, and 115.81 and how medical and mental health work together to ensure that the PREA screening process is done in its entirety. The Clinician Supervisor stated that her clinicians meet with inmates but do not specifically note that they are directly due to the PREA screening tool.</p> <p>Finally, this auditor interviewed 28 randomly selected ADTC inmates. This auditor asked the inmates if they received a PREA Risk Screening and if the above 4 questions were asked again during their stay. Sixteen interviewed inmates shared that they recalled receiving PREA Risk Screening. Also, 28 interviewed inmates shared that they did not recall receiving a 30-day PREA Risk Reassessment. When this auditor requested to review 30-day reassessments of the random selection of 26 interviewed inmates, all reassessments were provided and completed.</p> <p>This auditor recommended that ADTC revamp their electronic <i>"PREA Transfer/ Reassessment Screening"</i> tool (mentioned above), to ensure that the screener is reaffirming the screening outcomes of the initial exhaustive screening while compiling new information for the transfer screening. This electronic <i>"PREA Transfer/ Reassessment Screening"</i> tool should not be allowed to override the initial risk score and status, unless the new information is "new victimization information reported" or an "undisclosed report of sexual abuse" which was not reported at the initial assessment. The screening tool should never allow an inmate to self-report in a manner which will delete the original perpetrator status. Additionally, the <i>"NJDOC PREA 30 Day Risk Reassessment Monitoring Form"</i> should be revamped to reflect the same questions as well. This auditor recommended example "Transfer PREA Risk Screening" questions. This PREA auditor concluded ADTC was not in compliance with PREA standard 115.41. Corrective Action was required.</p> <p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted a revamped PREA Risk Screening Tool. This PREA Risk Screening tool considers, at a minimum, the criteria identified in this PREA 115.41 standard to assess inmates for risk of sexual victimization and abusiveness. Additionally, NJDOC's revamped PREA Risk Screening Tool has a scoring mechanism with a 3-point calibrated threshold to assess inmate risk of sexual victimization and a 2-point calibrated threshold to assess inmate risk of sexual abusiveness. Finally, this PREA Risk Screening Tool contains a designation/risk section, as well as a referral section for follow-up with mental health within 14-days of the intake screening.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.41.</p>
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<b>115.42</b>	<b>Use of screening information</b>
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**Auditor Overall Determination: Meets Standard**

**Auditor Discussion**

This PREA Auditor reviewed Adult Diagnostic & Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.42. Adult Diagnostic & Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.42. This auditor reviewed "NJDOC's Policy PCS.001.008," concluding that it has the necessary language to align with PREA Standard 115.42.

While on site, this auditor interviewed the Institutional PREA Compliance Manager (IPCM)/Assistant Superintendent, and the Clinical Supervisor explained the process of obtaining the inmate's risk of victimization and abusiveness history information. During the interview the IPCM shared that Garden State Correctional Facility is the Assessment Hub for the male inmates committed to the NJDOC. This exhaustive screening process entails screener observations, inmate self-report and a "receiving chart" review which aligns with 115.41. ADTC is unique in that all inmates receive a mental health screening upon intake. The mental health team conducts all PREA Initial Screenings upon arrival for those committed to the program. Those who come into the program voluntarily receive a transfer screening from the medical department. Upon completion of their initial screening, they receive a PREA risk score and status.

This auditor then interviewed the Medical Nurse Manager who administers ADTC's "PREA Transfer Screening" tool for inmates who voluntary enter the program. They shared that upon arrival to the transferred facility; the facility medical staff conducts a Transfer PREA Screening within 72 hours of inmate arrival and it is based on four self-report questions. Based on the inmate response to these questions, the ADTC's Medical Electronic Screening allows the inmates self-reported response to override Garden State's initial PREA screening outcome. This auditor reviewed this screening tool which had the following questions therein:

1. *Does the inmate report being sexually abused by others in the past? If yes, does the inmate verbally consent to allow the reporting of this information to NJDOC?*
2. *Does the inmate report currently being sexually abuse by others?*
3. *Does the inmate report being sexually abusive towards others in the past?*
4. *Does the inmate report currently being sexually abusive towards others?*

This auditor does not believe the 4 above questions alone gather enough information to close the gap to provide enough information to guide programming assignments, education, work, housing and bedding decisions. Additionally, the system should not override the initial PREA risk level and status based on inmate self-reporting. This

skews the scoring process making it less reliable with the possibility of inaccuracy when considering an inmate's risk level and status.

This auditor asked the Medical Nurse Manager, *"What happens when an inmate answers "yes" to any of the questions on the assessment screening that identifies the inmate as having a history of being a victim or predatory?"* ADTC's Nurse Manager shared that she shares the information with the Clinical Supervisor. This auditor further shared that there should be a referral to mental health staff for a follow-up meeting with the inmate within 14 days of the intake screening. This auditor also shared that risk screening reassessments should also be completed within 30-days of intake. This auditor requested evidence of the 30-day reassessment screenings but did not receive them while onsite and could not determine compliance.

This auditor also interviewed the Clinician Supervisor who discussed the mental health team's role in the screening process. This auditor further shared PREA Standards 115.41, 115.42, and 115.81 and how medical and mental health work together to ensure that the PREA screening process is done in its entirety. The Clinician Supervisor did not confirm whether 14-day follow-ups were being received or completed by his team but stated that follows up do occur.

Finally, this auditor interviewed 28 randomly selected ADTC inmates. This auditor asked the inmates if they received a PREA Risk Screening and if the above 4 questions were asked again during their stay. Sixteen interviewed inmates shared that they recalled receiving PREA Risk Screening. Also, 28 interviewed inmates shared that they did not recall receiving a 30-day PREA Risk Reassessment. When this auditor requested to review 30-day reassessments of the random selection of 28 interviewed inmates, all reassessments were provided and completed.

This auditor recommended that ADTC revamp their electronic *"PREA Transfer/ Reassessment Screening"* tool (mentioned above), to ensure that the screener is reaffirming the screening outcomes of the initial exhaustive screening while compiling new information for the transfer screening. This electronic *"PREA Transfer/ Reassessment Screening"* tool should not be allowed to override the initial risk score and status, unless the new information is "new victimization information reported" or an "undisclosed report of sexual abuse" which was not reported at the initial assessment. The screening tool should never allow an inmate to self-report in a manner which will delete the original perpetrator status. Additionally, the *"NJDOC PREA 30 Day Risk Reassessment Monitoring Form"* should be revamped to reflect the same questions as well. This auditor recommended example *"Transfer PREA Risk Screening"* questions. This PREA auditor concluded ADTC was not in compliance with PREA standard 115.42. Corrective Action was required.

During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted a revamped PREA Risk Screening

	<p>Tool. This PREA Risk Screening tool considers, at a minimum, the criteria identified in this PREA 115.42 standard to assess inmates for risk of sexual victimization and abusiveness. Additionally, NJDOC's revamped PREA Risk Screening Tool has a scoring mechanism with a 3-point calibrated threshold to assess inmate risk of sexual victimization and a 2-point calibrated threshold to assess inmate risk of sexual abusiveness. Finally, this PREA Risk Screening Tool contains a designation/risk section, as well as a referral section for follow-up with mental health within 14-days of the intake screening.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.42.</p>
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<b>115.43</b>	<b>Protective Custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.43. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.43. This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.43.</p> <p>While on site, this auditor interviewed ADTC's IPCM/Assistant Superintendent and ADTC's Associate Administrator. Each were consistent that involuntary protective custody/segregation is not used at ADTC for inmates who score to be at risk of victimization unless requested. This auditor also interviewed 28 randomly selected inmates. Each inmate shared that ADTC does not utilize protective custody or segregated housing for risk scores. Finally, during the site visit, this auditor conducted an exhaustive site assessment and observed segregated housing/ Restorative Housing Unit (RHU), but the Correctional Officers interviewed on post stated that those housed in that area were solely due to behavioral issues within the facility.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.43.</p>

<b>115.51</b>	<b>Inmate reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>

## Auditor Discussion

This PREA Auditor reviewed Adult Diagnostic & Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.51. Adult Diagnostic & Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.51. An excerpt states, *"NJDOC has established and maintains multiple internal channels for incarcerated persons to privately report sexual harassment and/or sexual abuse, retaliation by other incarcerated persons or staff members for reporting an allegation of sexual abuse/harassment or cooperating with a PREA investigation, and of any staff member neglect or dereliction of responsibilities that may have contributed to the incident. Incarcerated persons can report incidents of sexual abuse or harassment in person or in writing to any staff, contractor, or volunteer, to the facility IPCM in person or in writing, to SID in person or in writing, via accessing communication with an NJDOC approved electronic Kiosk or tablet, or anonymously. Incarcerated persons can report an incident at any time no matter when, or where, it happened. NJDOC advises and educates incarcerated persons of their rights and ability to report via numerous methods and also provides reporting contact information on posters and literature available throughout each correctional facility. Incarcerated persons may report PREA sexual abuse/sexual harassment internally by using one of the following methods:*

*Verbally or in writing to any NJDOC staff member, contractor or volunteer;  
Contacting the Correctional Facility's IPCM;  
Using the Incarcerated person Remedy System/media Kiosk;  
Contacting the Special Investigations Division (SID) via the Confidential SID box or by dialing \*SID1# on the Incarcerated person Telephone System (free call)*

*The Office of the Corrections Ombudsperson serves as an available outside resource to incarcerated persons in custody of the New Jersey Department of Corrections to report incidents of sexual abuse, assault, harassment or retaliation. The Office of the Corrections Ombudsperson, upon receiving such information, shall immediately forward incarcerated person reports of sexual abuse or sexual harassment to agency officials, allowing the incarcerated person to remain anonymous upon request. Incarcerated persons can contact the Ombudsperson by writing to:*

*Office of the Corrections Ombudsperson*

*PO Box 855 Trenton, NJ, 08625*

*Or by phone at 1-555-555-5555 (free call)."*

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.51.

While onsite, this PREA auditor interviewed a random selection of 28 ADTC inmates asking, *"Please share with me at least four different ways an inmate can report an incident of sexual abuse or sexual harassment?"* There were 23 out of 28 who shared 3 to 4 ways to report. There were 5 inmates who could only share 2 or fewer ways to report. Furthermore, only 8 out of 28 inmates knew about the Ombudsperson Office serving as a PREA private hotline option, as well as anonymous reporting. The inmates shared their distrust of the confidentiality of the kiosk avenue as they believe officers have access to see their complaints and they reported fearing retaliation. When this auditor conducted an exhaustive site assessment, this auditor observed that the PREA reporting signage throughout the facility was in English and Spanish and were placed near phones/kiosk areas where inmates can easily locate numbers to report sexual abuse or sexual harassment incidents.

