PREA Facility Audit Report: Final

Name of Facility: Otay Mesa Detention Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA **Date Final Report Submitted:** 04/24/2024

| Auditor Certification | | |
|---|--|---------|
| The contents of this report are accurate to the best of my knowledge. | | |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | | |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | | |
| Auditor Full Name as Signed: Jillian Shane Date of Signature: 04 | | 24/2024 |

| AUDITOR INFORMATION | | |
|----------------------------------|----------------------------|--|
| Auditor name: | Shane, Jillian | |
| Email: | jillianshane@sbcglobal.net | |
| Start Date of On- Site Audit: | 02/19/2024 | |
| End Date of On-Site Audit: | 02/23/2024 | |

| FACILITY INFORMATION | | |
|----------------------------|---|--|
| Facility name: | Otay Mesa Detention Center | |
| Facility physical address: | 7488 Calzada De La Fuente, San Diego , California - 92154 | |
| Facility mailing address: | | |

Primary Contact

| Name: | Jose Soto | | |
|-------------------|-------------------------|--|--|
| Email Address: | jose.Soto@corecivic.com | | |
| Telephone Number: | 619-671-8702 | | |

| Warden/Jail Administrator/Sheriff/Director | | |
|--|----------------------------------|--|
| Name: | Christopher LaRose | |
| Email Address: | Christopher.LaRose@corecivic.com | |
| Telephone Number: | 619-671-8701 | |

| Facility PREA Compliance Manager | | |
|----------------------------------|-----------------------------|--|
| Name: | Jose Soto | |
| Email Address: | Jose.Soto@corecivic.com | |
| Telephone Number: | O: 619-671-8700 | |
| Name: | Rupert Rivera | |
| Email Address: | rupert.rivera@corecivic.com | |
| Telephone Number: | O: 619-671-8700 | |

| Facility Health Service Administrator On-site | | |
|---|----------------------------------|--|
| Name: | Magdelena Gonzalez | |
| Email Address: | Magdelena.Gonzalez@corecivic.com | |
| Telephone Number: | 619-619-671-4046 | |

| Facility Characteristics | | |
|--|-----|--|
| Designed facility capacity: | 596 | |
| Current population of facility: | 361 | |
| Average daily population for the past 12 months: | 410 | |

| Has the facility been over capacity at any point in the past 12 months? | No |
|---|------------------------|
| Which population(s) does the facility hold? | Both females and males |
| Age range of population: | 18-70 |
| Facility security levels/inmate custody levels: | Low, Medium, High |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 456 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 29 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 21 |

| AGENCY INFORMATION | | |
|---|--|--|
| Name of agency: | CoreCivic, Inc. | |
| Governing authority or parent agency (if applicable): | | |
| Physical Address: | 5501 Virginia Way, Suite 110, Brentwood, Tennessee - 37027 | |
| Mailing Address: | | |
| Telephone number: | 6152633000 | |

| Agency Chief Executive Officer Information: | | |
|---|-------------------|--|
| Name: | Damon T. Hininger | |
| Email Address: | | |
| Telephone Number: | 6152633000 | |

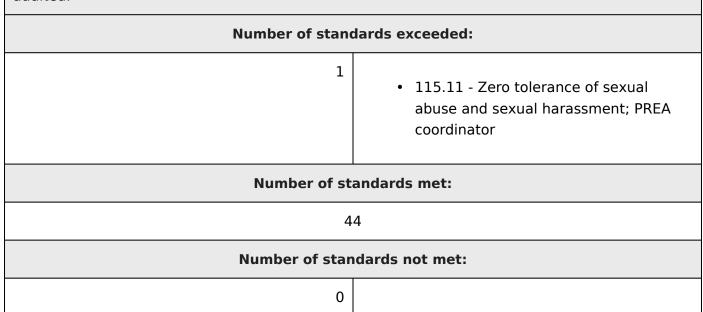
| Agency-Wide PREA Coordinator Information | | | |
|--|--------------|----------------|----------------------------|
| Name: | Eric Pierson | Email Address: | Eric.Pierson@corecivic.com |

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.



| POST-AUDIT REPORTING INFORMATION | | |
|---|---|--|
| GENERAL AUDIT INFORMATION | | |
| On-site Audit Dates | | |
| 1. Start date of the onsite portion of the audit: | 2024-02-19 | |
| 2. End date of the onsite portion of the audit: | 2024-02-23 | |
| 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? | YesNo | |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated: | Rape Crisis Center, Center for Community Solutions Palomar Health Forensic Services | |
| AUDITED FACILITY INFORMATION | | |
| 14. Designated facility capacity: | 596 | |
| 15. Average daily population for the past 12 months: | 410 | |
| 16. Number of inmate/resident/detainee housing units: | 6 | |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | Yes No Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) | |

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit **36.** Enter the total number of inmates/ 359 residents/detainees in the facility as of the first day of onsite portion of the audit: 1 38. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit: 39. Enter the total number of inmates/ 2 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: 40. Enter the total number of inmates/ 0 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: 41. Enter the total number of inmates/ 0 residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit: 42. Enter the total number of inmates/ 90 residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: 43. Enter the total number of inmates/ 6 residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:

| 44. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit: | 0 |
|---|------------------------|
| 45. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit: | 0 |
| 46. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit: | 43 |
| 47. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit: | 0 |
| 48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations): | No additional Comments |
| Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit | |
| 49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit: | 522 |
| 50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | 21 |

| 51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | 34 |
|---|--|
| 52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit: | NA |
| INTERVIEWS | |
| Inmate/Resident/Detainee Interviews | |
| Random Inmate/Resident/Detainee Interviews | |
| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed: | 26 |
| 54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply) | Age Race Ethnicity (e.g., Hispanic, Non-Hispanic) Length of time in the facility Housing assignment Gender Other None |
| 55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse? | Reviewed various rosters, spoke with staff and inmate about demographic groups |
| 56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews? | YesNo |

No additional comments 57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): Targeted Inmate/Resident/Detainee Interviews 12 58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed: 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". 60. Enter the total number of interviews 2 conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English **Proficient Inmates" protocol:** 2 61. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol: 62. Enter the total number of interviews 0 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:

| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | ■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed. |
|--|---|
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | Rosters, spoke with staff |
| 63. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed. |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | Rosters, spoke with staff |
| 64. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol: | 4 |

| 65. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol: | 5 |
|--|---|
| 66. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | ■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed. |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | Rosters, spoke with staff |
| 67. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed. |

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| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | Rosters, spoke with staff, investigations log |
|--|---|
| 68. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol: | 4 |
| 69. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category: | Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed. |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | Rosters, spoke with staff |

| 70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews): | None, jail so it has a faster inmate turnover. |
|--|--|
| Staff, Volunteer, and Contractor Interv | riews |
| Random Staff Interviews | |
| 71. Enter the total number of RANDOM STAFF who were interviewed: | 12 |
| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply) | Length of tenure in the facility Shift assignment Work assignment Rank (or equivalent) Other (e.g., gender, race, ethnicity, languages spoken) None |
| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews? | YesNo |
| 74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | conducted numerous informal discussions and interviews |
| Specialized Staff, Volunteers, and Contractor Interviews | |
| Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements. | |
| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors): | 24 |

| 76. Were you able to interview the Agency Head? | ● Yes ○ No |
|---|---|
| 77. Were you able to interview the Warden/Facility Director/Superintendent or their designee? | |
| 78. Were you able to interview the PREA Coordinator? | YesNo |
| 79. Were you able to interview the PREA Compliance Manager? | Yes No NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

80. Select which SPECIALIZED STAFF Agency contract administrator roles were interviewed as part of this audit from the list below: (select all that Intermediate or higher-level facility staff apply) 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 nonsecurity staff Intake staff

| | Other |
|--|---|
| If "Other," provide additional specialized staff roles interviewed: | Grievance Officer, mailroom staff, Learning and Development Manager |
| 81. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility? | |
| a. Enter the total number of VOLUNTEERS who were interviewed: | 22 |
| b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply) | Education/programming Medical/dental Mental health/counseling Religious Other |
| 82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility? | YesNo |
| a. Enter the total number of CONTRACTORS who were interviewed: | 2 |
| b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply) | Security/detention Education/programming Medical/dental Food service Maintenance/construction Other |

| ION SAMPLING | | |
|--|--|--|
| | | |
| 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. | | |
| YesNo | | |
| Was the site review an active, inquiring process that included the following: | | |
| Yes No | | |
| ● Yes ○ No | | |
| YesNo | | |
| | | |

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| 88. Informal conversations with staff during the site review (encouraged, not required)? | Yes No |
|--|---------------------------|
| 89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations). | no additional information |

Documentation Sampling

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

| 90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation? | Yes No |
|---|-------------|
| 91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.). | No barriers |

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

| | # of sexual abuse allegations | # of criminal investigations | # of administrative investigations | |
|---|--|------------------------------|--|---|
| Inmate- on- inmate sexual abuse | 2 | 2 | 2 | 2 |
| Staff- on- inmate sexual abuse | 1 | 0 | 1 | 0 |
| Total | 3 | 2 | 3 | 2 |

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

| | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|--|--|------------------------------|------------------------------------|---|
| Inmate-on- inmate sexual harassment | 3 | 1 | 3 | 1 |
| Staff-on- inmate sexual harassment | 0 | 0 | 0 | 0 |
| Total | 3 | 1 | 3 | 1 |

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|-------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 0 | 1 | 1 | 0 |
| Staff-on-inmate sexual abuse | 0 | 0 | 1 | 0 |
| Total | 0 | 1 | 2 | 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 detained sexual harassment investigation files, as applicable to the facility type being audited.

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|------------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual harassment | 0 | 2 | 1 | 0 |
| Staff-on-inmate sexual harassment | 0 | 0 | 0 | 0 |
| Total | 0 | 2 | 1 | 0 |

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

| Cavual | Abusa | Investigation | Eilaa | Calactad | for Doviou | ٠. |
|--------|-------|---------------|-------|----------|------------|----|
| Sexual | Abuse | investigation | riies | Selected | ior keviev | N |

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

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| 99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | YesNoNA (NA if you were unable to review any sexual abuse investigation files) |
|---|--|
| Inmate-on-inmate sexual abuse investigation | files |
| 100. Enter the total number of INMATE- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 4 |
| 101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? | YesNoNA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations? | Yes No NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| Staff-on-inmate sexual abuse investigation fil | es |
| 103. Enter the total number of STAFF- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 1 |
| 104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? | Yes No NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) |

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| 105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations? | Yes No NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) | |
|---|--|--|
| Sexual Harassment Investigation Files Select | ed for Review | |
| 106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled: | 3 | |
| 107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | Yes No NA (NA if you were unable to review any sexual harassment investigation files) | |
| Inmate-on-inmate sexual harassment investigation files | | |
| 108. Enter the total number of INMATE- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: | 3 | |
| 109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations? | Yes No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) | |
| 110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations? | Yes No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) | |

| Staff-on-inmate sexual harassment investigation files | | | |
|--|---|--|--|
| 111. Enter the total number of STAFF- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: | 0 | | |
| 112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations? | No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) | | |
| 113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations? | Yes No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) | | |
| 114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files. | No text provided. | | |
| SUPPORT STAFF INFORMATION | | | |
| DOJ-certified PREA Auditors Support S | taff | | |
| 115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. | Yes No | | |

| Non-certified Support Staff | |
|--|---|
| 116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. | Yes No |
| AUDITING ARRANGEMENTS AND | COMPENSATION |
| 121. Who paid you to conduct this audit? | The audited facility or its parent agency My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) A third-party auditing entity (e.g., accreditation body, consulting firm) Other |
| | |

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11

Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

115.11 (a): Policy 14-02, Sexual Abuse Prevention and Response states that CoreCivic is committed to protecting inmates and detainees from personal abuse, corporal punishment, personal injury, disease, property damage and harassment. Sexual abuse in correctional institutions is a public safety issue that can impact facility order and security. It victimizes vulnerable inmates/detainees, causes psychological trauma, can increase the spread of communicable diseases, and can elevate the risk of violence and tension in a correctional facility. Core Civic has zero tolerance toward all forms of sexual abuse and sexual harassment. When it is learned that an inmate may be subjected to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate/detainee. Inmates who sexual abuse fellow inmates will be disciplined and may be subject to criminal prosecution. Inmate victims of sexual abuse or harassment will be provided with a supportive and protective environment. Regardless of consensual status, sexual activity between inmates and employees, contractors, or volunteers is strictly prohibited and is subject to administrative and criminal disciplinary sanctions. It is Core Civic policy to aggressively investigate all allegations, regardless of the source, and prosecute those

who are involved in incidents of sexual abuse that are criminal in nature.

Policy 14-02, Sexual Abuse Prevention and Response further details and outlines the CoreCivic's approach to preventing, detecting and responding to sexual abuse and sexual harassment. These sections of policy include, but are not limited to Reporting for staff, inmate/inmate reporting, training, background checks, staffing, supervision and monitoring, Sexual Abuse Response Team (SART), inmate/inmate screening and education, response procedures, and investigations.

115.11 (b): CoreCivic has designated a Senior Director, PREA Compliance and Programs to be the agency PREA Coordinator. This upper-level management Facility Support Center employee is responsible for development, implementation, and oversight of CoreCivic efforts to comply with PREA Standards and the agency Sexual Abuse Response and Prevention Program. He provides supervisory oversight to all CoreCivic facilities ensuring coordination in the prevention, detection, interventions, investigation, and disciplinary/prosecution of sexual abuse as outlines in this policy.

115.11 (c): Policy 14-02, Sexual Abuse Prevention and Response states that each CoreCivic facility has a designated PREA Compliance Manager to coordinate efforts at the facility level to comply with PREA standards. This position is an Administrative Duty Officer level manager (Deputy Warden) appointed by the Warden who maintains responsibility for the facility's Sexual Abuse Response and Prevention Program.