Additionally, this auditor observed a mailbox area that delineated specific needs for which the Ombudsman, Mail, and Grievances could be contacted through writing. This auditor also observed kiosks in all dormitories which inmates have privacy to utilize during designated times within the day. This auditor attempted to call the Ombudsperson Office's hotline number. However, it was not operable at the time of this auditor's testing. This auditor was unable to speak with someone from the Ombudsperson Office to ask questions.

This auditor recommended ADTC fix the inoperable phones which provide access to external private/anonymous reporting (Ombudsperson's Office) for inmates. This auditor also recommended ADTC to relocate current *"Zero Tolerance"* signage near inmate telephones for easier viewing and accessibility. Additionally, this auditor recommended that ALL inmates receive *"Refresher Education"* on various forms of internal reporting for inmates, where these reporting accesses are located, and directions on how to access these reporting avenues. ADTC should also include in this *"Refresher Education,"* information about private/anonymous reporting through the Ombudsperson's Office, how to contact them, and where to get their information. Finally, this *"Refresher Education"* for inmates should be properly documented with content of what was reviewed, as well as inmate signature which acknowledges information being received and understood. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.51. Corrective Action was required.

During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PCU submitted photo evidence of a J-Pay Message placed on every inmate's tablet, providing information on the various way for inmates to report sexual abuse and sexual harassment. This J-Pay message also provided related telephone numbers, addresses, and telephone numbers in which an inmate can contact to report (ombudsman, special investigations division, emotional support services, and Middlesex Center for Empowerment). Additionally, this auditor randomly selected 27 inmate names for ADTC to provide documentation of *"Refresher Comprehensive PREA Education"* and inmates receipt of PREA Pamphlets. NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance

Managers) submitted signed inmate *“Prison Rape Elimination Act Pamphlet Receipts”* of the 27 randomly selected ADTC inmates. These receipts/acknowledgements were signed by inmates on 9/10/24, 11/7/25, 11/8/24 and 4/08/25, stating receipt of PREA Pamphlet, viewing of the PREA Video, and Receipt of an inmate Handbook which includes PREA Information. These *“PREA Pamphlets”* are provided in English and Spanish.

Moreover, NJDOC’s PCU also submitted ADTC’s supervisory *“PREA Orientation Inmate Education”* meeting agenda, where ADTC discussed PREA Standards needing to be addressed within the *“Inmate Refresher Educations”* sessions. *“PREA Orientation Inmate Education”* meeting consisted of the following discussion:

***Purpose/Goals:***

*To discuss and refine the agency's protocols for investigating allegations of sexual abuse, ensuring compliance with established standards and improving support for victims and access to resources. Video and opportunity for open discussion to be utilized with incarcerated population with intent to educate and promote understanding and knowledge of applicable PREA Standards and Zero Tolerance policy of the NJDOC. Incarcerated population participants to have access to relevant documents prior to the meeting, for effective discussion.*

*Introduction and Overview of PREA and applicable Standards, to include:*

***115.21 Victim Access to Forensic Medical Examinations***

*- access/process for examinations and role of SAFEs/SANEs*

***115.21 (d) & 115.53 Victim Advocacy and Support Services***

*- review of victim advocate and emotional support services availability for support*

***115.33 Inmate Education on Rights***

*- review/accessibility of current educational programs regarding sexual abuse rights.*

***115.53 Access to External Support Services (115.53)***

*-access to outside emotional support services and review of communication methods*

***115.54 Third-party Reporting Mechanism (115.54)***

*- review the current process/accessibility for third-party reporting of sexual abuse*

*Opportunity for Open Discussion/Q&A to address any questions or concerns from participants/sharing of ideas and improvement suggestions, if any.*

*Written acknowledgment of participation and understanding completed by incarcerated population.*

	<p>Finally, ADTC submitted multiple photo evidence of NJDOC's "Zero-Tolerance" posters throughout and around ADTC's housing units, strategically posted next to telephones, showing their internal and external reporting options, victim advocacy information, and how to access victim advocates. These posters were in English and Spanish. Finally, ADTC submitted multiple photo verifications of ADTC's adding a Spanish option on their J-Pay Kiosk to improve communication avenues for LEP inmates.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.51.</p>
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115.52	Exhaustion of administrative remedies
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.52. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.52. An excerpt states, <i>"NJDOC accepts all grievances related to sexual abuse, regardless of the time frame the alleged abuse occurred. Grievances are handled in accordance with IMM.002.JPG.01 IP Electronic Communication System Guidelines and IMM.002.IRS.001 Remedy System."</i></p> <p><i>Any document received as part of the IP Remedy System related to sexual abuse/harassment are immediately forwarded to SID and the facility Administrator. Documents are not referred to the staff member who is the subject of the complaint.</i></p> <p><i>A Grievance Form is referred to SID for a PREA investigation. Most administrative investigation decisions will be made within 90 days. In cases where matters require extensive research, forensic testing and documentation, the period of time for action by the reviewing SID official(s) may be extended for up to 70 days if findings indicate that the initial period is insufficient to make an appropriate decision. This extension shall be communicated in writing to the incarcerated person who has submitted the form."</i></p> <p>This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.52.</p> <p>While onsite, this PREA interviewed ADTC's Associate Administrator and Institutional PREA Compliance Manager/Asst. Superintendent shared that the NJDOC allows allegations of sexual abuse to be submitted on a grievance form for investigation, there are Grievance/IP Remedy System procedures to address allegations of inmate</p>



	<p>sexual abuse. He further shared that all inmates could file grievances through the inmate kiosk or on their inmate tablet (if tablet is purchased by the inmate). Finally, ADTC's IPCM shared that those inmates in segregated/administrative housing locations, they still have access to paper grievances and a locked box. The onsite Ombudsperson is the only person with access to the grievance box. In all, when a grievance is submitted alleging sexual abuse/sexual harassment (via kiosk, tablet, or grievance box), it is immediately forwarded to the Special Investigations Division (SID) to immediately initiate an investigation.</p> <p>While onsite, this PREA auditor interviewed a random selection of 28 ADTC inmates asking, <i>"Please share with me at least four different ways an inmate can report an incident of sexual abuse or sexual harassment?"</i> There were 22 out of 28 inmates to report that a grievance/IP Remedy System process. The other 6 inmates shared that they knew about the grievance/IP Remedy System process, once this auditor's mention of it being a way to report.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA Standard 115.52.</p>
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115.53 Inmate access to outside confidential support services	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.53. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.53. An excerpt states, <i>"NJDOC maintains a memorandum of understanding with community service providers that are able to provide incarcerated persons with confidential emotional support services related to sexual abuse or sexual harassment. Copies of such agreements are maintained by the Agency PREA Coordinator. Upon request, copies of these agreements are provided to each facility IPCM. Incarcerated persons who are committed to the custody of the NJDOC have access to external sexual abuse emotional support services.</i></p> <p><i>Incarcerated persons may access these services even if they do not wish to make a report of sexual abuse. All incarcerated persons shall be provided with the contact information for State sexual abuse advocacy agencies. They shall also be provided with information on how to write for a sexual abuse survivor packet that is provided by a national sexual abuse victim advocacy group. Facilities shall enable reasonable communication between incarcerated persons and these organizations and agencies</i></p>

*in as confidential a manner as possible.*

*Telephone hotline services are available and can be accessed via the incarcerated person telephone system by dialing \*PREA# on the incarcerated person telephone system. Calls to the PREA Emotional Support Services Line are free. All such calls are confidential, although the incarcerated person must use their Personal Identification Number to access the free calls. The hours of operation of the hotline vary by correctional facility and are posted to the incarcerated person population.*

*PREA emotional support services shall be provided by external sexual abuse victim advocates who can assist in crisis intervention, provide information and offer support to anyone who has questions or is looking for information about sexual violence. The services are only for emotional support related to sexual abuse. Incarcerated persons shall be advised to address any questions or concerns regarding NJDOC PREA to the IPCM. The advocates who provide PREA emotional support services are not third party PREA reporters of sexual abuse/sexual harassment and/or retaliation. Incarcerated persons may report instances of sexual abuse/sexual harassment and/or retaliation by using any of the methods described in PREA Standards 115.51 Incarcerated person Reporting and 115.54 Third Party Reporting."*

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.53.

This auditor also reviewed NJDOC's Memorandum of Understanding (MOU) between NJDOC and "Middlesex County Center for Empowerment." The MOU states that serve as ADTC's provider for emotional support and victim advocacy services for ADTC's inmates. All languages related to victim advocacy and emotional support services were present in the Memorandum of Understanding. However, the MOU submitted to this auditor was only signed by NJDOC's representative (dated 12/4/2018). There was no signature from "Middlesex County Center for Empowerment's" representative/ leadership.

While onsite, this auditor observed the posting of the victim advocacy telephone number posted on signage within the facility. This auditor also interviewed specialized medical and mental health staff members who shared that when the inmate is discharged and returns to the facility, that emotional support continues, and the mental health team places them on the special needs roster. This auditor interviewed a random selection of 28 ADTC inmates. When asked about their knowledge of outside victim advocacy and emotional support services provided for sexual abuse victims at ADTC, only 4 out of 28 knew that there were local victim advocacy and emotional support services available for ADTC inmates. It is unclear whether this information is reviewed with the inmates during the PREA Education period.

This auditor recommended submit an officially signed/executed MOU between NJDOC and "Middlesex County Center for Empowerment." This is due to the submitted MOU copy not having both parties' signatures and date. This auditor also recommended that ADTC provide "Comprehensive PREA Refresher Education" to all ADTC inmates, with special focus on the purpose of the "Middlesex County Center for

*Empowerment,” its confidentiality, how and where to appropriately access these advocacy/emotional support services. Additionally, this auditor recommended ADTC update their “Inmate Handout” with the necessary PREA information for reporting as well as victim advocacy and emotional support services. Finally, this auditor recommended that ADTC incorporate victim advocacy information into the PREA education session during “Inmate Orientation” (that is provided to inmates within the 30-day days of their arrival). ADTC should submit documented evidence that the “Inmate Education Supervisor” has added this information about victim advocacy services to the inmate education presentations. This PREA auditor concluded that ADTC was not in compliance with PREA standard 115.53. Corrective Action was required.*

During ADTC’s Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC’s PREA Coordinator and PREA Compliance Unit (NJDOC’s PREA Coordinator and 2 Regional PREA Compliance Managers). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, this auditor randomly selected 38 ADTC inmates, requesting to see their acknowledgements of receiving “Refresher Victim Advocacy Education” on ADTC’s Victim Advocacy community partner (“Middlesex County Center for Empowerment”). NJDOC’s PREA Compliance Unit (PCU) submitted the 45 randomly selected signed inmate acknowledgements, showing evidence of that ADTC inmates received “Refresher Victim Advocacy Education” (on 3/30/25 and 3/31/25), were made aware of who their victim advocates inmate access to emotional support services, how to access a victim advocate, and that victim advocates are available to all ADTC inmates. NJDOC’s PCU also submitted ADTC’s supervisory “PREA Orientation Inmate Education” meeting agenda, where ADTC discussed PREA Standards needing to be addressed within the “Inmate Refresher Educations” sessions.” “PREA Orientation Inmate Education” meeting consisted of the following discussion:

***Purpose/Goals:***

*To discuss and refine the agency's protocols for investigating allegations of sexual abuse, ensuring compliance with established standards and improving support for victims and access to resources. Video and opportunity for open discussion to be utilized with incarcerated population with intent to educate and promote understanding and knowledge of applicable PREA Standards and Zero Tolerance policy of the NJDOC. Incarcerated population participants to have access to relevant documents prior to the meeting, for effective discussion.*

*Introduction and Overview of PREA and applicable Standards, to include:*

***115.21 Victim Access to Forensic Medical Examinations***

*- access/process for examinations and role of SAFEs/SANes*

***115.21 (d) & 115.53 Victim Advocacy and Support Services***

	<p>- review of victim advocate and emotional support services availability for support</p> <p><b>115.33 Inmate Education on Rights</b></p> <p>- review/accessibility of current educational programs regarding sexual abuse rights.</p> <p><b>115.53 Access to External Support Services (115.53)</b></p> <p>-access to outside emotional support services and review of communication methods</p> <p><b>115.54 Third-party Reporting Mechanism (115.54)</b></p> <p>- review the current process/accessibility for third-party reporting of sexual abuse</p> <p>Opportunity for Open Discussion/Q&amp;A to address any questions or concerns from participants/sharing of ideas and improvement suggestions, if any.</p> <p>Written acknowledgment of participation and understanding completed by incarcerated population.</p> <p>Finally, ADTC submitted multiple photo evidence of posters throughout ADTC's facility and Tiers/Dorms, showing reporting, victim advocacy information, and how to access victim advocates. These posters were in English and Spanish.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.53.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.54. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.54. An excerpts states, <i>"Incarcerated persons may also report sexual harassment and/or abuse through external public or private entities - third parties - utilizing outside communication sources available to them. Family members, friends, attorneys, clergy or any other third party may make a report of sexual abuse or sexual harassment on an incarcerated person's behalf."</i></p> <p><i>Publicly available information for the numerous methods of third-party reporting, as detailed below, is made available (on posters and handouts) throughout every NJDOC</i></p>

facility the visit areas, as well as on the NJDOC PREA webpage: <http://www.nj.gov/corrections/pages/PREA.html>

*Third party reports of sexual abuse and/or harassment within the correctional system are accepted and investigated by NJDOC SID in the same manner as all other such reports. Third parties are informed that they may report sexual abuse/sexual harassment by:*

*Contacting the Correctional Facility's IPCM;*

*Contacting the NJDOC Special Investigations Division (SID) at (609) 826-5617 (SID takes third party reports and will subsequently conduct an investigation); and*

*Contacting the Corrections Ombudsperson:*

*Office of the Corrections Ombudsperson*

*PO Box 855, Trenton, NJ, 08625*

*Phone (609) 633-2596*

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.54

When this auditor reviewed NJDOC's Website, it provided multiple ways for the public to report a sexual abuse or sexual harassment allegation on the behalf of a NJDOC inmate. This auditor also reviewed ADTC's "*Inmate Handbook*," which provided information on ways to report sexual abuse/harassment through a third-party (legal, family, friend, trusting inmate).

While onsite, this PREA auditor interviewed a random selection of 28 ADTC inmates asking, "*Please share with me at least four different ways an inmate can report an incident of sexual abuse or sexual harassment?*" There were only 18 out of 28 who responded that they could report through a 3rd Party. Many interviewed inmates had to be prompted and informed about 3rd Party Reporting as an optional avenue to report a PREA allegation. Ten inmates interviewed were unable to identify 3rd party as an avenue to report.

This auditor also recommended that ADTC provide "*Comprehensive PREA Refresher Education*" to all ADTC inmates, with special focus on the purpose of 3rd Party Reporting, its confidentiality, as well as how and where a 3rd Party reporter can report. Additionally, this auditor recommended ADTC update their "*Inmate Handout*" with the necessary PREA information for reporting as well as victim advocacy and emotional support services. Finally, the "*Comprehensive PREA Refresher Education*" should be properly documented with the contents of what was reviewed, as well as inmate acknowledgement of information being received and understood by the inmate. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.54. Corrective Action was required.

During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and

PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, this auditor randomly selected 27 inmate names for ADTC to provide documentation of *"Refresher Comprehensive PREA Education"* and inmates receipt of PREA Pamphlets. NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted signed inmate *"Prison Rape Elimination Act Pamphlet Receipts"* of the 27 randomly selected ADTC inmates. These receipts/acknowledgements were signed by each inmate on 9/10/24, 11/7/24, 11/8/24, and 4/08/25, stating receipt of PREA Pamphlet, viewing of the PREA Video, and Receipt of an inmate Handbook which includes PREA Information. These "PREA Pamphlets" are provided in English and Spanish.

Moreover, NJDOC's PCU also submitted ADTC's supervisory *"PREA Orientation Inmate Education"* meeting agenda, where ADTC discussed PREA Standards needing to be addressed within the *"Inmate Refresher Educations"* sessions. *"PREA Orientation Inmate Education"* meeting consisted of the following discussion:

***Purpose/Goals:***

*To discuss and refine the agency's protocols for investigating allegations of sexual abuse, ensuring compliance with established standards and improving support for victims and access to resources. Video and opportunity for open discussion to be utilized with incarcerated population with intent to educate and promote understanding and knowledge of applicable PREA Standards and Zero Tolerance policy of the NJDOC. Incarcerated population participants to have access to relevant documents prior to the meeting, for effective discussion.*

*Introduction and Overview of PREA and applicable Standards, to include:*

***115.21 Victim Access to Forensic Medical Examinations***

*- access/process for examinations and role of SAFEs/SANEs*

***115.21 (d) & 115.53 Victim Advocacy and Support Services***

*- review of victim advocate and emotional support services availability for support*

***115.33 Inmate Education on Rights***

*- review/accessibility of current educational programs regarding sexual abuse rights.*

***115.53 Access to External Support Services (115.53)***

*-access to outside emotional support services and review of communication methods*

***115.54 Third-party Reporting Mechanism (115.54)***

*- review the current process/accessibility for third-party reporting of sexual abuse*

	<p><i>Opportunity for Open Discussion/Q&amp;A to address any questions or concerns from participants/sharing of ideas and improvement suggestions, if any.</i></p> <p><i>Written acknowledgment of participation and understanding completed by incarcerated population.</i></p> <p>Finally, ADTC submitted multiple photo evidence of NJDOC's "Zero-Tolerance" posters throughout and around ADTC's housing units, strategically posted next to telephones, showing their internal and external reporting options, victim advocacy information, and how to access victim advocates. These posters were in English and Spanish. Finally, ADTC submitted multiple photo verifications of ADTC adding a Spanish option on their J-Pay Kiosk to improve PREA communication avenues for LEP inmates.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.54.</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.61. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.61. This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.61.</p> <p>This auditor also reviewed ADTC's Inmate Handbook, which provided information to inmates on ways to report sexual abuse/harassment through informing staff, third-party (legal, family member, friend), written reporting, and confidential hotline. This auditor also interviewed 17 randomly selected ADTC specialized staff, security staff, and contractors. Each knew their coordinated responsibilities if informed, suspects, receive information, or become aware of sexual abuse at ADTC. Finally, this auditor interviewed 28 randomly selected inmates. Each interviewed inmate shared that staff immediately respond to reports of sexual abuse or sexual harassment.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.61.</p>

<b>115.62</b>	<b>Agency protection duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>

	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.62. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.62. This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.62.</p> <p>This auditor also interviewed 17 randomly selected ADTC specialized staff, security staff, and contractors, asking the question, <i>“If you learn that an inmate may be at imminent risk of sexual abuse, what steps you would take to protect?”</i> There was a consensus amongst the interviewed staff that they would immediately attempt to mitigate the risk by informing supervisory staff and recommending alternative dormitory or programming adjustments. Finally, this auditor interviewed 28 randomly selected inmates. Each interviewed inmate shared that staff protects vulnerable inmates and they immediately respond to any reports of inmate risk of sexual abuse or sexual harassment.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.62.</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.63. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.63. This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.63.</p> <p>While on site, this auditor interviewed 28 randomly selected inmates. Each interviewed inmate shared they have not reported or have been informed by another inmate that they were a victim of unreported sexual abuse. This auditor also interviewed ADTC’s Institutional PREA Compliance Manager/Asst. Superintendent and</p>



NJDOC's Regional PREA Compliance Manager, who shared that if an inmate reports sexual abuse stemming from a previous facility, ADTC's IPCM will provide an email notice to the facility and mental health services are offered to the inmate. Both further stated that ADTC's Warden/Administrator (or designee) would be the one to communicate to the previous confinement facility within 72 hours of receipt of the information. Furthermore, NJDOC's IPCM and NJDOC's Regional PREA Compliance Manager that NJDOC's "ITAG" triggers an automated email from NJDOC's Computerized Medical System (CMS) anytime a transfer occurs when a PREA Allegation case is still open/pending. The receiving institution picks up on the retaliation monitoring as the PREA Investigation continues.

After reviewing NJDOC's "PREA Concern" email utilized to communicate allegations, this auditor does not consider this sufficient evidence of compliance with PREA Standard 115.63. PREA Standard 115.63 states,

*"(a) 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 head of the facility or appropriate office of the agency where the alleged abuse occurred.*

*(b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.*

*(c) The agency shall document that it has provided such notification.*

*(d) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards."*

This contents of the "PREA Concern" does not identify the date/time the allegation was submitted by the inmate, to establish if the notification timeframe was within 72 hours. Additionally, the email should state that the investigation will be conducted by ADTC. Additionally, the receiving facility administrator is supposed to investigate the concern, and the receiving facility should support in the investigation. Furthermore, ADTC's IPCM could not provide a letter template or any other evidence to support their procedure for the process in response to such an allegation. Evidence was also not submitted in OAS to support this procedure, in accordance with NJDOC's PCS.001.008 policy.

This auditor recommended that ADTC's IPCM develop and provide this auditor with a fillable example of "Reporting to Other Confinement Facility" memo which aligns with PREA Standard 115.63. This memo should be used by ADTC's facility head to inform other confinement facility heads when/if an ADTC inmate reports a sexual abuse incident which occurred at a previous confinement facility. This PREA auditor concluded that ADTC was not in compliance with PREA standard 115.63. Corrective Action was required.