An interview as well as numerous informal discussions were conducted with both the PREA Coordinator (PC) for the Agency and the PREA Compliance Manager (PCM) for the facility. Each were extremely knowledgeable about their roles and responsibilities, the standards, the policy and the things that our in operations for Otay Mesa. Each indicated that they feel that they have proper authority and time to complete their duties which could also be seen by the response from staff, the documents reviewed and the processes in place. In addition, the facility hold a contract with a different entity, not part of this audit, which employs a full time PREA Manager. This individual works in tandem with the PCM and management to ensure PREA adherence and sexual safety.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02, Sexual Abuse Prevention and Response
- Organizational Chart for CoreCivic Correctional Programs Division
- Job Description of the Senior Director, PREA Programs and Compliance
- HR Email Announcing PREA Audit & Compliance Senior Director
- Email introducing the Director of PREA Compliance and Investigations
- CoreCivic Summary of Current Job Performance Characteristics for Senior Director of PREA Programs and Compliance
- Interview of PREA Coordinator for CoreCivic (Senior Director)
- Interview of PREA Compliance Manager for Otay Mesa
- · Organizational Chart
- Memo

115.12 Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor was provided with an agreement with the OMDC and the United States Marshal Service. This contract outlined PREA Reporting information, definitions, prohibited acts, and other PREA related requirements.

In the contract, it stated that the contractor, CoreCivic, agrees to comply with applicable federal and state laws, codes, statutes, regulations, constitutional requirements, court orders, American Correctional Association standards, and the National Standards to Prevent, Detect and Respond to Prison Rape under the Prison Rape Elimination Act (PREA) in the housing of inmates to ensure that the facility is safe, humane, and protects the statutory and constitutional rights of inmates.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Interview with Vice President Operations Administration, CoreCivic Memo
- Contract with USDOJ, United States Marshal Contract Agreement with Core Civic and Otay Mesa

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02, Sexual Abuse Prevention and Response states that it is CoreCivic policy to aggressively investigate all allegations, regardless of the source, and prosecute those who are involved in incidents of sexual abuse that are criminal in nature.

Policy 14-02 Sexual Abuse Prevention and Response states in section D, Staffing, that:

The facility, in coordination with CoreCivic FSC will develop, shall develop a staffing plan that provides for adequate levels of staffing to protect inmates/detainees against sexual abuse. The location of video monitoring systems will be considered when determining adequate levels of staff.

The policy continues on to state that in calculating staff levels and determining the need for video monitoring, the following factors shall be taken into consideration:

- Generally accepted detention and correctional practices;
- Any judicial findings of inadequacy;
- Any findings of inadequacy from federal investigative agencies;
- Any findings of inadequacy from internal or external oversight bodies;
- All components of the facilities physical plant (including 'blindspots' or areas where staff and inmates/detainees may be isolated;
- The composition of the inmate/detainee population;
- The number and placement of supervisory staff;
- Institutional programs occurring on a particular shift;
- Any applicable state or local laws, regulations, or standards;
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- Any other relevant factors.

The facility provided and the auditor reviewed the 2023 14-02 Staffing Plan review and saw that the facility assessed, determined, and documented whether adjustments are needed to the staffing plan, whether adjustments are needed to prevailing staffing patterns, whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies, and whether adjustments are needed to the resources the facility has available to commit in order to ensure adequate staffing levels.

- (b) Policy 14-02 Sexual Abuse Prevention and Response states the PREA Compliance Manager shall document and describe the deviation on the 5-1B Notice to Administration, along with a thorough justification for the deviation and description of any corrective actions that were taken to resolve the deviation.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that following consultation with the facility staff, the FSC PREA Coordinator shall assess, determine, and document whether adjustments are needed to:
 - The staffing plan established pursuant to this section;
 - The facility's deployment of video monitoring systems and other monitoring systems and other monitoring technologies; and
 - The resources the facility has available to commit to ensure adherence to the staff plan.

The facility provided and the auditor reviewed the 2023 14-02 Staffing Plan review and saw that the facility assessed, determined, and documented whether adjustments are needed to the staffing plan, whether adjustments are needed to prevailing staffing patterns, whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies, and whether adjustments are needed to the resources the facility has available to commit in order to ensure adequate staffing levels.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that employees shall be prohibited from altering other employees that supervisory rounds are occurring,

unless such announcement is related to the legitimate operational functions of the facility.

The auditor was provided a list of the cameras at the facility, and while onsite, the auditor reviewed the camera angles, function and discussed with staff who have access. Cameras that were in areas with viewing of toilets has blackout areas on areas requiring privacy.

The facility indicated to the auditor that there were no instances in the past three years where the facility deviated from the staffing plan.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Prisons and Jails PREA Standards Compliance Checklist
- Policy 14-02 Sexual Abuse Prevention and Response
- 14-2, Annual PREA Staffing Plan Assessment
- Supervisory interviews
- PCM interview
- PREA Audit Report
- Tour of physical plant
- Review of camera placement and viewing
- Physical Plant Diagram
- Staffing Plan
- Administrative Duty Officer Live Staff Roster Review Supervisor Daily Hours Report - Day and Night Shift Logbook, Supervisory Rounds
- · Unannounced Rounds signage

115.14 Youthful inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 18-2, Classification and Inmate/Detainee Management states in the section for housing considerations that in accordance with PREA 115.14 (a)(b)(c), a youthful offender shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters. Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

(b) Policy 18-2, Classification and Inmate/Detainee Management states in the section for housing considerations that in accordance with PREA 115.14 (a) (b) (c), a youthful offender shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters. Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

(c) Policy 18-2, Classification and Inmate/Detainee Management states in the section for housing considerations that in accordance with PREA 115.14 (a)(b) (c), a youthful offender shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters. Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

Further, policy states that in accordance with PREA 115.14 (c), absent exigent circumstances, agencies shall not deny youthful inmates daily large muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.

The facility advised the auditor, in writing, that no youthful offenders are housed at OMDC. The facility provided a roster of all inmates with their dates of birth, sorted in order, and verified none were under the age of 18.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Prisons and Jails PREA Standards Compliance Checklist
- Policy 14-02 Sexual Abuse Prevention and Response
- Roster of Inmates with Ages/Dates of Birth
- Interviews with Warden, PC and PCM
- · Interviews with Random Staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02, Sexual Abuse Prevention and Response states that cross gender inmate/detainee strip searches and cross gender visual body cavity inspections shall not be conducted except in exigent circumstances. A cross gender visual body inspection of a body cavity under exigent circumstances shall be conducted only pursuant to an approved cross gender strip search.

- (b) The provision is not applicable, as the rated capacity does exceed 50 inmates.
- (c). Policy 14-02, Sexual Abuse Prevention and Response states that whenever a cross gender pat search of a female inmate/detainee, cross gender body cavity search inspection of an inmate, cross gender strip search of an inmate inmate or body cavity search of any inmate does occur, the search shall be documented. Documentation shall be in a log maintained by the facility and a 5-1B Notice to Administration in accordance with CoreCivic Policy 5-1 Incident Reporting. Details of the exigent circumstances must be included in all log entries and 5-1B notices.
- (d) Policy 14-02, Sexual Abuse Prevention and Response states that inmates/ detainees may shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttock, or genitalia, except in exigent circumstances (that is, temporary unforeseen circumstances that require immediate action in order to combat a threat to security or institutional order) or when such viewing is incidental to routine living quarter checks.

Policy continues to state that employees of the opposite gender must announce their presence when entering an area where inmates/detainee are likely to be showering, performing bodily function or changing clothing.

- (e) Policy 14-02, Sexual Abuse Prevention and Response states that searches or physical examination of a transgender or intersex inmate/detainees for the sole purpose of determining the inmates/detainee's genital status is prohibited. If the inmate/detainee's genital status is unknown, it may be determined during conversations with the inmate/detainee, 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.
- (f) Policy 14-02, Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees, security staff shall receive training in how to conduct cross- gender pat-down searches, and searches of transgender and intersex inmates/detainees, in a manner that is professional, respectful, and the least intrusive possible while being consistent with security needs.

Procedure in this policy states that all searched shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs and policy, including officer safety.

The CoreCivic Training Facilitators Guide for Search Procedures was reviewed by the auditor. In this guide, and referenced on slide six, the guide states that searches of transgender or intersex inmate should be conducted in accordance with the inmate's gender identity and by asking the individual to identify the staff with whom they would feel most comfortable conducting the search. Inmate who are suspected of changing their identity and/or search preferences to evade security screening procedures should be reported to supervisory personnel. Staff should never conduct a 'dual gender' pat search, i.e.: where the staff of one gender searches the top half of the inmate and the staff of the opposite gender searches the bottom half of the inmate.

The guide also states that cross gender searches and searches of transgender and intersex inmate should be conducted in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs. Finally, pat searches of transgender visitors should be conducted in accordance with the gender identity of the visitor.

During the walkthrough of the facility, on the entry doors to the housing areas, signage which stated "staff of the opposite gender must announce themselves upon entry".

The facility indicated on the PAQ that in the past twelve months, there have been zero cross gender strip or cross gender visual body cavity searches of inmates.

A memo was observed in the housing units, dated February 16, 2022 which stated: This memorandum is to inform all Detainees and Inmates living in dormitory settings that they are encouraged to conduct the changing of clothing in the shower or restroom areas if they wish to avoid being viewed by staff or on camera. Your cooperation and assistance is greatly appreciated."

The auditor observed, during three visits to the facility, staff of the opposite gender announcing themselves upon entry into the units. In addition, all staff and inmates interviewed indicated that these occur consistently throughout the day and night.

While onsite, the facility provided the auditor with a list of cameras and the auditor viewed each camera with one of the facility PREA compliance staff. In areas where there was areas that require privacy, the facility has black boxes on the camera viewing areas. In addition, the auditor reviewed and was advised of the limited number of staff with access to cameras.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- Policy 14-02 Sexual Abuse Prevention and Response
- Policy 9- 5, Searches of Inmates/Residence and Various Locations
- Lesson Plan for Searches
- Training Curriculum Guidance in Cross Gender and Transgender Pat Searches

Strip Search Logs

- Random Staff and Inmate Interviews
- Training Acknowledgement Sheets

115.16

Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility and agency efforts to prevent, detect and respond to respond to {sic} sexual abuse and sexual harassment. Inmates who are deaf or hard of hearing shall have access to information through simple written or oral communication. Sign language interpreters, or auxiliary aids such as a TTY that are reasonable, effective, and appropriate to the needs of the inmate shall be provided when simple written or oral communication is not effective.

Policy goes on to state that the facility will ensure that information is effectively communicated orally, on an individual basis, to inmate with limited reading skills. IN the event an inmate has difficulty understanding provided inmate and/or procedures due to intellectual deficiencies or mental health concerns, the facility will ensure that such information is effectively communicated orally to such inmates on an individual basis.

A TDD Machine and its manual for the hearing impaired is in the shift supervisor's office. A memo to all staff was issued in February 2022 advising staff where this was located.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall take reasonable steps to ensure meaningful access to all aspects of the facility and agency efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are Limited English Proficient (LEP). Interpreters shall be provided who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

For those inmates/inmates who are limited English proficient with Spanish as a primary language, a flier entitled "Sexual Assault Awareness and Prevention" is available in both English and Spanish. This flier is educational and outlines the PREA education requirements to the inmate population.

The receiving and discharge acknowledgment which included the handbook acknowledgment is also available in both English and Spanish.

The video, called PREA: What you need to know, is available in English and Spanish. The inmate handbook was provided and reviewed, with all required education materials for

PREA in both English and Spanish.

A contract between Language Lines Services, Inc. and CoreCivic of Tennessee, LLC. was provided to and reviewed by the auditor. The contract provides for over-the-phone services for translation and was last executed on February 17, 2019. It provides for interpretation services in over 200 languages.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that inmates will not be relied upon to provide interpretation services, act as readers, or provide other types of communication assistance, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate'/inmates safety, the performance of first-responder duties, or the investigation of the inmate's allegations.

In the past twelve (12) months, the facility indicated that there were no instances where inmate interpreters, readers or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety.

An interview with CoreCivic Vice President, Operations Administration was conducted, and he indicated that the CoreCivic corporate office aids facilities that enable them to locate potential vendors and/or agencies that would provide support services for inmates/inmates with disabilities. The agency maintains a comprehensive contract with the Language Line and some when have an MOU with organizations in the local communicates to provide translation services when needed. TTY phones are provided, and arrangements are also made to assist those inmates/inmates who are blind.

At the time of the audit, there were no inmates who were blind, with low vision, deaf or with cognitive deficits.

The auditor conducted an interview with two inmates who spoke Spanishand utilized the language line with this inmate to verify that it is working correctly.

Staff interviewed, random selections and specialty staff, were aware of the language line and the need to use this line for sensitive matters, such as those related to PREA allegations and investigations.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- Policy 14-02 Sexual Abuse Prevention and Response
- Sexual Assault Awareness and Prevention Brochure (English and Spanish)
 Inmate Handbook, English and Spanish
- Language Line contract and flier

- Video PREA: What you need to know
- Interview with Inmate with use of the Language Line
- Interview with CoreCivic Vice President, Operations Administration Handbook for those with limited vision
- Use of Language Line with Inmate
- Random Staff Interviews

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115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that to the extent permitted by law, CoreCivic will decline to hire or promote anyone who may have contact with inmates/inmates and decline to enlist the services of any contractor who may have contact with inmates/inmates who:
- 1. has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 USC 1997); has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion or if the victim did not consent or was unable to consent or refuse; and has been civilly or administratively adjudicated to have engaged in the activity as outlined above.

The 14-2H, Self-Declaration of Sexual Abuse/Sexual Harassment form, which is signed by every employee, asks each employee if they have ever with the three above questions, and in addition, asks if they have ever had a substantiated allegation of sexual harassment made against them.

- (b) Policy 14-02 Sexual Abuse Prevention and Response states any incident of sexual harassment shall be considered in determining whether to hire or promote any individual, or to enlist the services of any contractor, who may have contact with inmates.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that before hiring new employees who may have contact with inmates/inmates, CoreCivic shall:
- 1. perform a criminal background records check; and
- 2. consistent with federal, state and local law make its best effort 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 as defined by this policy. The 3-20-2A Verification of Employment form shall be used to solicit such prior employment information.

Form 3-20-2B PREA Questionnaire for Prior Institutional Employers was reviewed. It is signed by all prospective hires and is a release of information to be sent to all prior institutions that the person may have worked at. HR staff interviewed and walked the auditor through their process of this form and the use of the information in consideration during the hiring process.

The authorization for security clearance form states 'I understand omission of any item may result in not receiving full consideration for employment'. This form is signed by every applicant.