During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective

	<p>actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) developed and submitted a fillable "PREA Allegation Notification Memo," which is used by each NJDOC Facility Administrator/designee to report an inmate's allegation of being sexually abused while at a previous facility. ADTC's Facility Administrator understands that ADTC must report within 72 hours of the reported allegation. Additionally, NJDOC's PCU submitted a "<b>Memo</b>" sent to each facility's staff from their Facility Administrator. The "<b>Memo</b>" stated, "As a reminder, any line staff member that receives a PREA Complaint from an IP must immediately report it to any custody staff member in the area. Thereafter, upon immediate receipt by any staff member of a PREA complaint that allegedly occurred in another State facility, County Facility, Halfway House, etc., the following actions shall be taken.</p> <p><i>The staff member receiving the complaint shall immediately notify their respective Supervisor/Department Head in writing via email. The Department Head shall immediately upon receipt of the information, notify the Administrator, Associate Administrator and the Institutional PREA Compliance Manager in writing via email. The Administrator, Associate Administrator or the Institutional PREA Compliance Manager will then notify the Special Investigation Division (SID). The Administrator will be responsible upon receipt of the information to notify the Administrator of the Institution where the complaint was said to have originated, in compliance with the applicable PREA Standard, copying SID as a point of contact for the other facility for future information, if needed. Please note that time is of the essence in relaying this information at every level so there shall be no delay in referring the matter up the chain of command, as specified in this email Directive."</i></p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.63.</p>
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115.64	Staff first responder duties
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.64. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.64. An excerpt states, "Upon initial receipt of a report or allegation of sexual abuse or sexual harassment, first responding Custody staff members must take the following steps:</p>

	<ul style="list-style-type: none"> <li>• <i>Immediately notify their supervisor;</i></li> <li>• <i>Separate the alleged victim and abuser;</i></li> <li>• <i>Preserve and protect the crime scene (if applicable) until SID arrives; and</i></li> <li>• <i>Request that the victim not take any action that could destroy evidence.</i></li> <li>• <i>Ensure that the victim receives prompt medical and psychological assistance from the appropriate healthcare providers.</i></li> </ul> <p>In cases of sexual abuse, if the alleged sexual abuse occurred within a time period that still allows for the collection of physical evidence, staff must request that the victim not take any actions that could destroy evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</p> <p>Additionally, if the alleged sexual abuse occurred within a time period that still allows for the collection of physical evidence, staff must establish, preserve and protect the crime scene until appropriate steps can be taken to collect evidence. Responsive staff needs to take reasonable measures to identify, isolate and separate witnesses.”</p> <p>This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.64.</p> <p>While on site, this auditor interviewed 28 randomly selected inmates. Each inmate shared that they felt comfortable informing staff of any PREA-related incident. This same interviewed 28 inmates equally shared that that staff protects vulnerable inmates and they immediately respond to any reports of inmate risk of sexual abuse or sexual harassment. This auditor also reviewed ADTC’s training Curriculum, which had all the first responder deliverables within its information. This auditor also interviewed a random selection of 17 specialized staff, contractors, and security staff. This auditor shared a scenario of a sexual assault occurring in the room area and the victim immediately runs out and reports the assault to the interviewed staff. There were 17 out of 17 interviewed staff who knew their first responder duties. All staff interviewed knew their roles from their initial response of separating and calling for assistance to crime scene preservation, suggesting/requesting inmates not to change clothing, use the toilet, or shower.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.64.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site</p>

documents/files reviewed and observations to determine compliance for Standard 115.65. Adult Diagnostic & Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as well as their "Coordinated Response Plan" dated May 24, 2024, as evidence of compliance with PREA Standard 115.65. An excerpt states, *"Any incarcerated person that claims they are the victim of sexual abuse will be protected from any further potential threat and they are also provided any immediate medical attention needed. First responders to an incident do not conduct any part of the investigation and - as detailed above for Standard 115.64 - their role is to protect the victim, separate the victim and alleged abuser and to protect and preserve the scene and any evidence that may exist at the scene or on the involved parties."*

*Once an allegation has been received and proper responsive and investigative staff notified, SID will immediately initiate an investigation and the following protocols will be followed:*

- *Victim protected/escorted to infirmary;*
- *Suspect (if known) is separated; Any known witnesses identified and separated;*
- *Crime scene (if known/applicable) secured;*
- *Notify the facility Administrator*
- *If information indicates a sexual assault may have occurred, SID will contact the appropriate county prosecutor's office for a determination if a Sex Crimes Kit/Sexual Assault Nurse Exam is warranted; and*
- *SANE/SAFE medical personnel will be activated by Prosecutors' Office.*

*The respective county Prosecutor's office will also advise if they will be actively or passively involved, where applicable."*

This auditor reviewed "NJDOC's Policy PCS.001.008" and the "Coordinated Response Plan" and concluded that it has the necessary language to align with PREA Standard 115.65.

While on site, this auditor also interviewed 17 specialized staff, contractors, and security staff. This auditor shared a scenario of a sexual assault occurring in the room area and the victim immediately runs out and reports the assault to the interviewed staff. One hundred percent of staff interviewed (17 of the 17) knew their first responder duties. There were consistent responses from separating and calling for assistance to crime scene preservation and suggesting/requesting inmates not to change clothing, use the toilet, or shower. Furthermore, this auditor asked each specialized staff interviewed (medical, mental health, facility supervisory, Institutional PREA Compliance Manager, etc.) their coordinated responsibilities if an inmate is sexually abused while there are on duty (not the 1st Responder). Each member of staff knew their coordinated responsibilities.

Finally, while on site, this auditor interviewed 2 Special Investigations Division (SID) investigators. Each knew their coordinated response once a report is assigned to them as the primary investigator. This auditor reviewed NJDOC's "Internal

	<p>Management Procedure #ADM.SID.035 Policy. An excerpt states, <i>“Investigations may be initiated through referrals from the Commissioner or other executive staff, as well as from other law enforcement agencies, in addition to being initiated by the Special Investigations Division upon receipt of information that a violation may have occurred.”</i></p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.65.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.66. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.66. This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.66.</p> <p>This PREA Auditor interviewed the NJDOC Commissioner, NJDOC PREA Coordinator, and one of Mid-State Correctional Center’s Police Benevolent Association (PBA) representatives that shared that officers are separated from their post and inmate pending the outcome of an investigation. NJDOC maintains a protocol that requires the facility head to request and receive approval from the Director before reassignment is completed. This auditor reviewed the <i>“New Jersey State Policemen’s Benevolent Association Local No. 105”</i> agreement that states such reassignment or transfer possibilities on page 4 section C.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA Standard 115.66.</p>

115.67	Agency protection against retaliation
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System</p>

(OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.67. Adult Diagnostic & Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.67. An excerpt states, "NJDOC protects all incarcerated persons and staff from retaliation for reporting sexual abuse, sexual harassment or for cooperating with investigations. The IPCM is responsible for monitoring retaliation of all PREA allegations."

*If an individual who cooperates with an investigation expresses a fear of retaliation, or there is a suggestion of possible retaliation, any evidence of possible retaliation must be referred to SID for investigation and the IPCM notifies the Agency PREA Coordinator or designee. The IPCM at the institution where the incarcerated person resides shall monitor incarcerated person disciplinary reports, housing or program changes, staff and incarcerated person performance reviews and reassignments for staff to determine if there is any suggestion of possible retaliation. Anyone who does retaliate against a staff member or an incarcerated person who has reported an allegation of sexual abuse or sexual harassment in good faith shall be subject to disciplinary action.*

*The NJDOC employs multiple protection measures against potential retaliation. Protection measures are utilized on an individualized basis. They include but are not limited to: housing changes or transfers for incarcerated person abusers, constant video surveillance with audio recording, removal of alleged staff or incarcerated person abusers from contact with victims, and emotional support services for incarcerated persons or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.*

*Retaliation monitoring shall be an ongoing process for 90 days post allegation. NJDOC requires at least 2 face to face meetings and 2 paper reviews to be conducted within those 90 days. These must be done on separate instances, with one face to face and one paper review being in the first 45 days and one face to face and one paper review in the second 45 days. All four reviews must be conducted for each individual.*

- Paper reviews include reviewing of disciplinary reports, program changes, housing changes, performance evaluations, staff reassignments and JPay inquiries/grievances.*
- Each face to face meeting must have signature of staff or incarcerated person located on the 2nd page. Refusal of incarcerated persons to sign the form will be documented. IPCM signature is required at the end of the 90 days.*
- If retaliation is found and cannot be corrected within the 90 days, continued monitoring is expected in 30 day intervals until the retaliation is addressed and resolved."*

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.67.

While on site, this auditor interviewed 2 Special Investigations Division (SID) PREA Investigators, as well as the Institutional PREA Compliance Manager/Asst. Superintendent. The IPCM affirmed that he was responsible for completing retaliation monitoring for the facility. Additionally, this auditor reviewed an email alert sent out by NJDOC's "Central Management Information System (CMIS)." This email alert was submitted to this auditor as evidence of compliance. This email alert was identified as "PREA Incident Alerts 45 Day Reminder." This email alert was sent out to the facility's IPCM/Asst. Superintendent. An excerpt from this alert stated, *"The IPCM where the inmate resides must complete the "Retaliation Monitoring Form" at 45 and 90 days after the date of the report of sexual abuse/sexual harassment. The completed form must be posted to the facility's I-Drive under the standard 115.67."*

This auditor requested to see completed SID PREA Investigations within the last 12 months. ADTC submitted 3 completed SID investigations (3 Harassment/Unsubstantiated). Of the 3 reviewed investigations submitted, all had documented "Retaliation Monitoring Forms" completed. All "Retaliation Monitoring Forms" had boxes checked for program reviews, disciplinary report reviews, etc. as well as the box checked confirming that "face-to-face check-ins occurred. However, this auditor interviewed 28 randomly selected inmates. There were 12 out of 28 inmates who reported that they do not report PREA-related incidents against staff in fear of being retaliated against. They further shared that these retaliations come in forms of more frequent random frisk searches or being transferred to the Restorative Housing Unit, which they believe is a less desirable housing unit within the facility. Finally, this auditor conducted separate interviews with 2 SID investigators and an ADTC Associate Administrator. Both shared that ADTC's Administrator makes the decision as to whether an ADTC officer will be removed from their post, pending the outcome of an investigation. According to PREA Standards, the alleged victim and the alleged perpetrator are to be separated, pending the outcome of the investigation. It should not be an Administration-based decision to separate or not.

This auditor recommended that ADTC conduct a "Refresher Training" with ADTC Staff, Administration, and SID Investigators on the purpose of 115.67's retaliation monitoring, the detailed components which entails retaliation monitoring, who can receive retaliation monitoring, the negative impacts of retaliation on ADTC's overall facility's culture, the impacts of loss of trust in reporting on inmates and staff alike, why the alleged victim and alleged staff perpetrator should be separated pending the outcome of an investigation to avoid direct/indirect retaliation. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.67. Corrective Action was required.

During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted ADTC's "PREA Standard 115.67/ Retaliation" training refresher memo/script from ADTC's 1) staff Associate Administrator, directing all ADTC Shift Lieutenants to conduct "Daily Recap

	<p><i>Refreshers” for each shift daily, for 7 consecutive days. The “Daily Recap Refreshers” focused on: “1) The agency’s responsibility to protect inmates and staff who report sexual abuse or sexual harassment, or cooperate with related investigations, from retaliation by other inmates, staff, 2) A designated staff member or department will be responsible for monitoring retaliation, 3) the various protection measures the agency will utilize such as housing changes, transferring an inmate, removing the alleged staff from contact with the victims, providing access to/offering emotional support services, and 4) reminding staff that retaliation is a serious concern in correctional facilities and creating a strong detection and monitoring system for these issues, and supporting an effective reporting system is important. All staff should remain aware of the importance of upholding the requirements of PREA Standard 115.67, to continue to enhance the overall safety and security of the facility.”</i></p> <p>NJDOC’s PREA Compliance Unit also submitted ADTC’s 7-day staff roster (each roster per shift, covering 3 shifts) for the dates of 5/1/25 through 5/07/25, as well as the “Daily Recap Refresher” topics aligning with this PREA Standard.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA Standard 115.67.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.68. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.68. This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.68.</p> <p>While on site, this auditor interviewed ADTC’s IPCM/Assistant Superintendent and ADTC’s Associate Administrator. Each were consistent that involuntary protective custody/segregation is not used at ADTC for inmates who report victimization unless requested. This auditor also interviewed 28 randomly selected inmates. Each inmate shared that ADTC does not utilize protective custody or segregated housing when an inmate reports abuse. Finally, during the site visit, this auditor conducted an exhaustive site assessment and observed segregated housing/Restorative Housing Unit (RHU), but the Correctional Officers interviewed on post stated that those housed in that area were solely due to behavioral issues within the facility.</p> <p>This auditor concludes that ADTC is in compliance with PREA Standard 115.68.</p>



115.71	Criminal and administrative agency investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.71. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.71. An excerpt states, <i>“NJDOC SID accepts and investigates all verbal, written, and anonymous reports of sexual abuse, misconduct and harassment. NJDOC staff, contract employees and volunteers who witness or receive information concerning alleged sexual assault or harassment between incarcerated persons or incarcerated persons and staff must immediately report all allegations including third party reports, anonymous reports, and prisoner grievances, to custody staff, IPCM, SID or shift supervisor.</i></p> <p><i>All PREA allegations of sexual abuse/sexual harassment are reported to Administration and SID promptly, but at all times within 12 hours of receipt of the report or incident, for review, response and investigation.</i></p> <p><i>The departure of the alleged abuser or victim from NJDOC employment or from an NJDOC facility does not provide a basis for terminating an investigation. Administrative investigations will be completed regardless of the results of any criminal investigations and regardless of the subject’s continued employment by NJDOC or residency at an NJDOC facility.”</i></p> <p>This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.71.</p> <p>This PREA auditor also reviewed “NJDOC’s Coordinated Response Plan,” which discusses the conduct of Administrative and Criminal PREA Investigations. This auditor also confirmed that the Special Investigations Division (SID) is certified and qualified to conduct PREA investigations for ADTC.</p> <p>While on site, this auditor interviewed 2 SID PREA Investigators. ADTC’s Institutional PREA Compliance Manager submitted copies of their PREA Investigator’s Specialized Training through the National Institute of Corrections (NIC). Each interviewed investigator knew their responsibilities regarding evidence collection, Miranda/Garrity rights, interviewing procedures, retaliation monitoring, and report-writing protocols. Furthermore, the investigative team shared that they are the entity within the department that is qualified to conduct criminal investigations as each investigator in the Special Investigations Division undergoes extensive correctional academy training as well as prosecutor/law enforcement academy training to become law enforcement</p>

officials and possess arresting authority.

This auditor requested to see completed SID PREA Investigations within the last 12 months. ADTC submitted 3 completed SID investigations (3 Harassment/Unsubstantiated). The 3 reviewed investigation files submitted were neatly organized, had detailed and robust content from initial incident and interviews to evidence identification and video review. Furthermore, the investigation reports had a detailed summary of the investigation, however the primary investigator was not allowed to determine the investigation's outcome/conclusion (substantiated, unsubstantiated, or unfounded) and recommendations.

This auditor also interviewed the ADTC's SID Principal Investigators, SID PREA Liaison, IPCM, and NJDOC PREA Coordinator. Each shared that the assigned primary SID Investigator completes the investigation, however, is not allowed to make a determination on the investigation. Rather, the assigned primary investigator completes the investigation, then meets with the SID Principal Investigator to review the investigation. After this SID review meeting, these specialized trained SID investigators are still not allowed to make a determination of the investigation. The SID investigators then forward the reviewed report to the ADTC's Facility Administrator to review and provide the preponderance of evidence conclusion/determination. This auditor noted that ADTC's Facility Administrator is not a specialized trained investigator and does not have the insightful engagement in the investigative process that the trained investigator has (video review, evidence view, direct interviews with witnesses, alleged victim, alleged perpetrator, etc.). The Administrator solely reviews the written report then makes a final determination on the investigation. This takes away the unbiased decision-making that is provided by SID. SID Investigators are not closely involved with ADTC. ADTC's Administrator is closely involved, thus creating possible subjectivity in determinations.

Additionally, NJDOC's SID PREA Investigator shared that the Sexual Abuse Advisory Council (SAAC), reviews this already twice reviewed investigation again, and can change the preponderance of evidence determination at the SAAC meeting as well. NJDOC's SID Principal Investigator or Compliance, PREA Coordinator, and Regional PREA Compliance Manager concurred with the SID PREA Investigator. They shared that the SAAC reviews the incident again and can overturn the decision of investigative preponderance of evidence findings.

This auditor recommended that NJDOC SID provide the recommended conclusion/determination of PREA Administrative Investigations, due to SID having been specialized trained. This auditor would accept documented evidence from ADTC that their Facility Administrator and Associate Administrator received specialized training to make the final preponderance of evidence conclusion/determination of PREA Administrative Investigations. This PREA Auditor concluded that ADTC was not in compliance with PREA Standard 115.71. Corrective action was required.

During ADTC's onsite audit, ADTC was unable to produce evidence that ADTC's Facility Administrator received specialized investigator's training to provide a final preponderance of evidence determination. However, during their Corrective Action

	<p>Period, NJDOC's Regional PREA Coordinator and PREA Compliance Unit (PCU) submitted <i>"Preponderance of Evidence"</i> specialized investigations training acknowledgement for ADTC's Facility Administrator, as evidence of compliance with this PREA standard. Furthermore, NJDOC's PREA Coordinator submitted the <i>"Preponderance of Evidence"</i> PowerPoint training curriculums (78 slides), facilitated by <i>"The Moss Group,"</i> which contained investigative definitions, preponderance of evidence discussions and interactive scenarios/exercises.</p> <p>This PREA Auditor concludes that ADTC is in compliance with PREA Standard 115.71.</p>
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115.72	Evidentiary standard for administrative investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.72. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.72. An excerpt states, <i>"As indicated above, NJDOC assigns to the SID the responsibility of investigating all potential illegal activities and violations by incarcerated persons, staff and any other individuals who visit NJDOC facilities, including allegations of sexual abuse and sexual harassment. NJDOC training supports the criteria of a "preponderance of evidence" for implementing administrative investigations.</i></p> <p><i>In general terms, the "preponderance of evidence" threshold is achieved through a determination that the facts as presented by the investigation are more likely than not to be true. In most cases, this means that there must be at least a 51 percent likelihood that the facts are true."</i></p> <p>This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.72.</p> <p>This PREA auditor also reviewed <i>"NJDOC's Coordinated Response Plan,"</i> which discusses the conduct of Administrative and Criminal PREA Investigations. This auditor also confirmed that the Special Investigations Division (SID) is certified and qualified to conduct PREA investigations for ADTC.</p> <p>While on site, this auditor interviewed 2 SID PREA Investigators. ADTC's Institutional PREA Compliance Manager submitted copies of their PREA Investigator's Specialized Training through the National Institute of Corrections (NIC). Each interviewed investigator knew their responsibilities regarding evidence collection, Miranda/Garrity</p>

	<p>rights, interviewing procedures, retaliation monitoring, and report-writing protocols. This auditor requested to see completed SID PREA Investigations within the last 12 months. ADTC submitted 3 completed SID investigations (3 Harassment/Unsubstantiated). The 3 reviewed investigation files submitted were neatly organized, had detailed and robust content from initial incident and interviews to evidence identification. Furthermore, the investigation reports had a detailed summary of the investigation, preponderance of evidence conclusion (substantiated, unsubstantiated, or unfounded), and recommendations.</p> <p>This PREA Auditor concludes that ADTC is in compliance with PREA Standard 115.72.</p>
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<b>115.73 Reporting to inmates</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.73. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.73. An excerpt states, <i>"Following an incarcerated person's allegation that a staff member has committed sexual abuse against the incarcerated person, the IPCM shall subsequently inform the victim in writing whenever the accused staff member is transferred, no longer employed at the facility, or has been indicted and/or convicted. In cases in which the alleged abuser is an incarcerated person at the facility, the incarcerated person victim is to be notified when the alleged incarcerated person has been indicted and/or convicted on a charge related to sexual abuse in the facility, as applicable and available. A copy of the signed Notification form, or documented refusal to sign, is maintained by the IPCM and placed in Folder 115.73 on the DOCNet I-drive"</i></p> <p><i>All notifications shall be documented. Furthermore, the incarcerated person is informed of the investigation results through the Sexual Abuse Investigation Disposition form, which is produced by the Central Office PREA Compliance staff at the conclusion of the central office SAAC review. The form is sent to the IPCM. The IPCM obtains a signature from, and provides a copy of the form to, the incarcerated person. A copy of the signed form, or documented refusal to sign, is maintained by the IPCM and placed in Folder 115.73 on the DOCNet I-drive.</i></p> <p><i>Regardless of which facility the alleged PREA violation occurred, it is the responsibility of the respective IPCM at the facility where the victim is housed at the time the</i></p>