- (d) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic in partnership with their oversight agencies shall also perform a criminal backgrounds records check before enlisting the services of any unescorted contractor who may have contact with inmates/detainees.
- (e) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic shall ensure that criminal history record checks are conducted at least every five years for current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information.
- (f) Policy 14-02 Sexual Abuse Prevention and Response states that all applicants and employees and contractors who may have direct contact with inmates/inmates shall be asked about previous misconduct, as outlined above, in written applications and in any interviews or written self-evaluations conducted as part of reviews of current employees.

Form 14-2H is a self-declaration of Sexual Abuse/Sexual Harassment signed by current employees and contractors on an annual basis to serve as verification of the fulfillment of his/her continuing affirmative duty to disclose any sexual misconduct as part of an annual review process.

The from entitled 'self-declaration of sexual abuse/sexual harassment' states that "you certify your understanding that if you provide false or fraudulent information you could be disqualified from further consideration for employment or, if falsity is discovered after you have become employees, terminated from employment". This form is signed by each applicant, employee and unescorted contractor.

- (g) Policy 14-02 Sexual Abuse Prevention and Response states that to the extent permitted by law, CoreCivic may decline to hire or promote and may terminate employment based on material omissions regarding such misconduct, or the provision of materially false information.
- (h) Policy 14-02 Sexual Abuse Prevention and Response states that unless prohibited by law, CoreCivic shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

In addition to the background checks conducted by ICE for all staff at this facility, staff at DHS send the facility quarterly lists which detail staff who are 'active' or those 'not

active' on the contract, as a way to reconcile staff clearances due and pending.

During an interview with the HR manager, she detailed the process of utilizing the questionnaire for prior institutional employers. When asked for current samples, she was immediately able to provide three samples of questionnaires coming in and out of the facility verifying prior employment, as per CoreCivic Form 3-20-2B.

The HR manager provided the auditor with blankets packets for new hires, transfers and promotions. In these packets there are numerous HR form and informational packets relating to a variety of employment areas, to include: An Ethics Line Brochure and information; 14-2J PREA Zero Tolerance Policy information and acknowledgment form; CoreCivic PREA Brochure; 14-2H-DHS Self-Declaration of Sexual Abuse/Sexual Harassment; and 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment. After a new hire completes these forms, they are maintained in their HR file.

A total of 30 staff files were selected to be reviewed to determine compliance. Of each of these, all required documentation was present for background checks as well as all of the forms detailed above. For a more recent time period, approximately the last two years, DHS who conducts the employment background checks for staff working at this facility, was not sending clearance emails once a staff member was cleared for a five year re-check. They were sending quarterly emails (provided to the auditor) of all cleared staff or those whose clearances were not longer valid. After interviews with involved parties, the understanding was that 'no news was good news' and if they did not hear back, then the staff were cleared. The auditor recommended that the facility received some documentation or email, as they previously did, indicating clearly that the check was ran and the employee was 'cleared'. Email exchanges were provided to the auditor demonstrating that they are working on this recommendation to the process.

These processes were also discussed during interviews with the PC and PCM for the agency and facility. Each were extremely knowledgeable about these processes.

- Policy 14-02 Sexual Abuse Prevention and Response CDCR Statement of Work
- New Hire Paperwork Samples
- Promotion Paperwork Sample
- · Contract Worker Sample
- 5 year background check plan
- 14-02 H Form
- Employee Background Request
- Self-Disclosure / Declarations form
- Final Approval
- Background investigation Disclosure and Authorization form Authorization for Security Clearance
- · Clearance Letters via Email

- Quarterly Approved Staff list
- Interviews with HR Staff Member
- Interview with PCM and PC

115.18 Upgrades to facilities and technologies

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) The facility indicated to the auditor by memo and during discussions that during the past twelve (12) months, there have been no substantial expansions or modifications to the facility.

Policy 14-02 Sexual Abuse Prevention and Response states that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, CoreCivic will consider the effect of the design, acquisition, expansion, or modification on the company's ability to protect inmates from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations.

A blank copy of form 7-1B PREA Physical Plant Considerations was reviewed by the auditor. The form prompts the reviewer to consider the elements of the standard and document concerns or considerations.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, CoreCivic will consider how much technology may enhance the ability to protect

inmates/inmate from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations.

A blank copy of form 7-1B PREA Physical Plant Considerations was reviewed by the auditor. The form prompts the reviewer to consider the elements of the standard and document concerns or considerations.

The CoreCivic Vice President of Operations Administration states that CoreCivic employs architects and other professionals who through experience, research and consulting have knowledge of the issues and needs presented by PREA. On new builds and renovations, the design staff will consult with the PREA coordinator for recommendation and work to ensure that PREA is addressed. Real estate and design staff receive information from the field on privacy concerns in areas such as showers, restrooms, and any areas where inmates/detainees may be in a state of undress. Blind spots are identified that can be corrected through video surveillance coverage. During acquisitions, the staff making the site visits develop a preliminary assessment

and the PREA coordinator is involved in the review of physical plant issues. At existing facilities, a form 7-1B (PREA Physical Plant Considerations) issued to ensure PREA I considered when initiating a renovation/new construction.

In addition, the VP states that cameras are used to support direct/indirect staff supervision. Better quality systems have been installed and consideration to optimal coverage is addressed at the time of these upgrades. Camera placement also takes into consideration the privacy needs for cross gender viewing in areas like restrooms and shower areas. Technology is also discussed with the facility during the PREA Staffing Plan assessment that is reviewed each year by facility staff and the FSC PREA coordinator.

The auditor completed a walkthrough of all facility grounds and saw cameras in place throughout the facility. In numerous locations, the auditor sat with staff to review all camera angles. In addition, the auditor was provided a printout of all cameras. Each camera allowed for coverage and aimed to eliminate blind spots. No cameras were seen to have viewed of restrooms or shower areas.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- Policy 14-02 Sexual Abuse Prevention and Response
- Policy 7-01B Form for plant physical assessment and improvement Interview with PC
- · Interview with PCM
- Facility Walk through Interview with Agency Head List of all facility cameras

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that the investigating entity shall follow a uniform evidence protocol that maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.
- (b) The protocol outlined by the facility and in documentation has been adapted from and is based on the most recent edition of the US Department of Justice's Office on Violence Against Woman publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents".

CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that an as appropriate, it shall be adapted from or otherwise based on the most recent editions

of the Department of Justice's Office on Violence Against Woman publication "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocol developed after 2011.

- (c) During the twelve (12) month period prior to this audit, there was one incident reported of sexual abuse at the facility.
- (d) During a call with the local Rape Crisis Center, the advocate stated that they will be present preferred, since detainee victims the right to have a victim advocate present during any stage of the investigation. In the event an outside victim advocate is not available, Facility will provide a qualified staff member to serve as the victim advocate.

A Memorandum of Understanding on Sexual Abuse Investigations between CoreCivic and SD Sheriff's Department was reviewed and states that will provide emotional support that is confidential and related to sexual abuse.

During the twelve (12) month period prior to this audit, there was have been no incidents reported of sexual abuse at the facility that resulted in a SAFE/SANE Exam.

Further, CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall offer all victims of sexual abuse access to forensic medical exams, where evidentiarily or medically appropriate. The PCM, Facility Investigator or ADO shall consult with law enforcement prior to transporting an inmate for an examination to be performed by a SAFE or SANE. If it is determined that examination is necessary for the collection of evidence, then the facility shall transport the alleged victim. If a SAFE/SANE provider is not available, the examination may be performed by other qualified medical practitioners.

- (e) CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that as requested by the victim, either the victim advocate, or a qualified facility staff person shall accompany and support the victim through the forensic medical examination process and investigatory interviews.
- (f) A Memorandum of Understanding on Sexual Abuse Investigations between CoreCivic and the SD Sheriff's Department. This MOU stated that the facility agrees to assist and cooperate with investigating Agency in completing the investigation, at the request of the agency's investigating officers This MOU stated that the facility agrees to assist and cooperate with investigating Agency in completing the investigation, at the request of the agency's investigating officers.

CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that investigations conducted by a facility employee for allegations of sexual abuse will be handled in accordance with the Code of Federal Regulations, Title 28, Part 115.21, Evidence Protocol and Forensic Medical Examinations, as outlined below. If the facility is not responsible for investigating such allegations, the facility shall request that the responsible outside agency or entity (i.e. state or local law enforcement, contracting agency, etc) comply with these regulations.

- (g) A Memorandum of Understanding on Sexual Abuse Investigations between CoreCivic and the SD Sheriff's Department. This MOU stated that the facility agrees to assist and cooperate with investigating Agency in completing the investigation, at the request of the agency's investigating officers.
- (h) Policy states that if unable to secure services of a victim advocate to accompany the alleged victim to the SAFE/SANE exam, and if requested by the victim, the facility may use a qualified facility staff member for this purpose. The staff member must have been screened by SART and the Warden for appropriateness to serve in the role and must have received documented education concerning sexual assault and forensic examination issues.

Administrative Investigations are completed onsite by CoreCivic Staff. Currently one staff member is trained, and documentation of this training was provided to the auditor. ADO level staff explained to the auditor, during interviews, the excellent rapport they have with the local police departments.

A call was also held with the Rape Crisis Center and they detailed their willingness to cooperate with all investigations or survivors that require advocacy.

- PREA Standards Compliance Checklist
- Policy 14-02 Sexual Abuse Prevention and Response
- Investigation Outline and Protocol
- A Memorandum of Understanding on Sexual Abuse Investigations between CoreCivic and SD Sheriff's Department
- · Pamphlet Advocacy Information for Survivor of Sexual Assault
- SART Pamphlet
- Sample Incident Report
- Uniform Evidence Protocol
- A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents Interview with hospital SANE staff
- Interview with PCM
- · Interview with custody staff
- · Interview with PC

| 115.22 | Policies to ensure referrals of allegations for investigations |
|--------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | (a) Policy 14-02 Sexual Abuse Prevention and Response states that the Administrator/ |

Director shall immediately report all allegations of sexual abuse, sexual assault and sexual harassment to a law enforcement agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior or the allegation would be not be {sic} considered a criminal act under federal, state or local law.

Completed 5-1E forms will be maintained with the 5-1 packet.

During the past twelve (12) months, as per the PAQ, the facility has indicated, on the PAQ, that there have been eight allegations of sexual abuse or sexual harassment received; thus eight administrative investigations.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that all allegation of sexual abuse or sexual harassment shall be referred for investigation to an agency or entity with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior.

This information is readily available on the CoreCivic Prison Rape Elimination website with links to policy and the standards.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that whenever feasible, the facility shall enter an MOU with the outside investigating agency or entity outlining the roles and responsibilities of both the facility and the investigating entity in performing sexual abuse investigations. Before developing or attempting to enter an MOU, the facility shall contact the FSC Assistant General Counsel, Vendor Contracts. CoreCivic shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

The MOU states that upon receipt of a referral from Facility in accordance with other provisions, investigating agency will coordinate and conduct a criminal investigation in accordance with the requirements of 28 CFR 115.21 paragraphs (a) - (e), which are incorporated in the MOU. In addition, it states that the facility agrees to assist Investigating Agency in obtaining the required training as outlined in 28 CFR 115.34, at no cost to Investigating Agency.

(d) Criminal investigations shall be documented in a written report that contains a thorough description of physical testimonial and documentary evidence and that includes copes of all documentary evidence where feasible.

During an interview with the CoreCivic Vice President, Operations Administration, he stated that it is policy to refer all allegations of sexual abuse that are criminal in nature to law enforcement agencies with the legal authority to conduct criminal investigations. All administrative investigations are conducted by CoreCivic investigators who have received the specialized PREA training and/or law enforcement officials. In addition, the VP stated that all allegations are reported in the CoreCivic Incident Reporting Database (IRD) system which triggers an investigation. This system requires multiple levels of administrative oversight and review. All allegations that could result, if substantiated, in criminal violations are referred to the appropriate law enforcement officials (or by contracted partner investigative entity). Our staff works with the outside law enforcement, upon request.

Incident Report logs were sent to the auditor to review. There were eight investigations in the year prior to the PAQ being completed and during the corrective action period, additional cases were alleged.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Policy 5-1, Incident Reporting
- CoreCivic PREA Statement
- PREA Allegation Log
- PREA Allegation Administrative Investigation
- CoreCivic Website
- San Diego Sheriff's Department Investigation Process Manual
- Interview with Specialized Staff
- Interview with PREA Compliance Manager
- Interview with PREA Coordinator
- Interview with CoreCivic Vice President, Operations Administration

115.31 Employee training

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic has mandated zero-tolerance towards all forms of sexual abuse and sexual harassment. In addition, it states that all CoreCivic facility employees shall receive training on CoreCivic's zero-tolerance policy for sexual abuse and sexual harassment. Such training shall be tailored to the gender of the inmates/inmates at the facility and at a minimum, all employees shall receive pre-service and annual in-service training on the PREA National Standards and other applicable state or local laws imposing criminal liability for the sexual abuse of a person held in custody.

Further, policy states that employees will be trained on:

- 1. PREA National Standards and other applicable state or local laws imposing criminal liability for the sexual abuse of a person held in custody;
- 2. An employee's duty to report any occurrence of sexual harassment or sexual abuse;
- 3. How to fulfill employee responsibilities for sexual abuse/sexual harassment prevention, detection, reporting, and response in accordance with this policy;
- 4. The right of inmates to be free from sexual abuse and sexual harassment;
- 5. The right of inmates/inmates and employees to be free from retaliation for

reporting sexual abuse and sexual harassment;

- 6. The dynamics of sexual abuse and sexual harassment in confinement;
- 7. Locations, situations, and circumstances in which sexual abuse may occur;
- 8. The common reaction of sexual abuse and sexual harassment victims;
- 9. Signs of victimization;
- 10. How to detect and respond to signs of threatened or actual sexual abuse; 11. How to avoid inappropriate relationships with inmates/inmates;
- 12. How to communicate effectively and professionally with inmates/inmate, including LGBTI and Gender Non-Conforming inmates/inmates; and
- 13. How to comply with laws relevant to mandatory reporting of sexual abuse to outside authorities.

The CoreCivic PREA Overview class and participant Guide was reviewed. The guide included all elements listed above, in the standard and in policy.