	<p><i>Notification or Disposition form has been produced (including those incarcerated persons housed at an RCRP facility) to issue and request signature of the incarcerated person."</i></p> <p>This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.73.</p> <p>While on site, this auditor interviewed 2 SID PREA Investigators. ADTC's Institutional PREA Compliance Manager submitted copies of their PREA Investigator's Specialized Training through the National Institute of Corrections (NIC). Each interviewed investigator knew their responsibilities regarding evidence collection, Miranda/Garrity rights, interviewing procedures, retaliation monitoring, and report-writing protocols. This auditor requested to see completed SID PREA Investigations within the last 12 months. ADTC submitted 3 completed SID investigations (3 Harassment/Unsubstantiated). The 3 reviewed investigation files submitted were neatly organized, had detailed and robust content from initial incident and interviews to evidence identification. Both investigations contained their completed "<i>NJDOC Sexual Abuse Investigation Disposition Report</i>," which notifies the inmate of the outcome of the investigation Furthermore, the investigation reports had a detailed summary of the investigation, preponderance of evidence conclusion (substantiated, unsubstantiated, or unfounded), and recommendations.</p> <p>This PREA Auditor concludes that ADTC is in compliance with PREA Standard 115.73.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.76. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.76. An excerpt from NJDOC "Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008 section 115.76 states, "<i>(a) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. (b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. (c) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually 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</i></p>

	<p><i>imposed for comparable offenses by other staff with similar histories.”</i></p> <p>This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.76.</p> <p>This auditor also interviewed NJDOC’s Commissioner as well as ADTC’s Institutional PREA Compliance Manager/Asst Superintendent, who universally shared NJDOC’s Employee Termination Policy in response to substantiated outcomes of sexual abuse and sexual harassment investigations which can range in various forms of disciplinary actions, up to termination and criminal referral.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.76.</p>
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115.77	Corrective action for contractors and volunteers
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.77. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” and the Internal Management Procedure PCS.001.VOL.001 “Volunteer Services” as evidence of compliance with PREA Standard 115.77. An excerpt from NJDOC’s PREA Policy PCS.001.008 states, <i>“The NJDOC reserves the right to terminate the services of a volunteer for reasons detailed within Internal Management Procedure PCS.001.VOL.001 Volunteer Services. With regards to PREA, the Internal Management Procedure specifically states:</i></p> <ul style="list-style-type: none"> <li><i>• All volunteers must comply with the NJDOC’s zero tolerance of sexual assault policy;</i></li> <li><i>• Any volunteer who engages in sexual abuse shall be prohibited from contact with incarcerated persons and shall be reported to law enforcement agencies if such action constitutes a crime, and to relevant licensing bodies;</i></li> <li><i>• All volunteers are required to immediately report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against incarcerated persons or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation; and</i></li> <li><i>• The NJDOC shall take appropriate remedial measures and consider whether to prohibit further contact with incarcerated persons in the case of a violation of agency zero tolerance sexual abuse/sexual harassment policies.”</i></li> </ul>



	<p>This auditor reviewed “NJDOC’s Policy PCS.001.008” and “Internal Management Procedures PCS.001.VOL.001” and concluded that it has the necessary language to align with PREA Standard 115.77.</p> <p>While on site, this auditor also interviewed NJDOC’s Commissioner and ADTC’s Institutional PREA Compliance Manager/Asst. Superintendent who individually shared that the extent of NJDOC’s disciplinary actions for contractors and volunteers are based on the incident and review of actions NJDOC has historically taken with similar infractions. Each interviewed universally shared NJDOC’s Employee Termination Policy in response to substantiated outcomes of sexual abuse and sexual harassment investigations which can range in various forms of disciplinary actions, up to termination and criminal referral.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.77.</p>
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115.78	Disciplinary sanctions for inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.78. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.78. An excerpt states, <i>“Incarcerated persons shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the incarcerated person engaged in incarcerated person on incarcerated person sexual abuse/harassment or following a criminal finding of guilt for incarcerated person on incarcerated person sexual abuse/harassment. Any incarcerated person who violates the zero tolerance of sexual abuse/sexual harassment shall be subject to incarcerated person discipline in accordance with N.J.A.C. 10A:4 Incarcerated person Discipline. Additionally, pursuant to N.J.A.C. 10A:4-4.2, all prohibited acts that may constitute crimes of the first (including aggravated sexual assault), second (including sexual assault), third or fourth degree under the Criminal Code of the State of New Jersey (N.J.S.A. 2C:1-1 et seq.) shall be referred to the prosecutor of the county in which the correctional facility is located.</i></p> <p><i>Such discipline is applied via a formal disciplinary process following an administrative finding that the incarcerated person engaged in incarcerated person-on-incarcerated person sexual abuse/harassment or following a criminal finding of guilt for incarcerated person-on-incarcerated person sexual abuse/harassment.</i></p>

*In the case where incarcerated persons who have been found guilty of misconduct related to sexual abuse in a facility that offers sex offender treatment programs, the Administrator or appropriate designee shall refer the incarcerated person to the sex offender treatment program staff for evaluation to determine whether or not the incarcerated person is appropriate for the program, and if the incarcerated person will be required to complete the program as part of the sanctions or as a condition to access programming or other benefits.*

*A report of sexual abuse or harassment made in good faith, based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish sufficient evidence to substantiate the allegation. If an investigation reveals that an incarcerated person, staff member, contractor or volunteer knowingly made a false allegation or a false material statement, the Department may take appropriate disciplinary action and/or refer the matter for criminal action.*

*Although Incarcerated person on incarcerated person consensual sex is not considered sexual abuse or a PREA violation, it is prohibited conduct at NJDOC facilities and is subject to discipline in accordance with N.J.A.C. 10:A Chapter 4 Inmate Discipline.”*

This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.78.

This auditor interviewed 28 inmates and asked about ADTC’s rules and sanctions for inmate-on inmate sexual abuse or sexual harassment. Inmates were clear that sexual abuse and sexual harassment is not tolerated at ADTC. Each interviewed inmate stated that sexual abuse is not tolerated and is a **“LEVEL A”** infraction. This auditor reviewed in the “Facility Handbook” to see what sanctions are connected to a **“LEVEL A”** infraction, The handbook stated, **“DISCIPLINE PROGRAM (N.J.A.C. 10A-4):** The primary purpose of the Discipline Program is to ensure compliance with the requirements of correctional facility programs and the behavioral standards and limitations imposed by the Administration and NJDOC. An IP who commits a prohibited act(s) shall be subject to disciplinary action and a sanction that is imposed by a Disciplinary Hearing Officer designated by the Commissioner.

Finally, this PREA auditor interviewed ADTC’s Institutional PREA Compliance Manager/ Asst. Superintendent who shared ADTC’s protocol on substantiated inmate-on-inmate sexual abuse investigations. They were aligned with policy on inmate sanctions for sexual abuse/sexual harassment, sharing 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. ADTC’s IPCM also shared that the disciplinary committee do take into consideration any diagnosed/documented mental health history/mental disabilities prior to making sanction determinations.

This PREA auditor concludes that ADTC is in compliance with PREA standard 115.78.



115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 338 1461 913">This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.81. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.81. An excerpt states, <i>“As stated in the Electronic Medical record (EMR) Multidimensional Sexual Victimization and Abusiveness Risk Assessment Checklist, if the screening checklist indicates that an incarcerated person has experienced prior victimization, whether it occurred in an institutional setting or in the community, healthcare staff will ensure that the incarcerated person is referred to be seen for a follow up medical or mental health meeting within 14 days of the screening intake.</i></p> <p data-bbox="256 954 1477 1193"><i>As stated in the EMR Multidimensional Sexual Victimization and Abusiveness Risk Assessment Checklist, if the screening checklist indicates that an incarcerated person Page 60 of 74 has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, healthcare staff will ensure the incarcerated person is referred to be seen for a follow up mental health meeting within 14 days of the screening intake.</i></p> <p data-bbox="256 1234 1473 1350"><i>NJDOC offers specific interventions for incarcerated persons, whether male or female, who have experienced sexual assault. These interventions are offered through a licensed mental health clinician employed by the NJDOC health services vendor.</i></p> <p data-bbox="256 1391 1461 1507"><i>Informed consent is a part of the EMR Multidimensional Sexual Victimization and Abusiveness Risk Assessment Checklist. Medical and mental health practitioners ask for consent to allow the reporting of this information to NJDOC.”</i></p> <p data-bbox="256 1547 1481 1619">This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.81.</p> <p data-bbox="256 1659 1469 2067">While on site, this auditor interviewed the Institutional PREA Compliance Manager (IPCM)/Assistant Superintendent, and the Clinical Supervisor explained the process of obtaining the inmate’s risk of victimization and abusiveness history information. During the interview the IPCM shared that Garden State Correctional Facility is the Assessment Hub for the male inmates committed to the NJDOC. This exhaustive screening process entails screener observations, inmate self-report and a “<i>receiving chart</i>” review which aligns with 115.41. ADTC is unique in that all inmates receive a mental health screening upon intake. The mental health team conducts all PREA Initial Screenings upon arrival for those committed to the program. Those who come into the program voluntarily receive a transfer screening from the medical</p>

department. Upon completion of their initial screening, they receive a PREA risk score and status.

This auditor then interviewed the Medical Nurse Manager who administers ADTC's "PREA Transfer Screening" tool for inmates who voluntarily enter the program. They shared that upon arrival to the transferred facility, the facility medical staff conducts a Transfer PREA Screening within 72 hours of inmate arrival and it is based on four self-report questions. Based on the inmate response to these questions, the ADTC's Medical Electronic Screening allows the inmates self-reported response to override Garden State's initial PREA screening outcome. This auditor reviewed this screening tool which had the following questions therein:

1. *Does the inmate report being sexually abused by others in the past? If yes, does the inmate verbally consent to allow the reporting of this information to NJDOC?*
2. *Does the inmate report currently being sexually abuse by others?*
3. *Does the inmate report being sexually abusive towards others in the past?*
4. *Does the inmate report currently being sexually abusive towards others?*

This auditor does not believe the 4 above questions alone gather enough information to close the gap to provide enough information to guide programming assignments, education, work, housing and bedding decisions. Additionally, the system should not override the initial PREA risk level and status based on inmate self-reporting. This skews the scoring process making it less reliable with the possibility of inaccuracy when considering an inmate's risk level and status.

This auditor asked the Medical Nurse Manager, *"What happens when an inmate answers "yes" to any of the questions on the assessment screening that identifies the inmate as having a history of being a victim or predatory?"* ADTC's Nurse Manager shared that she shares the information with the Clinical Supervisor. This auditor further shared that there should be a referral to mental health staff for a follow-up meeting with the inmate within 14 days of the intake screening. This auditor also shared that risk screening reassessments should also be completed within 30-days of intake. This auditor requested evidence of the 30-day reassessment screenings but did not receive them while onsite and could not determine compliance.

This auditor also interviewed the Clinician Supervisor who discussed the mental health team's role in the screening process. This auditor further shared PREA Standards 115.41, 115.42, and 115.81 and how medical and mental health work together to ensure that the PREA screening process is done in its entirety. The Clinician Supervisor did not confirm whether 14-day follow-ups were being received or completed by his team but stated that follows up do occur.

This auditor recommended that ADTC coordinate adjustments to their Intake procedures to add 14-day follow-up referrals to mental health staff to conduct follow-up meetings with inmates who have a history of sexual victimization or sexual abusiveness. This referral from intake should be submitted immediately, concluding the "PREA Transfer Screening" tool, and the follow-up meeting with mental health

	<p>should be within 14-days of the conclusion of the <i>“PREA Transfer Screening.”</i> Additionally, this auditor recommended that 14-day follow-up documentation should show that the follow-up meetings were a result of the <i>“PREA Transfer Screening.”</i></p> <p>Finally, this auditor recommended that ADTC establish and demonstrate consistency in practice before compliance can be determined. This PREA auditor concluded that ADTC was not in compliance with PREA standard 115.81. Corrective Action was required.</p> <p>During ADTC’s Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC’s PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC’s PREA Compliance Unit (NJDOC’s PREA Coordinator and 2 Regional PREA Compliance Managers) submitted 51 of ADTC’s most recent selected <i>“PREA Monitoring”</i> mental health electronic follow-up clinician notes. Each electronic follow-up clinician note documented the inmate’s PREA Status (victim, perpetrator, neither), if the inmate has history of sexual victimization or sexual perpetration from the screening, the date of screening, the date of the session, the purpose of the session, and any further follow-ups determined. Finally, each of the 51 randomly selected follow-ups were within the required 14-day threshold.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.81.</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.82. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.82. An excerpt states, <i>“As codified at N.J.A.C.10A:16-2.10 Emergency medical treatment, emergency medical care shall be available to incarcerated persons 24 hours per day, seven days per week. General emergency response procedures for all medical emergencies within the NJDOC prison system are described in MED.EME.005 Emergency Response. MED.MLI.007 Sexual Assault establishes specific procedures to ensure that NJDOC healthcare staff is able to respond immediately and appropriately to allegations of prison sexual assault or abuse. Healthcare staff shall follow the institution’s written plan for responding to allegations of sexual assault or abuse of incarcerated persons.</i></p>

*All incarcerated individuals under the jurisdiction of the NJDOC have access to twenty-four-hour emergency mental health services in order to ensure provisions of care in the event of an unexpected or acute mental health problem, or a crisis that cannot be deferred to the next available scheduled service. See MED.MHS.002.001 Emergency Mental Health Services.*

*In the case of a PREA victim, mental health services are available prior to transport to an emergency facility and following an incarcerated person's return to the facility. Prior to the transport, the mental health staff will assess the incarcerated person's suicide risk and ability to proceed with forensic interventions. They will also provide supportive counseling and may consult psychiatry, if needed.*

*Incarcerated victims of sexual abuse shall be offered timely information and access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. Victims of sexual abuse while incarcerated in any facility shall also be offered testing for sexually transmitted infections, as medically appropriate.*

*Per Internal Management Procedure MED.IMHC.010 Co-Pay for Eligible Health/Dental Care sexual abuse emergency services for incarcerated persons are excluded from a copayment requirement. Signs are posted in all facilities with details on the process for accessing healthcare and mental health services, both in emergent and non-emergent situations."*

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.82.

While onsite, this auditor conducted an exhaustive site assessment of ADTC's medical triage area. Due to spacing and onsite resources, this area is only equipped to manage peripheral medical needs and dental services. ADTC's Onsite Nurse Manager/RN also shared that the medical team picks up inmate "sick call forms" at minimum once daily by the nurse on duty and inmate are seen within 24 hours. Decisions are made based on the team's professional judgements. She further stated that inmate victims are informed about emergency contraception by the local hospital and receive follow-up by ADTC's medical team.

This auditor interviewed the onsite contracted Nurse Manager/RN and contracted Clinical Supervisor. Both shared that they work to ensure that the inmate victims receive appropriate medical and mental health care, as well as emotional support provisions.

ADTC's onsite contracted Nurse Manager/RN further shared that inmate victims of sexual abuse receive unimpeded access to medical services with community partner hospitals such as Robert Wood Johnson Hospital or JFK, for acute/serious medical services. Finally, ADTC's contracted Nurse Manager/RN and Clinical Supervisor shared that medical, mental health, and crisis intervention services are provided to the victims of sexual abuse without financial cost.

Finally, this auditor interviewed a random selection of 28 inmates, asking about the

	<p>effectiveness of medical and mental health care. All 28 inmates shared positive responses about the provision of services by ADTC medical. There was consistency in responses that the “sick call” requests turnaround time is within 24 hours.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.82.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.83. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.83. An excerpt states, <i>“As codified at N.J.A.C.10A:16-2.10 Emergency medical treatment, emergency medical care shall be available to incarcerated persons 24 hours per day, seven days per week. General emergency response procedures for all medical emergencies within the NJDOC prison system are described in MED.EME.005 Emergency Response. MED.MLI.007 Sexual Assault establishes specific procedures to ensure that NJDOC healthcare staff is able to respond immediately and appropriately to allegations of prison sexual assault or abuse. Healthcare staff shall follow the institution’s written plan for responding to allegations of sexual assault or abuse of incarcerated persons.</i></p> <p><i>All incarcerated individuals under the jurisdiction of the NJDOC have access to twenty-four-hour emergency mental health services in order to ensure provisions of care in the event of an unexpected or acute mental health problem, or a crisis that cannot be deferred to the next available scheduled service. See MED.MHS.002.001 Emergency Mental Health Services.</i></p> <p><i>In the case of a PREA victim, mental health services are available prior to transport to an emergency facility and following an incarcerated person’s return to the facility. Prior to the transport, the mental health staff will assess the incarcerated person’s suicide risk and ability to proceed with forensic interventions. They will also provide supportive counseling and may consult psychiatry, if needed.</i></p> <p><i>Incarcerated victims of sexual abuse shall be offered timely information and access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. Victims of sexual abuse while incarcerated in any facility shall also be offered testing for sexually transmitted</i></p>

	<p><i>infections, as medically appropriate.</i></p> <p><i>Per Internal Management Procedure MED.IMHC.010 Co-Pay for Eligible Health/Dental Care sexual abuse emergency services for incarcerated persons are excluded from a co payment requirement. Signs are posted in all facilities with details on the process for accessing healthcare and mental health services, both in emergent and non-emergent situations."</i></p> <p>This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.83.</p> <p>While onsite, this auditor conducted an exhaustive site assessment of ADTC's medical triage area. Due to spacing and onsite resources, this area is only equipped to manage peripheral medical needs and dental services. ADTC's Onsite Nurse Manager/RN also shared that the medical team picks up inmate "sick call forms" at minimum once daily by the nurse on duty and inmate are seen within 24 hours. Decisions are made based on the team's professional judgements. She further stated that inmate victims are informed about emergency contraception by the local hospital and receive follow-up by ADTC's medical team.</p> <p>This auditor interviewed the onsite contracted Nurse Manager/RN and contracted Clinical Supervisor. Both shared that they work to ensure that the inmate victims receive appropriate medical and mental health care, as well as emotional support provisions.</p> <p>ADTC's onsite contracted Nurse Manager/RN further shared that inmate victims of sexual abuse receive unimpeded access to medical services with community partner hospitals such as Robert Wood Johnson Hospital or JFK, for acute/serious medical services. Finally, ADTC's contracted Nurse Manager/RN and Clinical Supervisor shared that medical, mental health, and crisis intervention services are provided to the victims of sexual abuse without financial cost. Additionally, the clinical team confirmed that they do offer and provide services to the perpetrator to discuss underlining triggers to current behaviors.</p> <p>Finally, this auditor interviewed a random selection of 28 inmates, asking about the effectiveness of medical and mental health care. All 28 inmates shared positive responses about the provision of services by ADTC medical. There was consistency in responses that the "sick call" requests turnaround time is within 24 hours.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.83.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

This PREA Auditor reviewed Adult Diagnostic & Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.86. Adult Diagnostic & Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.86. The NJDOC PCS.001.008 policy states, *"NJDOC has established multi-disciplinary Sexual Assault Advisory Councils (SAAC) which convenes at both the correctional facility and Departmental level. The SAAC's review all allegations and instances of sexual abuse/sexual harassment with the purpose of assessing and improving PREA prevention, detection and response. The purpose, composition and duties of the Sexual Assault Advisory Council (SAAC) are contained in the Internal Management Procedure PCS.001.PREA.001 Sexual Assault/PREA Advisory Council. Facility incident reviews shall convene within thirty (30) days of the conclusion of the investigation. SID shall present the completed investigation case for review at the SAAC meeting. These reviews are done for all allegations of sexual abuse and/or sexual harassment as defined by PREA."* This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.86.

While on site, this auditor interviewed ADTC's Institutional PREA Compliance Manager/Asst. Superintendent, and 2 SID Special Investigators who shared that ADTC conducts SAAC meetings at the conclusion of sexual abuse investigations (within 30 days, unless unfounded). This auditor requested to see completed SID PREA Investigations within the last 12 months. ADTC submitted 3 completed SID investigations (3 Harassment/Unsubstantiated). The 3 reviewed investigation files submitted were neatly organized, had detailed and robust content from initial incident and interviews to evidence identification. Furthermore, the investigation reports had a detailed summary of the investigation, preponderance of evidence conclusion (substantiated, unsubstantiated, or unfounded), inmate notifications, and recommendations.