- (b) Policy 14-02 Sexual Abuse Prevention and Response states that employees transferring to a facility that houses a population whose gender is different from their previous facility, shall receive additional training specific to the population of the newly assigned facility.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that all CoreCivic facility employees shall receive training on CoreCivic's zero-tolerance policy for sexual abuse and sexual harassment. Such training shall be tailored to the gender of the inmates/inmates at the facility and at a minimum, all employees shall receive preservices and annual in-services training on the PREA National Standards and other applicable state or local laws imposing criminal liability for the sexual abuse of a person held in custody.

The facility provided the auditor with an employee roster listing all current staff, position name and date of hire.

Of the staff listed on the roster, the auditor randomly selected twenty-five staff HR and training files to review. Of those reviewed, all staff signed a training acknowledgement section, that they received training prior to contact with the inmate population. The selected files that included staff who have been employed for over two years shows that staff complete and sign acknowledgments on an annual basis, above the requirements of the standard. The training acknowledgement section, which is signed and dated by employee, stated: I have listened to the instructors, viewed all video presentations, read all handouts, and I understand the training that I have received. I understand that as an employee, volunteer/contractor it is my responsibility to abide by policy and procedures as directed in the training. If I have questions about the training material presented, or policy/procedures, I am aware that it is my responsibility to seek clarification from the class instructor to my supervisor, the Learning and Development Manager, or the PCM.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that employees shall be required to confirm, by either electronic or manual signature, their understanding of the received training. Signed documentation will be maintained in the employees training file.

Prior to the onsite visit and upon arrival to the facility, management provided the auditor with a list of all current staff members, which listed their name, title and date of hire, as well as calendars for the various positions/shifts that covered the time the auditor would be onsite. In total, there was 168 employees for the facility.

The auditor randomly selected twenty-five staff from this list with four being hired within the past twelve months and ten additional staff being hired within the past three years, since the last audit. The auditor asked the facility for documentation and reviewed the complete training file and list of classes taken by date and all training acknowledgments that were signed.

Of these files, all were in compliance in that:

- 1. Staff were trained on the aforementioned elements included in provisions of this standard;
- 2. Staff signed an acknowledgment that they understood the training that they received;
- 3. Staff were trained prior to their start date and contact with the population;
- 4. Those employees that have been at the facility for over one year, receive this training and sign the acknowledgment annually.

A total of 30 staff training files were selected to be reviewed. The facility provided documentation to the auditor that each staff member was trained upon hire on all elements of this standard, and as well, they are required to go through annual training, above the standard requirement of every two years. In addition, staff are constantly educated on PREA related topics through emails, staff briefings, staff recalls, education posters and memos.

- Policy 14-02 Sexual Abuse Prevention and Response
- Training Policy
- PREA Overview, Participant Guide for Training
- PREA Training Lesson Plan
- CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgment Staff Roster
- In-service training records
- · Transfer training records
- Orientation training records
- Staff Training Printout
- Random Staff interviews
- HR Files
- Training Files
- · Discussion with training and HR staff
- Interview with PCM

Interviews with all specialized staff

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that all civilians/ volunteers/contractors who have contact with inmates/inmates shall receive training on their responsibilities pertaining to sexual abuse and sexual harassment prevention, detection, reporting and response as outlined in this policy.

Each volunteer receives a manual that of which covers sexual abuse and sexual harassment, policy 14-2. The manual was provided to the auditor to review and includes: the various definitions of acts from PREA and Policy 14-2, sexual abuse awareness, zero-tolerance policy, safety, PREA requirements, reporting by inmates, and reporting to staff. They also receive the handout entitled PREA Overview: Training for Contractors and Volunteers.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that the level and type of training provided to volunteers/contractors shall be based on the services they provide and level of contact they have with inmates/detainees. All Volunteers and contractors who have contact with inmates shall acknowledge the CoreCivic zero-tolerance policy regarding sexual abuse and sexual harassment and information on how to report such incidents.

The facility advised the auditor that there are currently twenty contract staff or contractors at the facility. All work in food service and the medical departments.

Each volunteer and contract worker signs the 14-2 A CoreCivic PREA Policy Acknowledgement and/or Training Acknowledgment Form. The training acknowledgement section, which is signed and dated by employee, states: I have listened to the instructors, viewed all video presentations, read all handouts, and I understand the training that I have received. I understand that as an employee, volunteer/contractor it is my responsibility to abide by policy and procedures as directed in the training. If I have questions about the training material presented, or policy/procedures I am aware that it is my responsibly to seek clarification from the class instructor, to my supervisor, the Learning and Development Manager, or the PCM. Five (5) signed samples of this form were provided to/reviewed by the auditor.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that each volunteer or contractor understands the training that he/she has received will be kept in the volunteer or contractors file by either the Learning Development Manager, facility Volunteer Coordinator or other staff designated by the Warden or PCM.

Each volunteer signs the 14-2 A CoreCivic PREA Policy Acknowledgement and/or Training Acknowledgment Form. The training acknowledgement section, which is signed and dated by employee, states: I have listened to the instructors, viewed all video presentations, read all handouts, and I understand the training that I have received. I understand that as an employee, volunteer/contractor it is my responsibility to abide by policy and procedures as directed in the training. If I have questions about the training material presented, or policy/procedures I am aware that it is my responsibly to seek clarification from the class instructor, to my supervisor, the Learning and Development Manager, or the PCM.

In addition, the list mentioned in the memo was provided to the auditor upon entry into the facility. Of these, the auditor reviewed their start date, their education/ training and receipt of PREA information dates and the date that their background check was completed. All training and background checks were completed prior to having any contact with the offender population. The signed acknowledgement was reviewed and included by the volunteers.

The auditor reviewed this person's start date, their education/training and receipt of PREA information dates and the date that their background check was completed as well as their signed acknowledgement of the training received. All training and background checks were completed prior to having any contact with the offender population.

Due to COVID-19 safety concerns, no volunteers have been in the facility since the pandemic began.

During the onsite portion of the audit, the two volunteer coordinators were interviewed. Each of these individuals were Chaplains at the facility. They provided me a full list of all 22 current volunteers and their contact information and clearance date as well as their CoreCivic ID Badge number. In addition, the front desk staff were also questioned and they as well had this list at the front desk. They advised that cleared and trained volunteers also have a badge that can be swiped in, as employees do, to allow entry into facility. The auditor selected 15 of these volunteers and was provided documentation that each was trained. Lastly, the auditor was provided with a blank packet of training and information given to the volunteers, and the required PREA information in this standard, and much more, was included.

- Policy 14-02 Sexual Abuse Prevention and Response
- Volunteer Manual
- List of Contractors
- Volunteer Application Form
- Self-declaration of Sexual Abuse/Sexual Harassment
- Volunteer Acknowledgement of PREA training
- · Volunteer List with Organization and start date
- Interview with Director

- Interview with Volunteer Coordinator (Program Supervisor)
- Interview with Volunteer
- Inquiry with Front Desk Staff
- Contract staff file
- Memo

115.33 Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states upon arrival at the facility, all inmates shall be provided written information regarding sexual abuse prevention and reporting. Inmates shall receive comprehensive educational information about the following topics related to this policy within thirty (30) days of intake either in person or through video:
- 1. CoreCivic's zero tolerance policy regarding sexual abuse and sexual harassment;
- 2. How to report incidents, threats or suspicions of sexual abuse or sexual harassment:
- 3. An inmates/detainees right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents;
- 4. Availability of policies regarding sexual abuse prevention/intervention;
- 5. Employee-on-inmate/detainee sexual abuse;
- 6. Self-protection from sexual abuse;
- 7. Inmate on inmate sexual abuse:
- 8. Available emotional support services to include internal and external victim advocates and community support services.

Further, policy 14-02 states that inmates/inmates will be provided education in formats accessible to all inmates, including those who are limited English proficient or disabled.

During the past twelve (12) months, there has been 1,416 inmates/inmates admitted to the facility who have reviewed and received the education materials.

- (b)(c) Policy 14-02 Sexual Abuse Prevention and Response states upon arrival at the facility, all inmates shall be provided written information regarding sexual abuse prevention and reporting. Inmates shall receive comprehensive educational information about the following topics related to this policy within thirty (30) days of intake either in person or through video:
- 1. CoreCivic's zero tolerance policy regarding sexual abuse and sexual harassment;
- 2. How to report incidents, threats or suspicions of sexual abuse or sexual

harassment:

- 3. An inmates/detainees right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents;
- 4. Availability of policies regarding sexual abuse prevention/intervention;
- 5. Employee-on-inmate/detainee sexual abuse;
- Self-protection from sexual abuse;
- 7. Inmate on inmate sexual abuse;
- 8. Available emotional support services to include internal and external victim advocates and community support services.

Further, policy 14-02 states that inmates/inmates will be provided education in formats accessible to all inmates, including those who are limited English proficient or disabled.

No inmates in the past twelve (12) months transferred from a different facility.

Policy 14-02 Sexual Abuse Prevention and Response also states that CoreCivic prevents discrimination based on inmate/detainees race, religion, national origin, sex, disability, or political views in making administrative decisions and in providing access to programs.

Further, policy 14-02 states that inmates/inmates will be provided education in formats accessible to all inmates, including those who are limited English proficient or disabled.

Further, policy 14-02 states that inmates/inmates will be provided education in formats accessible to all inmates/inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as inmates/inmates who have limited reading skills.

- (d) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall maintain documentation of inmate/inmate participation in educational sessions pertaining to sexual abuse and sexual harassment. It also stated that inmates/ detainees will be provided education in formats accessible to all inmates/detainees, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates/detainees who have limited reading skills.
- (e) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall maintain documentation of inmate participation in educational sessions pertaining to sexual abuse and sexual harassment.
- (f) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to providing such education, the facility shall ensure that key information is continuously and readily available or visible to inmates/inmates through posters, inmate handbooks, or other written formats.

At intake, inmates are provided and sign for an inmate handbook and a PREA Brochure. The auditor collected copies of these while touring and in intake at the facility as well as received documentation of receipt of these from the randomly

selected inmate files. The flyer educates the inmates on the background and definitions of PREA; rights to report, how to report, right to be free from retaliation, confidentiality, zero tolerance, tips for avoiding sexual abuse and sexual harassment and what to do if you are abused. The handbook included similar information, as indicated above, as well as reporting numbers and advocacy addresses. While reviewing the handbook, while not a compliance issue, the auditor made recommendations to clarify the various reporting mechanisms for the reader. The facility immediately obliged and edited the handbook, and sent to the inmate population, via the inmate tablet, an addendum.

In each housing area, as well as other common areas where bulletin boards exist, the auditor saw PREA education information to include: A memo in English and Spanish detailing how to report to an outside agency (San Diego County Sheriff's Department); a memo detailing the process of using the internal phone line reporting method; large copy of the handbook information in English and Spanish; a victim services memo, in English and Spanish.

Forty inmate files were selected from a roster of 359 inmates and the facility was asked to provide copies of each inmates intake, initial education and comprehensive education and documentation that this was completed. Of these, three inmates were missing the second education documentation and the facility immediately provided this. It should be noted, however, that intake, the inmate population does receive information at intake that covers all parts of this standard.

- PREA Standards Compliance Checklist
- Policy 14-02 Sexual Abuse Prevention and Response
- · Inmate Handbook, English and Spanish
- Inmate Acknowledgement Form, English and Spanish
- Sexual Assault Awareness Brochure (English and Spanish)
- PREA DVD
- PREA Comprehensive Education Handout
- Inmate Orientation Checklist
- 14-2A Preventing Sexual Abuse and Misconduct, English and Spanish Photos and viewing TDD Telephone
- PREA Poster
- PREA Acknowledgment
- Inmate Interviews (random and specialized)
- Inmate Files
- Facility Walkthrough
- Interview with Intake Staff
- Interview with Counselors Interview with PCM

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees and to the extent that CoreCivic conducts sexual abuse investigations, investigators shall receive training in conducting sexual abuse investigations in confinement settings. The PCM shall ensure that more than one (1) person at the facility receives training as a sexual abuse investigator. This will ensure that a trained investigator is available as backup during employee absences (e.g.) leave, paid time off, sickness, offsite training, etc) from work.

The facility provided a Certificate of Completion for the one (1) assigned facility investigator. The certificate is from a training entitled PREA: Investigating Sexual Abuse in a Confinement Setting which was delivered online through the Moss Group. In addition, CoreCivic held a webinar training entitled "PREA Update, Investigation Standards and Required Specialty Training".

(b) Policy 14-02 Sexual Abuse Prevention and Response states that specialized investigators training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Policy also states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies.

The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections and each training included the requirements of the standard and Policy 14-02: Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse

investigations shall be maintained in accordance with CoreCivic Policies 1-15 Record Retention and 4-2 Maintenance of Training Records.

The facility provided a Certificate of Completion for the one (1) assigned investigator. The certificate is from a training entitled PREA: Investigating Sexual Abuse in a Confinement Setting which was delivered online through the National Institute of Corrections.

In addition to this training, the facility investigator completed the NIC course titled 'Investigating Sexual Abuse in a Confinement Setting'. This investigator is a TDY to this facility and the facility is actively recruiting for a new, permanent investigator. The investigations reviewed and detailed in later standards demonstrated that the assigned investigator understood and applied this training.

(d) Auditor is not required to audit this provision.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Email on Training Requirements
- PowerPoint titled PREA Update Investigation Standards and Required Specialty Training Training Certificates for each investigator assigned at this facility
- Training History Records
- PREA Investigations Log
- Investigations Chain of Command
- PREA Investigation Process Chart
- Training records MDOC Investigator
- Memo

115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees, all full and part-time Qualified Health Care Professionals and Qualified Mental Health Professions, who work regularly in the facility, shall receive specialized medical training as outlined below:
 - How to detect and assess signs of sexual abuse and sexual harassment;
 - How to preserve physical evidence of sexual abuse;
 - How to respond effectively and professionally to victims of sexual abuse and sexual harassments; and
 - How and to whom to report allegations of sexual abuse and sexual harassment.

The training PowerPoint was reviewed entitled PREA Specialty Training for Medical and Mental Health Staff and it included all of the above provisions and areas.

(b) The facility advised the auditor that they do not conduct forensic medical

examinations at this facility. These are completed at Palomar Health Forensic Services, as per the MOU provided.

- (c) Sample training reports for selected staff in the medical and mental health were printed and reviewed and demonstrated that documentation of these training is maintained.
- (d) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees, all full and part-time Qualified Health Care Professionals and Qualified Mental Health Professions, who work regularly in the facility, shall receive specialized medical training as outlined below:
 - How to detect and assess signs of sexual abuse and sexual harassment;
 - How to preserve physical evidence of sexual abuse;
 - How to respond effectively and professionally to victims of sexual abuse and sexual harassments; and
 - How and to whom to report allegations of sexual abuse and sexual harassment.

Of the staff files pulled, 6 belonged to medical staff. The auditor looked for both the general training acknowledgments as well as documentation of the specialized training for these staff. Each had received the training as detailed above. There was currently 51 medical staff and mental health staff assigned to the facility, all of who are current on their training.

Interviews both formal and informal, with Medical and Mental Health Staff indicated that they were aware of and have received these training. Staff were able to detail portions of this training and topics which were discussed.

- Policy 14-02 Sexual Abuse Prevention and Response
- PREA Specialized Training for medical and mental health staff Medical staff training records
- Mental health staff training records
- MOU with Palomar Health Forensic Services

| 115.41 | Screening for risk of victimization and abusiveness |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | (a) Policy 14-02 Sexual Abuse Prevention and Response states that upon admission to |

the facility, and upon transfer to another facility inmates/inmates shall be screened by staff to perform the initial intake screening process to obtain information relevant to housing, cell, work, education and program assignments with the goal of keeping separate those inmates/inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The screening shall identify past victims and/or predators and assess vulnerability to sexual abuse victimization.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that during each intake process the operations supervisor/designee will print a copy of the PREA alert roster for active inmates/inmates. The PREA alert roster will be placed in a special housing binder in the supervisor's office in the monitor department. This roster will be reviewed prior to initial or subsequent housing/bed assignments.

Policy also states that staff shall complete the interview portion of the screening within twenty- four (24) hours of arrival at the facility.

According to the PAQ, In the past twelve (12) months, a total of 1,335 inmates have gone through the intake process at the facility and have been screened for risk of victimization or abusiveness within the 72 hours upon intake.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that victims will be housed in the lower dorm and the predators will be housed in the upper dorm. In case of a physical disability victims/predators will be housed in accordance with their disability to the best of our ability.

Policy continues to state that a list of those inmates/inmates who are identified through a screening as a victim, potential victim, predator or potential predator shall be maintained and updated as necessary by the operations manager/designee. The list shall be made available to any staff involved in the housing of inmates /inmates. Those inmates at high risk of being sexually victimized shall be separated from those at high risk of being sexual predators, to the best of our ability.

Screenings will be completed, according to policy, and documented using the 14-2-B., Sexual Abuse Screening Tool, with referrals to Case Management staff for further evaluation and screening as necessary, unless the facility management contract requires otherwise.

- (d) Form 14-2B, Assessment Questionnaire Information includes prompts as to:
 - Whether the inmate has a mental, physical, or developmental disability;
 - The age of the inmate;
 - The physical build of the inmate;
 - Whether the inmate has previously been incarcerated;
 - Whether the inmate's criminal history is exclusively nonviolent;
 - Whether the inmate has prior convictions for sex offenses against an adult or child;
 - Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming (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:

- Whether the inmate has previously experienced sexual victimization; and
- The inmate's own perception of vulnerability.
- (e) Form 14-2B, Assessment Questionnaire Information includes prompts as to: Any prior acts of sexual abuse; When known to the agency: prior convictions for violent offenses; and History of prior institutional violence or sexual abuse.
- (f) Policy 14-02 Sexual Abuse Prevention and Response states that a reassessment of the inmate's risk level of victimization or abusiveness will be conducted by the appropriate Case Manager or a staff member designated by the Administrator/ Director. The reassessment shall occur within thirty (30) days of the inmate's arrival at the facility. The reassessment will include any additional relevant information received by the facility since the initial intake screening.
- (g) Policy 14-02 Sexual Abuse Prevention and Response states that a reassessment of the inmate's risk level of victimization or abusiveness will be conducted by the appropriate Case Manager or a staff member designated by the Administrator/ Director. The reassessment shall occur when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may impact the inmate/inmate's risk of victimization or abusiveness.
- (h) Policy 14-02 Sexual Abuse Prevention and Response states that inmates/inmates may not be disciplined for refusing to answer, or for not disclosing complete information, in response to questions asked pursuant to the following:
 - Whether the inmate/inmate has a mental, physical, or developmental disability;
 - Whether the inmate/inmate is, or is perceived to be, LGBTI or General Non-Conforming;
 - Whether the inmate/inmate has previously experienced sexual victimization;
 or
 - The inmate's own perception of vulnerability.

The facility advised the auditor that disciplinary action will not be taken for any participant who refused to answer these questions.

(i) Policy 14-02 Sexual Abuse Prevention and Response states that appropriate controls shall be implemented within the facility regarding the dissemination of responses to questions asked pursuant to screening for risk of victimization and abusiveness to ensure that sensitive information is not exploited by employees or other inmates to the inmate's detriment.

Forty inmate files were selected from a roster of 359 inmates and the facility was asked to provide copies of each inmates intake, initial screening and second, followup

screening. Of these names, the facility was able to provide all documentation and all screenings were conducted timely.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Policy 14-02 B Screening Tool (electronic and password protected) ORAS
- 30 day re-assess example
- Direction for Completion of the Sexual Abuse Screening Tool
- Training/Activity Attendance Roster
- Assessment Questionnaire/Information Screening Tool from inmate files Intake Tracker

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that upon admission to the facility, and upon transfer to another facility inmates/inmates shall be screened by staff to perform the initial intake screening process in order to obtain information relevant to housing, cell, work, education and program assignments with the goal of keeping separate those inmates/inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The screening shall identify past victims and/or predators and assess vulnerability to sexual abuse victimization. Housing assignments are made accordingly.

Policy also states that upon admission to the facility and prior to assigning housing, monitoring staff will perform the initial intake screening screenings will be completed and documented using the 14-2-B, Sexual Abuse Screening Tool in OMSE.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that screening of inmates/detainees should only be used as a guideline for determining appropriate housing and services should never be used as the sole reason for the deprivation of a program or a privilege.

Each inmate is screened privately, and their housing programing and work assignments are determined on an individual basis. One case manager indicated to the auditor that she interviews the inmates, in their unit on some occasions, pulling them to the side. The auditor advised her and reported to management that while there may be some privacy, it would be best to have the inmate in an area, alone to ensure they feel safe to disclose any necessary information.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that in deciding

whether to house a transgender or intersex inmate/inmate in a male housing unit/ area or a female housing unit/area, or when making other housing and programming assignments for such inmates/inmates, the facility shall consider the transgender or intersex inmate/inmate's own views with respect to his/her own safety and shall consider on a case-by-case basis whether such a placement would ensure the inmate/ inmate's health and safety. Consideration should also be given as to whether the placement would present management or security problems.

- (d) Policy 14-02 Sexual Abuse Prevention and Response states that in deciding whether to house a transgender or intersex inmate/inmate in a male housing unit/ area or a female housing unit/area, or when making other housing and programming assignments for such inmates/inmates, the facility shall consider the transgender or intersex inmate/inmate's own views with respect to his/her own safety and shall consider on a case-by-case basis whether such a placement would ensure the inmate/ inmate's health and safety. Consideration should also be given as to whether the placement would present management or security problems.
- (e) Policy 14-02 Sexual Abuse Prevention and Response states that Transgender and intersex inmates/inmates shall be given the opportunity to shower separately from other inmates/inmates.
- (f) Policy 14-02 Sexual Abuse Prevention and Response states that the establishment of a unit or pod solely dedicated to the housing of LGBTI and/or Gender Non-Conforming inmates/inmates is strictly prohibited unless required by consent decree, legal settlement, or legal judgment for the purpose of protecting that inmate/inmate.

Policy 14-02 Sexual Abuse Prevention and Response states that Transgender and intersex inmates/inmates shall be given the opportunity to shower separately from other inmates/inmates.

(g) Policy 14-02 Sexual Abuse Prevention and Response states that the establishment of a unit or a pod solely dedicated to the housing of LGBTI and/or gender non-conforming inmates/detainees is strictly prohibited unless required by consent decree, court order or other comparable legal authority.

During staff interviews, the auditor inquired about how housing and programming determinations were made. Staff on the unit teams and MH staff mentioned a vulnerability list that is emailed to applicable staff after a screening determines that they are vulnerable. After a review of this, the management and the auditor agreed that too many staff received this email distribution and additional vulnerabilities were added that were not necessary. The facility, immediately re-trained staff on their requirement of this standard and a process and distribution list process was began.

While onsite, there were no transgender inmates housed in the facility to be interviewed. Numerous staff were questioned about this, rosters provided, and a memo provided to the auditor to document.

- Policy 14-02 Sexual Abuse Prevention and Response 14-02 B Sexual Abuse Screening Tool
- Transgender Inmate input on Housing Sample
- Inmate work Roster
- Housing Plan with Housing Assignments

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that inmates/detainees at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate/detainee in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment.
- (b) Policy 14-02 Sexual Abuse Prevention and Response states that inmate/detainees placed in segregated housing for this purpose shall have access to programs, privileges, education, or work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: the opportunities that have been limited, the duration of the limitation and the reasons for such limitations.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that segregated housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days.
- (d) Policy 14-02 Sexual Abuse Prevention and Response states that if involuntary segregated housing is warranted as outlined above, documentation of such action shall clearly specify: the basis for the facilities concern for the inmate/detainee's safety and the reason why no alternative means of separation can be arranged.
- (e) Policy 14-02 Sexual Abuse Prevention and Response states that every thirty (30) days, a review of each inmate/detainee's status will be conducted to determine whether there is a continuing need for separation from the general population.

The facility has advised the auditor that they have not had any inmates placed in voluntary segregated housing for high risk of sexual victimization within the last twelve (12) months.

Interviews with segregation staff, higher level and random staff revealed that there

have not been any instances where an inmate has been placed in segregation for this purpose. Staff were also aware of the requirements, should this occur in the future to review and allowing programs, privileges, education, and work opportunities.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response Incident statement
- Inmate file
- Confinement Review
- Confinement Record
- · Confinement Activity Record

115.51 Inmate reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that inmate/inmates shall be encouraged to immediately report pressure, threats, or instances of sexual abuse or sexual harassment, as well as possible retaliation by other inmates/inmates or employees for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmate/inmates who are victims of sexual abuse have the option to report and incident to a designated employee other than an immediate point-of-contact line officer by using any of the following methods.
- (b) Policy 14-02 Sexual Abuse Prevention and Response states inmate/inmates who are victims of sexual abuse have the option to report and incident to a designated employee other than an immediate point-of-contact line officer by using any of the following methods:
 - Calling the facility's twenty-four (24) hour toll-free notification telephone number;
 - Verbally telling any employee;
 - Forwarding a letter, sealed and marked 'confidential', to the Administrator/ Director or any other employee;
 - · Calling or writing someone outside the facility who can notify facility staff;
 - Forwarding a letter to the FSC PREA Coordinator
 - Onsite Monitoring Staff
 - National Sexual Abuse Hotline: 800-656-4673

Policy also states that inmates/detainees detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials

and relevant officials at the Department of Homeland Security.

(c) Policy 14-02 Sexual Abuse Prevention and Response states inmate/inmates who are victims of sexual abuse have the option to report an incident to a designated employee other than an immediate point-of-contact line officer by using any of the methods.

Policy also states that employees must take all allegations of sexual abuse and harassment seriously, including verbal, anonymous, and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports. All reports of sexual abuse and sexual harassment will be reported to the PREA Compliance Manager/Investigator. Employees having contact with the alleged victim should behave in a manner that is sensitive, supportive and non-judgmental.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that employees may privately report sexual abuse and sexual harassment of inmates/inmates by forwarding a letter, sealed, and marked 'confidential, to the facility Administrator/ Director.

If an inmate includes a PREA complaint in a grievance, the grievance coordinator or staff processing grievances would take it out of the time frame for grievance responses and place it immediately into the PREA response process. It would be turned over to the Investigator and a 5-1 Incident report would be completed. Technically an inmate could still submit a formal grievance on an allegation of sexual abuse or sexual harassment if he or she wished but the response would be expedited to ensure his/her safety.

Online at corecivic.com/the-prison-rape-elimination-act-of-2003-prea it states that staff and third parties my contact the CoreCivic Ethics and Compliance Hotline: 1-800-461-9330 or email www.corecivic.com/ethicsline.

In each housing area, as well as other common areas where bulletin boards exist, the auditor saw PREA education information to include: A memo in English and Spanish detailing how to report to an outside agency (San Diego County Sheriff's Department); a memo detailing the process of using the internal phone line reporting method; large copy of the handbook information in English and Spanish; a victim services memo, in English and Spanish.

While in housing unit Q, the auditor, after discussion with an inmate, asked him to show her the tablet. He demonstrated education materials and policies that were in the tablet for inmates to review. In addition, he showed how an inmate can file an inmate request. On the tablet, and unbeknownst to facility staff, the auditor send a test PREA allegation email. this was completed on February 20, 2024 at 0912 hours. At 0918 hours, just 6 minutes later, staff called and stated that this complaint was received by the facility PREA investigator. A print out of the receipt was then provided for verification.

- Policy 14-02 Sexual Abuse Prevention and Response
- CoreCivic Website
- CoreCivic Code of Ethics
- Participant (Inmate) Handbook
- First Responder card/staff reminders
- Sexual Assault Awareness and Prevention pamphlet (English and Spanish)
- PREA poster
- Inmate Interviews (Random and Specialized) Staff Interviews (Random and Specialized)

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer.
- (b) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately referred to the facility Investigator or Administrative Duty Officer.
- (d) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately referred to the facility Investigator or Administrative Duty Officer.

On the PAQ, staff indicated that there were no grievances filed alleging sexual abuse

in the past twelve months.

- (e) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately referred to the facility Investigator or Administrative Duty Officer.
- (f) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately referred to the facility Investigator or Administrative Duty Officer.

On the PAQ, staff indicated that there were no emergency grievances filed alleging sexual abuse in the past twelve months.

(g) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately referred to the facility Investigator or Administrative Duty Officer.

An interview was held with the facility grievance officer. They described the process of filing a grievance and stated that should they receive a grievance with a PREA related topic they would immediately turn over to the PCM and the facility investigator. There was one sample in the past three years, which was provided for review and demonstrated just that. The investigation for this grievance was also reviewed, to demonstrate immediate and appropriate follow up. In addition, the auditor randomly selected three recent months and reviewed the grievance logs.