This auditor also interviewed the ADTC's SID Principal Investigator, SID PREA Liaison, IPCM, and NJDOC PREA Coordinator. Each shared that the assigned primary SID Investigator completes the investigation, however, is not allowed to make a determination on the investigation. Rather, the assigned primary investigator completes the investigation, then meets with the SID Principal Investigator to review the investigation. After this SID review meeting, these specialized trained SID investigators are still not allowed to make a determination of the investigation. The SID investigators then forward the reviewed report to the ADTC's facility administrator to review and provide the preponderance of evidence conclusion/determination. This auditor noted that ADTC's Facility Administrator is not a specialized trained investigator and does not have the insightful engagement in the investigative process that the trained investigator has (video review, evidence view, direct interviews with witnesses, alleged victim, alleged perpetrator, etc.). The Administrator solely reviews the written report then makes a final determination on the investigation. This takes away the unbiased decision-making that is provided by SID. SID Investigators are not



	<p>closely involved with ADTC's day to day operations. ADTC's Administrator is closely involved, thus creating possible subjectivity in determinations.</p> <p>Additionally, NJDOC's SID PREA Investigator shared that the <i>Sexual Abuse Advisory Council (SAAC)</i>, reviews this already twice reviewed investigation again, and can change the preponderance of evidence determination at the SAAC meeting as well. NJDOC's SID Principal Investigator, PREA Coordinator, and Regional PREA Compliance Manager concurred with the SID PREA Investigator. They shared that the SAAC reviews the incident again and can overturn the decision of investigative preponderance of evidence findings.</p> <p>This auditor recommended that ADTC provide documented evidence that ADTC conducted a <i>Sexual Assault Advisory Council (SAAC)</i> meeting. If ADTC are not conducting SAAC meetings, this auditor recommends establishing multidisciplinary personnel to review concluded PREA sexual abuse investigations (excluding unfounded). ADTC's <i>Sexual Assault Advisory Council (SAAC)</i> meeting should review the sexual abuse incidents to see if the incident was motivated by policy or practice flaws, race and ethnicity, physical barriers, staffing levels, monitoring practice and technology flaws. Finally, this auditor recommended that ADTC establish and demonstrate consistency in practice before compliance could be determined. This PREA auditor concluded that ADTC was not in compliance with PREA standard 115.86. Corrective Action was required.</p> <p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted the 3 completed <i>Sexual Assault Advisory Council (SAAC)</i> meeting minutes from the most recent sexual abuse reviewed investigations. The "PREA Team Incident Review" documentation showed that the SAAC reviews the sexual abuse incidents to see if the incident was motivated by policy or practice flaws, race and ethnicity, physical barriers, staffing levels, video monitoring and technology flaws. Finally, the SAAC meeting was conducted within the 30-day timeframe required by this standard.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.86.</p>
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<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	This PREA Auditor reviewed Adult Diagnostic & Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA



	<p>Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.87. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.87. An excerpt states, <i>“NJDOC participates in federal data collection on the incidence of prison rape through the annual Survey of Sexual Victimization (SSV) as administered by the U.S. Department of Justice, Office of Justice Programs, and Bureau of Justice Statistics (BJS). As required by PREA, BJS collects information on the incidence of prison rape to aid correctional administrators in addressing the prevention, reporting, investigation and prosecution of such incidence. While the SSV does not require the inclusion of data for allegations of sexual abuse or harassment at contracted private facilities (RCRP’s), NJDOC does collect, review, maintain and include this data.</i></p> <p><i>The Annual PREA Report shall be approved by the Commissioner and posted on the NJDOC’s website by June 30 of each year.”</i></p> <p>This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.87.</p> <p>This PREA auditor reviewed NJDOC’s website: <a href="https://www.nj.gov/corrections/pages/PREA.html">https://www.nj.gov/corrections/pages/PREA.html</a> and was able to view <i>Adult Diagnostic &amp; Treatment Center’s 2021 and 2022 Annual Reports</i> but could not locate the annual report for 2023. This auditor was able to verify that uniformed data is collected and disseminated to the public in the reports reviewed. These annual reports also consisted of ADTC’s incident-based sexual abuse data collected annually. NJDOC’s PREA Coordinator was able to show how their data is collected and stored for audit, review, and corrective action purposes.</p> <p>This auditor recommended that NJDOC upload the annual report for the year 2023. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.87. Corrective Action was required.</p> <p>During ADTC’s Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC’s PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC’s PREA Compliance Unit (NJDOC’s PREA Coordinator and 2 Regional PREA Compliance Managers) submitted NJDOC’s <i>“2023 Annual Report of Sexual Victimization,”</i> which contains ADTC’s sexual abuse data, investigation/ outcomes, statistics, contributing factors, and corrective actions. Finally, this auditor was able to verify that NJDOC’s annual report has been published and disseminated to the public to review the report.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.87.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
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**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

This PREA Auditor reviewed Adult Diagnostic & Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.88. Adult Diagnostic & Treatment Center (ADTC) submitted their "NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008" as evidence of compliance with PREA Standard 115.88. An excerpt states, *"The SAAC review approach as detailed under 115.86, is additionally deployed in considering whether changes or improvements in environmental, procedural, staffing and monitoring technology factors are required. The SAAC issues Corrective Action Reports, if necessary, upon completion of the case review and monitors the implementation of recommended corrective actions. Recipients of a SAAC Corrective Action Report are required to review the recommendations and notify the PREA Agency Coordinator of their findings within four (4) weeks of receipt. The Departmental level SAAC reports to the NJDOC Commissioner, or designee, on matters reviewed by the committee."*

*NJDOC annually compiles and posts a Commissioner-level approved report of the Department's rate of sexual abuse/harassment on the official Department webpage. This annual report includes its findings and corrective actions for each facility, as well as the agency as a whole."*

This auditor reviewed "NJDOC's Policy PCS.001.008" and has concluded that it has the necessary language to align with PREA Standard 115.88.

This PREA auditor reviewed NJDOC's website: <https://www.nj.gov/corrections/pages/PREA.html> and was able to view *Adult Diagnostic & Treatment Center's 2021 and 2022 Annual Reports* but could not locate the annual report for 2023. This auditor was able to verify that uniformed data is collected and disseminated to the public in the reports reviewed. These annual reports also consisted of ADTC's incident-based sexual abuse data collected annually. NJDOC's PREA Coordinator was able to show how their data is collected and stored for audit, review, and corrective action purposes.

This auditor recommended that NJDOC upload the annual report for the year 2023. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.88. Corrective Action was required.

During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted NJDOC's *"2023 Annual Report of*

	<p><i>Sexual Victimization</i>,” which contains ADTC’s sexual abuse data, investigation/ outcomes, statistics, contributing factors, and corrective actions. Finally, this auditor was able to verify that NJDOC’s annual report has been published and disseminated to the public to review the report.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.88.</p>
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115.89	Data storage, publication, and destruction
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>This PREA Auditor reviewed Adult Diagnostic &amp; Treatment Center (ADTC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.89. Adult Diagnostic &amp; Treatment Center (ADTC) submitted their “NJDOC Prevention, Detection, and Response of Sexual Abuse and Harassment Policy PCS.001.008” as evidence of compliance with PREA Standard 115.89. This auditor reviewed “NJDOC’s Policy PCS.001.008” and has concluded that it has the necessary language to align with PREA Standard 115.89.</p> <p>This PREA auditor reviewed NJDOC’s website: <a href="https://www.nj.gov/corrections/pages/PREA.html">https://www.nj.gov/corrections/pages/PREA.html</a> and was able to view Adult Diagnostic &amp; Treatment Center’s 2021 and 2022 Annual Reports but could not locate the annual report for 2023. This auditor was able to verify that uniformed data is collected and disseminated to the public in the reports reviewed. These annual reports also consisted of ADTC’s incident-based sexual abuse data collected annually. NJDOC’s PREA Coordinator was able to show how their data is collected and stored for audit, review, and corrective action purposes.</p> <p>Finally, ADTC also reported that PREA-related sexual abuse data is stored and maintained for a minimum of 10 years (pursuant to 115.87). ADTC submitted their NJ-DOC’s Policy PCS.001.008 under 115.89 section states, <i>“NJDOC data is made available in accordance with the collection schedule established by the U.S. Department of Justice and is done in compliance with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations. (d) The agency shall 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. Pursuant to the established state Records Retention and Disposition Schedule, the retention of aggregated data is required for 10 years, and no personal identifiers are used in the compilation or disclosure of the Report. Destruction of any records shall be done in accordance with the latest Records Retention and Disposition Schedule.”</i></p>

	<p>This auditor recommended that NJDOC upload the annual report for the year 2023. This PREA auditor concluded that ADTC was not in compliance with PREA Standard 115.89. Corrective Action was required.</p> <p>During ADTC's Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and email correspondence with NJDOC's PREA Coordinator and PREA Compliance Unit (PCU). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, NJDOC's PREA Compliance Unit (NJDOC's PREA Coordinator and 2 Regional PREA Compliance Managers) submitted NJDOC's "2023 Annual Report of Sexual Victimization," which contains ADTC's sexual abuse data, investigation/ outcomes, statistics, contributing factors, and corrective actions. Finally, this auditor was able to verify that NJDOC's annual report has been published and disseminated to the public to review the report.</p> <p>This PREA auditor concludes that ADTC is in compliance with PREA standard 115.89.</p>
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115.401	Frequency and scope of audits
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>ADTC understands PREA Standard 115.401, which states, <i>"During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once."</i> ADTC plans to continue to have a PREA audit conducted every three years. This is ADTC's fourth PREA Facility Audit (Cycle 1, Cycle 2 and Cycle 3). The auditor had access to, and the ability to observe, all areas of the audited facility. The auditor was permitted to request and receive copies of any relevant documents. The auditor was permitted to conduct private interviews with inmates. The ADTC 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>This PREA auditor concludes ADTC is in compliance with PREA standard 115.401.</p>

115.403	Audit contents and findings
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p>

New Jersey Department of Corrections (NJ-DOC) submitted their NJDOC's website: <https://www.nj.gov/corrections/pages/PREA.html>. This auditor was able to view *Adult Diagnostic & Treatment Center's Cycle 1, Cycle 2, and Cycle 3 PREA Audit Final Reports*. This auditor was also able to see *Adult Diagnostic & Treatment Center's 2021 and 2022 Annual Reports*. This website is available for public viewing.

This PREA auditor concludes ADTC is in compliance with PREA standard 115.403.

**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
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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**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
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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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
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**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
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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
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**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
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**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
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	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.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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



<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	

	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
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	



	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.31 (a)</b>	<b>Employee training</b>	
	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
<b>115.31 (b)</b>	<b>Employee training</b>	
	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
<b>115.31 (c)</b>	<b>Employee training</b>	
	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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	

	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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	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
<b>115.33 (b)</b>	<b>Inmate education</b>	
	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
<b>115.33 (c)</b>	<b>Inmate education</b>	
	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
<b>115.33 (d)</b>	<b>Inmate education</b>	
	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
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	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
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	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

	Garrrity 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
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	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.)	
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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?	
<b>115.42 (a) Use of screening information</b>		
	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
<b>115.42 (b) Use of screening information</b>		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c) Use of screening information</b>		
	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?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	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.)	
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	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.)	na
	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.)	na
	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.)	na
<b>115.43 (c)</b>	<b>Protective Custody</b>	

	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
<b>115.43 (d) Protective Custody</b>		
	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
<b>115.43 (e) Protective Custody</b>		
	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
<b>115.51 (a) Inmate reporting</b>		
	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
<b>115.51 (b) Inmate reporting</b>		
	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.)	yes
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	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
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	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
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	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,	yes

	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
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	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
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	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?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	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
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	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	yes

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	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
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	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
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	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?	
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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?	
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse</b>	

	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

<b>115.87 (a)</b>	<b>Data collection</b>	
	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
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	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
<b>115.87 (d)</b>	<b>Data collection</b>	
	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
<b>115.87 (e)</b>	<b>Data collection</b>	
	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
<b>115.87 (f)</b>	<b>Data collection</b>	
	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
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	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?	
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

	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
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.403</b>	<b>Audit contents and findings</b>	



(f)	
	<div data-bbox="322 185 1273 555"> <p>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.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>