While on site, on February 21, the auditor discreetly picked up a 14-5B Inmate Grievance form and completed it indicating that this was a test, and the whoever retrieves it, should immediately get to the facility PCM and auditor. The auditor, while alone in an area, placed this in a secure grievance mailbox. on February 22, 2024 at 0856 hours, this was retrieved, time stamped and returned to the auditor, verifying receipt.

- Policy 14-02 Sexual Abuse Prevention and Response Inmate Handbook
- Grievance Log
- · Inmate confidential Mailboxes

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that inmates/inmates shall be provided 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. Such information shall be included in the facilities inmate's handbook. The facility shall enable reasonable communication between inmate/inmates and these organizations and agencies, in as confidential a manner as possible.
- (b) Policy 14-02 Sexual Abuse Prevention and Response states that inmates/inmates shall be informed, prior to giving them access, of the extent to which such communications shall be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic shall maintain or attempt to enter Memorandums of Understanding (MOU) or other agreements with community services providers that are able to provide inmates with confidential emotional support services related to sexual abuse.

An interview was held with an advocate at the Center for Community Solutions. A discussion was held in regards to helping incarcerated survivors. The advocate detailed their willingness to speak with and visit with those who request it. She did state that they have not received many calls from OTDC, since mist individuals were short term in regards to their stay, she indicated that they receive and work with many survivors at nearby prison facilities as well. The Center has a 24/7 live advocate available and would respond in the event that a SANE exam was necessary.

- Policy 14-02 Sexual Abuse Prevention and Response
- CoreCivic Sexual Assault Advocacy pamphlet
- · PREA posters
- Inmate Handbook

| 115.54 | Third-party reporting |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

(a) Policy 14-02 Sexual Abuse Prevention and Response states that each facility shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall post this information on the facility PREA link.

There have been no outside third party PREA reports to date.

The CoreCivic website provides PREA information and reporting mechanisms for third parties:

The Prison Rape Elimination Act (PREA), a federal law enacted in 2003, was created to eliminate sexual abuse in confinement. In addition to providing federal funding for research, programs, training, and technical assistance to address the issue, the legislation mandated the development of national standards. The National Prison Rape Elimination Commission developed recommended national standards for reducing prison rape. The final standards became effective June 20, 2012, when they were published by the Department of Justice (DOJ) in the Federal Register. More recently, the US Department of Homeland Security (DHS) released final standards for DHS confinement facilities, effective May 6, 2014.

The full text of the standards can be found at www.PREAResourceCenter.org.

Protecting Those in Our Care

As stated in our Human Rights Policy statement, CoreCivic recognizes the inherent dignity of the human person and the need to treat every individual with respect. Part of treating our inmates and detainees with respect is giving them a safe place to live. We believe in safeguarding their rights, including protecting them from being subjected to personal abuse/injury and harassment.

To learn more about CoreCivic's efforts to protect inmate and detainee rights, click here to be directed to our page under For Families.

Zero Tolerance Policy

In compliance with Section 115.11 of the PREA regulation, CoreCivic has established a Zero Tolerance Policy against all forms of Sexual Abuse and Sexual Harassment. CoreCivic has outlined an aggressive plan specifying the efforts we undertake to Prevent, Detect, and Respond to all allegations of conduct that falls into either category.

This plan is articulated in CoreCivic's Policy 14-2, Sexual Abuse Prevention and Response, which is available here.

Staff Training and Inmate/Detainee Education

CoreCivic has designed a comprehensive training plan for all staff that complies with the content of Section 115.31 of the regulation. The standard requires that this training be refreshed every two years, however, as a part of our commitment to eliminating sexual abuse and sexual harassment in our facilities, CoreCivic has opted to ensure this training is provided annually.

All inmates, detainees, and residents received at a CoreCivic facility beginning at initial reception receive education on the requirements of PREA. This training has a particular focus on CoreCivic's Zero Tolerance Policy, the right to be free from Sexual Harassment and Sexual Abuse, directions on how to report allegations of Sexual Abuse or Sexual Harassment, and the right to be free from retaliation for reporting incidents.

Reporting Allegations of Sexual Abuse/Sexual Harassment

Anyone can report an allegation or suspected incident of sexual abuse or sexual harassment; including inmates, staff, or third parties. This can include allegations that may have occurred at another correctional facility. At a CoreCivic facility, there are multiple options to file a report; including, but not limited to:

Send a letter to the warden of the facility at the address provided on our facility locator.

Inmates may notify any staff member either verbally or in writing or they may call the PREA hotline numbers posted at their facilities.

Staff may report allegations via their chain of command or anonymously through the employee hotline numbers provided.

Staff and third parties may contact the CoreCivic's Ethics and Compliance Hotline: 1-800-461-9330 or e-mail www.corecivic.com/ethicsline

It is not required that any personal information be provided. However, the more information that can be provided regarding dates, times, locations, witnesses, and as much detail about the alleged incident as is known serves to assist staff and law enforcement in their efforts to successfully conduct the investigations.

Investigations

All allegations of sexual conduct shall be promptly, thoroughly, and objectively investigated. Upon the conclusion of the investigation, each allegation will be classified as Substantiated, Unsubstantiated, or Unfounded. Allegations of Sexual Abuse will be referred to the appropriate law enforcement agency for investigation and potential prosecution. All substantiated allegations of sexual abuse or sexual harassment will result in the appropriate disciplinary actions taken against the Employee, Contractor, Volunteer, or Inmate, and where appropriate referral for prosecution.

Facility Investigators have all received specialized training regarding how to conduct investigations of sexual abuse in the correctional setting. Criminal allegations are generally referred via agreement to Local Law Enforcement Agencies or Investigating bodies under the authority of the Contracting Agency.

Inquiries

Each CoreCivic facility has a PREA Compliance Manager who can respond to questions and receive reports of allegations of sexual abuse and sexual harassment. In addition, CoreCivic has a PREA Coordinator who is responsible company-wide for the development, implementation, and oversight essential to demonstrate compliance with the National PREA Standards.

Questions or inquiries can be forwarded to:

Eric S. Pierson, Senior Director — PREA Compliance and Programs

CoreCivic

5501 Virginia Way, Suite 110

Brentwood, Tennessee, 37027

1-615-263-6915

Note: Institutional employers seeking PREA background information on current or former CoreCivic employees in accordance with PREA Standard 115.17(a)(h) should contact the Human Resources Manager at the last CoreCivic facility where the individual was known to have been employed. Contact numbers for each facility are posted on this web-site. If the facility is closed, inquiries may be submitted to Human Resources at the CoreCivic corporate office.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response CoreCivic PREA Website
- Preventing Sexual Abuse and Misconduct Inmate Handbook
- Posters and Information Boards throughout facility
- Public Website

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation is required to be reported immediately by all employees.

Policy further states that all employees must immediately report:

- Any knowledge suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility in accordance with this policy, whether or not the area is under CoreCivic's management;
- Retaliation against inmates/detainees or employees who have reported such an incident; and
- Any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.

All staff have signed an acknowledgment of this provision, on the 14-2A form, CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgement.

A note from the facility stated that the facility has had no reports of retaliation against staff or inmate who have reported incidents of alleged sexual abuse or sexual harassment since the previous audit.

- (b) Policy 14-02 Sexual Abuse Prevention and Response states that apart from reporting to designated supervisors or officials, employees shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, and as specified in this policy, to make treatment, investigation, and other security and management decisions. When it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise precluded by federal, state or local law, medical and mental health professionals shall be required to follow reporting procedures as outlined in policy. At the initiation of providing medical care, both medical and mental health professionals will inform inmate of their professional duty to report and the limitations of confidentiality.

Medical and mental health staff interviewed were able to articulate this standard and requirement.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that employees may privately report sexual abuse and sexual harassment of inmates by forwarding a letter, sealed and marked 'confidential' to the facility Administrator/Director or contact the CoreCivic ethics and compliance hotline.

Further, policy states that if the alleged victim is under the age of eighteen (18) or considered a vulnerable adult under a state or local vulnerable person's statute, the allegation shall be reported to the designated state or local services agency under applicable mandatory reporting laws.

This facility indicated that they have not had any incidents of alleged sexual abuse and/or sexual harassment in which the alleged victim is under the age of 18 or considered a vulnerable adult within the last twelve (12) months.

(e) Policy 14-02 Sexual Abuse Prevention and Response states that all reports of sexual abuse and sexual harassment will be reported to the PREA Compliance Manager/Investigator. Employees having contact with the alleged victim should behave in a manner that is sensitive, supportive and non-judgmental.

The auditor reviewed a report and was able to see the process involving the provisions of this standard. This facility does not house juveniles.

- Policy 14-02 Sexual Abuse Prevention and Response Staff Rosters
- 5-1C Incident report
- Incident Log
- Employee Training
- Inmate Notification Poster
- Staff Acknowledgement Sheets
- Notes/Memos
- Investigative Report with detailed first responder duties Interviews with Random Staff
- Interviews with Specialized Staff

115.62 Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that when it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate. It is CoreCivic's policy to aggressively investigate all allegation, regardless of the source, and prosecute those who are involved in incidents of sexual abuse. Alleged victims of sexual abuse or harassment will be provided a supportive and protective environment.

In the past twelve (12) months, there was no instances the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.

During an interview with CoreCivic Vice President, Operations Administration, he stated that staff take immediate action to protect the inmate by removing the inmate form the area and/or individuals where risks may be stemming from, and an investigation is immediately initiated.

Staff of all levels who were interviewed and asked this question, stated that they would take steps to immediately protect this inmates.

- Policy 14-02 Sexual Abuse Prevention and Response
- Interview with CoreCivic Vice President, Operations Administration Sample Report
- Interview with PC
- Interview with Random Staff

Interviews with Random Staff

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that if the allegation involves events that took place while the alleged victim was not in CoreCivic custody (e.g. while housed at another provider's facility), the following actions shall be taken:
- 1. The Warden that received the allegation shall contact the facility head or appropriate office of the facility where the alleged abuse took place as soon as possible, but no later than seventy-two (72) hours after receiving the allegation.
- 2. Determine whether the allegation was reported and investigated.
- a. If the allegation was reported and investigated by the appropriate officials, the facility shall document the allegation, the name and title of the person contacted and that the allegation has already been addressed. Under this circumstances, further investigation and notification need not occur.
- b. If the allegation was not reported or not investigated, a copy of the statement of the inmate/detainee shall be forwarded to the appropriate official at the location where the incident was reported to have occurred.

The facility Warden and the PAQ stated that there have been one allegation that an inmate was sexually abused while confined at another facility and he provided documentation of an email that he immediately notified the other facility Warden.

- (b) Policy 14-02 Sexual Abuse Prevention and Response states that if the allegation involves events that took place while the alleged victim was not in CoreCivic custody (e.g. while housed at another provider's facility), the following actions shall be taken:
- 1. The Warden that received the allegation shall contact the facility head or appropriate office of the facility where the alleged abuse took place as soon as possible, but no later than seventy-two (72) hours after receiving the allegation.
- 2. Determine whether the allegation was reported and investigated.
- a. If the allegation was reported and investigated by the appropriate officials, the facility shall document the allegation, the name and title of the person contacted and that the allegation has already been addressed. Under this circumstances, further investigation and notification need not occur.
- b. If the allegation was not reported or not investigated, a copy of the statement of the inmate/detainee shall be forwarded to the appropriate official at the location where the incident was reported to have occurred.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that all such contacts

and notification shall be documented on the 5-1B Notice to Administration; including any details learned from contact with the site where the alleged abuse took place, and the facilities response to the allegation.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that if an allegation is received from another facility, the Warden will ensure the allegation is investigated.

During an interview with the CoreCivic Vice President, Operations Administration, he stated referrals to and from other facilities occurs most often at the facility level rather than at the corporate office level. The information is received by the Warden at the facility. However, any staff who received the information know to report it to the Warden, for appropriate action. It then gets added into our incident system and the PREA protocols are initiated. If the allegation was alleged to have occurred at another facility, the facility Warden receiving the information would notify the Warden at the other facility within 72 hours. If the allegation received was that an incident of sexual abuse allegedly occurred within the CoreCivic facility both the partner agency and the investigative entity responsible for criminal investigations would be notified.

He also stated that the most common examples are allegations inmates make during their intake process. The CoreCivic staff obtain as much information as possible from the inmate and provide this to Warden at the other facility as part of the notification.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Interview with CoreCivic Vice President, Operations Administration
- Sample Email Notification to another facility

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states in the Response Procedures Sections that any employee who discovers or learns of sexual abuse, or an allegation of sexual abuse, shall ensure that the following actions are accomplished:
- a. The alleged victim is kept safe, has no contact with the alleged perpetrator and is immediately escorted to the Health Services Department.
- b. While in the private area, employees shall, to the best of their ability, ensure that that the victim does not wash, shower, remove clothing use the restroom facilities, eat drink, smoke or brush his/her teeth. The highest-ranking authority on-site is immediately notified and will further ensure to protect the safety of the victim and

the integrity of the crime scene and any investigation.

Further policy states that upon notification of alleged sexual abuse, highest ranking authority on-site will ensure the following actions are accomplished:

a. When the alleged perpetrator is an inmate/detainee, in order to preserve any evidence, the alleged perpetrator is not allowed to wash, shower, brush his/her teeth, use the restroom facilities, change clothes, or eat or drink while secured in segregation in a single cell.

All staff have signed an acknowledgment of this provision, on the 14-2A form, CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgement. The acknowledgment for all staff selected were reviewed by the auditor and in compliance.

A sample report was reviewed by the auditor for an incident of alleged sexual abuse. In the report, staff documented their efforts to maintain the preservation of evidence as noted in the provisions of this standard and in policy.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that if the first staff responder is not a security staff member, the responder shall be required to request that they alleged victim not take any actions that could destroy physical evidence and notify security staff.

Staff are all provided, and the auditor saw while on-site, a First Responder Duty card to add to their ID. It states:

• A has a zero tolerance for all forms of sexual abuse and sexual harassment.

FIRST RESPONDER DUTIES:

- Separate the alleged victim and abuser (ordinarily the victim should not be placed in segregation/restrictive housing).
- Preserve and protect the crime scene until steps can be taken to collect evidence.
- If the abuse occurred within a time period that still allows for the collection of physical evidence, request the alleged victim not take any actions that could destroy physical evidence (such as washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating).
- Ensure the alleged abuser does not take any of the above actions that could destroy physical evidence.
- Immediately notify your supervisor and medical and mental health practitioners.
- Confidentiality must be maintained, apart from reporting to designated supervisors or officials.

Random staff interview, when provided with a scenario, were able to detail this first responder process in detail.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- First Responder Cards
- PREA Training Acknowledgments
- Note/Memo stating that the facility had no incidents reported in the past twelve (12 months) Policy Change Notice, 14-2
- · Interviews with Random Staff
- Interview with PCM
- Sample Report

115.65 Coordinated response

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that each facility will establish a SART which includes the following positions:
 - PREA Compliance Manager o Security Representative
 - The SART responsibilities shall include the following:
 - Responding to reported incidents of sexual abuse;
 - Responding to victim assessment and support needs;
 - Ensuring policy and procedures are enforced to enhance inmate safety; and
 - Participating in the development of practices and/or procedures that encourage prevention of sexual abuse and enhance compliance with PREA National Standards.

Further, policy states that any employee who discovers or learns of sexual abuse, or an allegation of sexual abuse shall ensure that the following actions are accomplished:

The alleged victim is kept safe, has no contact with the alleged perpetrator, and is immediately escorted to the Health Services Department.

While in the Health Services, employees shall, to the best of their ability, ensure that that the victim does not wash, shower, remove clothing use the restroom facilities, eat drink, smoke or brush his/her teeth. The highest-ranking authority on-site is immediately notified and will further ensure to protect the safety of the victim and the integrity of the crime scene and any investigation.

The highest-ranking authority onsite is immediately notified and will further ensure to protect the safety of the victim and the integrity of the crime scene and any

investigation.

When the alleged perpetrator is an inmate/detainee, he/she is secured in a single cell in the event evidence collection is required.

All acquired information concerning the allegation is kept confidential.

An incident statement is written in accordance with the CoreCivic Policy 5-1C.

Policy then further goes on to describe, in detail, all processes that would follow, to include but not limited to: preserving evidence; notifications; scene preservations; notifications if this occurred at another location; steps in the event an employee was involved; review team; administrative and criminal investigations; roles with an investigating entity; and advocacy.

In the response plan, the Sexual Abuse Incident Check Sheet, form 14-2C is included. This is used at the initiation of any incident allegation that may occur and ensures that all steps in the plan are carried out in a timely manner.

A memo dated September 7, 2023 was reviewed in which the Warden and PCM outline the Sexual Abuse Response Team (SART) process and people involved. This was provided to all facility staff.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Interview with CoreCivic Vice President, Operations Administration
- Memo designating Sexual Abuse Response Team

115.66

Preservation of ability to protect inmates from contact with abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that neither CoreCivic nor any other entity responsible for collective bargaining on CoreCivic's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the company's ability to remove alleged employee 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. Nothing in this requirement shall restrict entering into or renewal of agreements that govern:
 - The conduct of the disciplinary process, as long as such agreements are not

inconsistent with the provisions outlined above in Q.2.a-c. and a preponderance of the evidence in determining whether sexual abuse or sexual harassment are substantiated.

 Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the employees personnel file following a determination that the allegation of sexual abuse is not substantiated.

During an interview with the CoreCivic Vice President, Operations Administration, he stated that CoreCivic as an agency has entered into and/or renewed collective bargaining agreements since August 20, 2012. The agreements permit CoreCivic to remove alleged staff sexual abusers from contact with an inmate pending an investigation of disciplinary action.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Interview with CoreCivic Vice President, Operations Administration
- Memo

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states under the section titled SART Member Responsibilities that the PREA Compliance Manager will review the facility's response to sexual abuse allegations, with the Administrator/Director or designee, to ensure the policy is implemented effectively and victims needs are addressed; serve as a primary liaison with local law enforcement or delegate this responsibility; ensure the completion of the Sexual Abuse Incident Check Sheet; and ensure that thirty/sixty/ninety (30/60/90) day monitoring is conducted by the designated staff, following a report of sexual abuse or sexual harassment, to protect against potential retaliation against inmates or employees. This shall include periodic status checks of inmates and review of relevant documentation. If an allegation is determined to be unfounded, retaliation monitoring will no longer be required.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that to ensure that thirty/sixty/ninety (30/60/90) day monitoring is conducted by the designated staff, following a report of sexual abuse or sexual harassment, to protect against potential retaliation against inmates or employees. Policy further states that monitoring shall

continue beyond ninety (90) days if the initial monitoring indicates a continuing need. The PCM shall ensure prompt action are taken to remedy any identified retaliation.

In the past twelve (12) months, there has been zero incidents of retaliation occurring at this facility, according to the PAQ.

- (d) Policy 14-02 Sexual Abuse Prevention and Response states that this shall include periodic status checks of inmates/detainees and review of relevant documentation.
- (e) Policy 14-02 Sexual Abuse Prevention and Response states the PCM will ensure any other individual who cooperate with an investigation and expresses fear of retaliation is protected from retaliation.

During an interview with the CoreCivic Vice President, Operations Administration, he stated that for both inmates and staff who have reported allegation of sexual abuse, we provide monitoring on a 30/60/90-day period, longer if needed, to ensure no retaliation has occurred. These reviews are documented on an attachment to our 14-2 policy. The review takes into consideration any actions which may be perceived as retaliatory whether it be housing and/or job assignments with inmates and shift changes, evaluations, etc. for staff. These reviews also prohibit retaliation for any reason, and we include this expectation in training with staff. Any violations are acted upon accordingly. For those who cooperate and express a fear of retaliation, our policies and practices prohibit retaliation for any reason, and we include the expectation in training with staff. Any violations are acted upon accordingly.

An interview was held with the retaliation monitor, who was able to describe the process, form, and what he looks for when completing these.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- · Blank form, PREA Retaliation report monitoring
- Memo, indicating staff who will conduct all monitoring and process 5-1A Incident Report
- 30/60/90 Day Retaliation Monitoring Report
- Interview with CoreCivic Vice President, Operations Administration Interview with Random Staff
- · Interview with PCM

| 115.68 | Post-allegation protective custody | | |
|--------|---|--|--|
| | Auditor Overall Determination: Meets Standard | | |
| | Auditor Discussion | | |

a) Policy 14-02 Sexual Abuse Prevention and Response states that inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available means of separation from likely abusers. If the facility cannot conduct such an assessment immediately, the facility may hold the inmate/detainee in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment.

Policy 14-02 Sexual Abuse Prevention and Response states that inmate/detainees placed in segregated housing for this purpose shall have access to programs, privileges, education, or

work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: the opportunities that have been limited, the duration of the limitation and the reasons for such limitations.

In addition, Policy 14-02 Sexual Abuse Prevention and Response states that segregated housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days. If involuntary segregated housing is warranted as outlined above, documentation of such action shall clearly specify: the basis for the facilities concern for the inmate/detainee's safety and the reason why no alternative means of separation can be arranged.

(e) Policy 14-02 Sexual Abuse Prevention and Response states that every thirty (30) days, a review of each inmate/detainee's status will be conducted to determine whether there is a continuing need for separation from the general population.

The facility advised the auditor that the Otay Mesa has had no inmates placed in involuntary segregated housing for high risk of sexual victimization within the last twelve (12) months.

Segregation staff interviewed stated that they have not seen any instances of this occurring.

The auditor met with and interviewed the segregation supervisor while onsite and questioned about the process of placing an inmate into segregation, reviews and what would occur if an inmate was placed in segregation for protective custody. The sergeant detailed these processes at length and then provided samples of emails that are send and segregation review documents demonstrating that no person is in segregation for this purpose currently or as he stated, not that he could recall in the past three years.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

Policy 14-02 Sexual Abuse Prevention and Response

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that it is CoreCivics policy to aggressively investigate all allegations, regardless of the source, and prosecute those who are involved in incidents of sexual abuse.
- (b) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees and to the extent that CoreCivic conducts sexual abuse investigations, investigators shall receive training in conducting sexual abuse investigations in confinement settings. The PCM shall ensure that more than one (1) person at the facility receives training as a sexual abuse investigator. This will ensure that a trained investigator is available as backup during employee absences (e.g.) leave, paid time off, sickness, offsite training, etc.) from work.

Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Policy 14-02 Sexual Abuse Prevention and Response also states that it is Core Civics policy to aggressively investigate all allegations, regardless of the source, and prosecute those who are involved in incidents of sexual abuse.

The facility provided a Certificate of Completion for the one (1) assigned facility investigator. The certificate is from a training entitled PREA: Investigating Sexual Abuse in a Confinement Setting which was delivered online through the National Institute of Corrections.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that specialized shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Policy also states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies.

The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections) and each training included the requirements of the standard and Policy 14-02: Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

The auditor selected 8 investigation files to review to determine compliance with this and other standards. Of all reviewed, the reports were thorough, prompt, objective and included all elements of this and other standards. The investigations were each so detailed that they left no questions for an outside reader as to details and descriptions.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Policy also states that documentation confirming that the investigator completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies.

The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections) and each training included the requirements of the standard and Policy 14-02: Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

(f) Policy 14-02 Sexual Abuse Prevention and Response states that investigators will detail in the report any testimonial evidence, reasoning behind credibility assessments, investigative findings and whether actions and/or failures of staff to act contributed to the incident, including an explanation as to what determined the outcome.

The administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse. Such investigations shall be documented on the 5-1G Incident Investigation Report via the IRD and shall detail the following components:

- · Investigative facts
- Physical evidence
- Testimonial evidence
- Reasoning behind credibility assessments (credibility shall be assessed on an individual basis and shall not be determined by the person's status as an inmate/detainee or employee.
- (g) OMDC does not conduct criminal investigations. Any criminal reports would be written by outside law enforcement.

Policy 14-02 Sexual Abuse Prevention and Response states that the PCM, Warden/ Facility Administrator or designee shall immediately report all allegations of rape, sexual assault, or employee on inmate/detainee sexual misconduct to state or local law enforcement agencies for criminal investigation if the allegation (if proven true) would be considered a criminal act under federal, state, or local law.

- (h) OMDC does not conduct criminal investigations. Any criminal reports would be written by outside law enforcement and subsequently referred for prosecution by the law enforcement agency. CoreCivic and OMDC will, however, cooperate in any way possible through this process.
- (i) Policy 14-02 Sexual Abuse Prevention and Response states that all case records with claims of sexual abuse, including incident reports, investigative reports, inmate/ detainee information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained in accordance with CoreCivic Policy 1-15 Retention of Records.

CoreCivic Policy 1-15 Retention of Records stats that 115 B Records Retention Schedule will be utilized to determine the retention period of company records. Records stored electronic are subject to the same retention period and procedures as documents store in non-electronic forms. On the Schedule it stated that 5-1 Incident Packets and Aggregated PREA Sexual Abuse data shall be retained for ten (10) years. In addition, PREA investigative files and written reports to be retained if the alleged abuser is incarcerated or employed plus five (5) years.

- (k) Policy 14-02 Sexual Abuse Prevention and Response states that investigations conducted by a facility employee for allegations of sexual abuse will be handled in accordance with the Code of Federal Regulation, title 28, part 115.21, Evidence Protocol and Forensic Medical Examinations, as outlined below. If the facility is not responsible for investigating such allegations, the facility shall request that the responsible outside agency or entity comply with these requirements:
- The investigating entity shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.
- (I) Policy 14-02 Sexual Abuse Prevention and Response states that whenever feasible, the facility shall enter into a written Memorandum of Understanding with the outside investigating agency or entity outlining the roles and responsibilities of both the facility and the investigating entity in performing sexual abuse investigations. Before developing or attempting to enter an MOU, the facility shall contact the FSC Assistant General Counsel, Vendor Contract. CoreCivic shall maintain copies of agreements or documentation showing attempts to enter into such agreements. When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

The auditor selected 8 investigation files to review to determine compliance with this and other standards. Of all reviewed, the reports were thorough, prompt, objective and included all elements of this and other standards. The investigations were each so detailed that they left no questions for an outside reader as to details and descriptions. For the thoroughness and completeness of the files, the auditor is

giving an exceeds to the facility for this standard. Even when not required, the investigator completed each step of the investigation process (for this standard and others) and left no room for questions or doubt.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- PREA Standards Compliance Checklist
- Policy 14-02 Sexual Abuse Prevention and Response Investigations Training
- Investigations Records
- Investigation Samples
- Policy 1-15 Retention of Records

115.72 Evidentiary standard for administrative investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states in any sexual abuse or sexual harassment investigation in which the facility is the primary investigating entity, the facility shall utilize the preponderance of the evidence standard for determining whether sexual abuse or sexual harassment has taken place.

A PowerPoint Training excerpt was shown to the auditor from the PREA Resource Center which stated "the criteria for administrative action are determined by individual agencies. However, the Standards required that agencies set the bar no higher than requiring the preponderance of the evidence to substantiate an allegation for administrative action, which would mean that more than 50% of the evidence supports the allegation.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- 5-1A Incident Report with 5-1G Investigative Report
- Investigations Training

| 115.73 | Reporting to inmates |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

(a) Policy 14-02 Sexual Abuse Prevention and Response states that following an investigation into an inmate's allegation that he/she suffered sexual abuse at the facility, the inmate shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the facility did not conduct the investigation, the relevant information shall be requested from the outside investigating agency or entity in order to inform the inmate.

In the past twelve (12) months, there were eight (8) investigations of alleged inmate sexual abuse completed.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that following an investigation into an inmate's allegation that he/she suffered sexual abuse at the facility, the inmate shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the facility did not conduct the investigation, the relevant information shall be requested from the outside investigating agency or entity in order to inform he inmate.

In the past twelve (12) months, there were eight (8) investigations of alleged inmate sexual abuse completed.

- (c) Policy 14-02 Sexual Abuse Prevention and Response states that following an inmate's allegation that an employee has committed sexual abuse against the inmate the facility shall subsequently inform the inmate (unless the facility has determined that hey allegation in unfounded) whenever:
- (1) The employees no longer posted within the inmates unit as a result of the finding of the investigation;
- (2) The employee is no longer employed at the facility;
- (3) The facility learns that the employee has been indicted on a charge related to sexual abuse within the facility; or
- (4) The facility learns that the employee has been convicted on a charge related to sexual abuse within the facility.
- (d) Policy 14-02 Sexual Abuse Prevention and Response states that following an inmates allegation that he/she has been sexually abused by another inmate, the facility shall subsequently inform the alleged victim whenever:
- 1. The facility learns that the alleged abuser has been indicted in a charge related to sexual abuse within the facility; or
- 2. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

In the past twelve (12) months, according to the PAQ, there have been four (4) notifications to inmates provided.

(e) Policy 14-02 Sexual Abuse Prevention and Response states all inmates/inmate notifications or attempted notifications shall be documented on the 14-2-E Inmate Allegation Status Notification. The inmate shall sign the 4-2 -E, verifying that such notification has been received. The signed 14-2-e shall be filed in the inmate's

institutional file.

In the past twelve months, according to the PAQ, there have been four (4) notifications to inmates provided. The others were released prior to the completion of the investigation and could not be notified.

(f) Policy 14-02 Sexual Abuse Prevention and Response states the facilities obligation to notify the inmate as outlined in the section shall terminate if the inmate is released from CoreCivic's custody.

During the initial visit to the facility, a total of eight investigations were selected to be reviewed.

The investigator and PCM were interviewed, and he was extremely knowledgeable of this standard.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Interview with PC
- · Interview with PCM
- Interview with Director
- Inmate PREA Allegation Status Notification, 14-2E- Substantiated Inmate PREA Allegation Status Notification, 14-2E- Unsubstantiated Inmate PREA Allegation Status Notification, 14-2E- Unfounded

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic's sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for employees who have engaged in sexual abuse.

OMDC has not had any staff disciplined for violating sexual abuse or sexual harassment policies within the past twelve (12) months.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic's sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for employees who have engaged in sexual abuse.

In the past twelve (12) months, according to the PAQ, there have been zero staff members who have been terminated, disciplined or reported to law enforcement for violating agency sexual abuse or sexual harassment policies.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that disciplinary sanctions for violations of CoreCivic policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the employee's disciplinary history, and the sanctions imposed for comparable offenses by other employees with similar histories.

In the past twelve (12) months, according to the PAQ, there have been zero staff members who have been terminated, disciplined or reported to law enforcement for violating agency sexual abuse or sexual harassment policies.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that all terminations for violations of CoreCivic sexual abuse or sexual harassment policies, or resignations by employees who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

In the past twelve (12) months, according to the PAQ, there have been zero staff members who have been terminated, disciplined or reported to law enforcement for violating agency sexual abuse or sexual harassment policies.

During interviews, the Warden, HR and PCM detailed the process for investigations to include placing staff who are alleged to have abused inmates on administratively leave immediately, so as to know cause any harm to additional inmates. In addition, each detailed the process, should an investigation be completed, of discipling staff.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- · Code of Ethics
- Interviews with Warden, HR, and PCM

115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that any volunteer or contractor who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. Any other violation of

CoreCivic sexual abuse or sexual harassment policies by a volunteer or contractor will result in further prohibitions.

In the past twelve (12) months, according to the PAQ, there have been zero contracted staff member's who have been terminated or reported to law enforcement for violating agency sexual abuse or sexual harassment policies.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that any volunteer or contractor who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. Any other violation of CoreCivic sexual abuse or sexual harassment policies by a volunteer or contractor will result in further prohibitions.

There have been no substantiated allegations of contractor or volunteer sexual abuse/harassment.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Interviews with PC and PCM

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engages in inmate-on-inmate abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

Policy also states that because the burden of proof is substantially easier to prove in an inmates/detainee's disciplinary case than in a criminal prosecution, an inmate/ detainee may be institutionally disciplined even through law enforcement officials decline to prosecute.

In the past twelve (12) months, there have been no administrative findings or criminal findings of guilt on inmate-on-inmate abuse that have occurred at this facility, according to the PAQ.

(b) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that sanctions shall be 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.

(c) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that the disciplinary process shall consider whether an inmates mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed.

In addition, Policy 15-2, Disciplinary Procedures states that if the inmate has been diagnosed as having a psychiatric illness, he Warden/Administrator and the responsible physician or their designee will be consulted prior to the disciplinary measures recommended by the Hearing Officer or Disciplinary Board being taken.

- (d) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures that if the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the alleged perpetrator to participate in such interventions as a condition of access to programming or other benefits.
- (e) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that an inmate may be disciplined for sexual conduct with an employee only upon finding that the employee did not consent to such contact.
- (f) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that inmates who deliberately allege false claims of sexual abuse can be disciplined. For the purposes of disciplinary action, a report of sexual abuse made in good faith based on a reasonable belief that the alleged contact occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

In the past twelve (12) months, there have been no inmates that received disciplinary action for falsified reports of sexual abuse.

(g) The facility advised the auditor that there are no explicit statements to this effect at this facility.

Policy 14-02 Sexual Abuse Prevention and Response states that sexual activity between inmates/detainees or employees/civilians/contractors and inmates/detainees regardless of consensual status, is strictly prohibited and subject to administrative and criminal disciplinary sanctions.

Policy further states that sexual activity between inmates/detainees is prohibited in all CoreCivic facilities, and inmates/detainees may be disciplined for such activity. Such activity shall not be deemed sexual abuse if it is determined that the activity is not coerced.

Documents Reviewed, Interviews Conducted, and Observations that helped

auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response Policy 15-1 Offense and Penalty Code
- Policy 15-2 Disciplinary Procedures
- Incident report
- Memo/Note
- Staff interviews

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-2 Sexual Abuse Prevention and Response states that screening shall include interview questions and a review of the inmate/detainee's institutional file. Prior convictions of this type will also be considered.
- (b) Policy 14-2 Sexual Abuse Prevention and Response states that screening shall include interview questions and a review of the inmate/detainee's institutional file. Prior convictions of this type will also be considered.
- (c) Policy 14-2 Sexual Abuse Prevention and Response states that screening shall include interview questions and a review of the inmate/detainee's institutional file. Prior convictions of this type will also be considered.
- (d) Policy 14-2 Sexual Abuse Prevention and Response states that all information concerning an event of inmate/detainee sexual abuse or sexual harassment is to be treated as confidential. Apart from reporting to designated supervisors or officials, employees shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in this policy, to make treatment, investigation, and other security and management decisions. This information should never be shared with other inmates/detainees.

Policy also states that patient inmate information, whether in the form of the documentary medical record, computerized data, or as information known to a member of the Health Services staff, is strictly confidential and may be disclosed only to those who are responsible for the patient inmate's care or who have a legitimate interest in the patient inmate's medical history.

With the exception of QHCP, staff shall have access to patient inmate information on a need to know basis, and clinicians may abstract patient inmate information for consultants to whom they refer patient inmates.

Policy 13-74, Privacy of Protected Health Information thoroughly outlines all staff who

may have access to protected health information and the process of consent to release any information.

(e) Policy 13-74, Privacy of Protected Health Information thoroughly outlines all staff who may have access to protected health information and the process of consent to release any information. Further it states that an authorization from the patient is required for use and disclosure of PHI for all individuals not outlines in the policy as having access.

Policy 14-2 Sexual Abuse Prevention and Response states that treatment services shall be 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.

During staff interviews, the auditor inquired about how housing and programming determinations were made. Staff on the unit teams and MH staff mentioned a vulnerability list that is emailed to applicable staff after a screening determines that they are vulnerable and trigger MH needed to see these individuals for an appointment. After a review of this, the management and the auditor agreed that too many staff received this email distribution and additional vulnerabilities were added that were not necessary. The facility, immediately re-trained staff on their requirement of this standard and a process and distribution list process was began and MH advised of which inmates needed to be seen within the two week period.

Forty inmate files were selected from a roster of 359 inmates and the facility was asked to provide copies of each inmates MH referral when needed. Of these, 7 required, based on their screening responses, to be offered a medical/MH followup and all were completed timely. The PAQ indicated that 100 inmates total have. received this referral offer with in the past 12 months.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Policy 13-74 Privacy of Protected Health Information
- 14-2 Screening Tool

| 115.82 | Access to emergency medical and mental health services | | | | |
|--------|---|--|--|--|--|
| | Auditor Overall Determination: Meets Standard | | | | |
| | Auditor Discussion | | | | |
| | (a) Policy 14-2 Sexual Abuse Prevention and Response states that inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical | | | | |

treatment and crisis interventions services, the nature and scope of which shall be determined by community medical and mental health practitioners according to their professional judgment.

Policy 14-02 Sexual Abuse Prevention and Response states in the Response Procedures Sections that any employee who discovers or learns of sexual abuse, or an allegation of sexual abuse, shall ensure that the following actions are accomplished:

a. The alleged victim is kept safe, has no contact with the alleged perpetrator and is immediately escorted to the Health Services Department.

Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged RAPE that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol ad will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.

Beyond the seventy-two (72) hours, physical trauma is evident, the patient inmate will be transported to the local designated emergency room, in accordance with the procedures outlined above.

Policy 13-79 Sexual Assault Response states that patient inmate victims of sexual abuse shall be offered testing for sexually transmitted infections and 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. Patient inmate victims of sexually abusive vaginal penetration will be offered pregnancy tests.

OMDC has qualified medical staff on site twenty-four (24) hours per day.

(b) Policy 14-2 Sexual Abuse Prevention and Response states if the facility does not have qualified medical or mental health practitioners on staff, security first responders shall take preliminary steps to protect the victim.

Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged rape that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol and will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.

OMDC has qualified medical staff on site twenty-four (24) hours per day.

(c) Policy 14-2 Sexual Abuse Prevention and Response states that inmate victims of sexual abuse shall be offered timely information about and referral for timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care where medically appropriate.

Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged rape that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol and will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.

(d) Policy 14-2 Sexual Abuse Prevention and Response states that treatment services shall be 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.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Policy 13-79 Sexual Assault Response
- Investigation sample

Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that the Health Services Department shall provide services in accordance with CoreCivic policy 13-79 Sexual Assault Reponse, unless otherwise mandated by contract.

Further, Policy 14-02 Sexual Abuse Prevention and Response states that all patient inmates who allege rape or sexual assault will be offered access to confidential support services as specified in CoreCivic Policy 14-2 Sexual Abuse Prevention and Response.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that the medical representative will in cases of sexual abuse, ensure that the facility's medical staff respond appropriately in medically stabilizing an alleged victim before assessment by a community medical provider, if medically indicated; and address any ongoing medical care needs following the incident. In addition, the mental health representative will ensure mental health needs are addressed according to policy and local procedure.

Policy 13-79 Sexual Abuse Prevention and Response further states that the evaluation and treatment of victims shall include, as appropriate, follow-up services, treatment

plans, and when necessary, referrals for continued care following transfer to, or placement in, other facilities or release from custody.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that the medical representative will in cases of sexual abuse, ensure that the facility's medical staff respond appropriately in medically stabilizing an alleged victim before assessment by a community medical provider, if medically indicated; and address any ongoing medical care needs following the incident. In addition, the mental health representative will ensure mental health needs are addressed according to policy and local procedure.

Policy 13-79 states that inmate victims of sexual abuse shall be offered testing for sexually transmitted infections and timely information about and timely access to emergency contraception and sexually transmitted infection prophylaxis, in accordance with professional accepted standards of care, where medically appropriate.

- (d) CoreCivic Policy 14-2 Sexual Abuse Prevention and Response states that inmate victims of sexually abusive vaginal penetration while incarcerated shall be referred for pregnancy tests. If pregnancy results, victims shall receive timely and comprehensive information and access, to all lawful pregnancy-related medical services.
- (e) Policy 14-2 Sexual Abuse Prevention and Response states that inmate victims of sexually abusive vaginal penetration while incarcerated shall be referred for pregnancy tests. If pregnancy results, victims shall receive timely and comprehensive information and access, to all lawful pregnancy-related medical services.

Inmate mate/detainee victims of sexually abusive vaginal penetration will be offered pregnancy tests. In the event the inmate/detainee tests positive for pregnancy, the inmate/detainee patient will be provided information regarding lawful pregnancy related services in a timely manner.

- (f) Policy 14-02 Sexual Abuse Prevention and Response states that inmate victims of sexual abuse while incarcerated shall be referred for tests for sexually transmitted infections as medically appropriate.
- (g) Policy 14-02 Sexual Abuse Prevention and Response states that treatment services shall be 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.
- (h) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall attempt to refer all known inmate-on-inmate abusers for a mental health evaluation within sixty (60) days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Policy 14-02 Sexual Abuse Prevention and Response states that QMHP shall attempt to conduct a mental health evaluation of all know inmate on inmate abusers within

sixty (60) days of learning of such abuse history and offer treatment deemed appropriate. If the inmate refuses a mental health evaluation, the refusal will be documented on the 13-49B Refusal to Accept Medical Treatment and placed in the medical record.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Attempts at MOU with Center for Community Solutions
- Advocacy Pamphlet, English and Spanish Policy Change Notice
- 5-1A Incident Report
- 14-2B Sexual Abuse Screening Tool Medical and Mental Health Follow Up Sexually Transmitted Disease Testing

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that the Warden/
Facility Administrator will ensure that a post investigation review of a sexual abuse incident is conducted at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. In addition, to the Warden/
Facility Administrator the incident review team shall include upper-level facility management and the facility SART with input from line supervisors, investigators, and medical or mental health practitioners. Such review shall ordinarily within thirty (30) days of the conclusion of the investigation.

In the past twelve (12) months, the PAQ indicated that there have been four (4) administrative investigations of alleged sexual abuse completed at the facility, excluding 'unfounded' incidents.

- (b) Policy 14-02 Sexual Abuse Prevention and Response states that an incident review team will review the incident within thirty (30) days of the conclusion of the investigation.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the administrator/director, the incident review team shall include upper-level facility management, with input from line supervisors, investigators and medical or mental health practitioners.
- (d) Policy 14-02 Sexual Abuse Prevention and Response states that the incident review team shall:

- 1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- 2. Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBTI and/or gender non-conforming identification, status or perceived status, or gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility;
- 3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- 4. Assess the adequacy of staffing levels in that area during different shifts; and
- 5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

Further, policy states that all findings and recommendations for improvement will be documented on the 14-2-F Sexual Abuse Incident Review Report. Completed forms will be forwarded to the Administrator/Director, the PCM, and the FSC PREA Compliance Coordinator.

(e) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall implement the recommendations for improvement or shall document reasons for not doing so.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- Sexual Abuse or Assault Incident Review Form
- Interview with PREA Coordinator
- 14-2F Sexual Abuse Incident Review Report
- 5-1H Incident Packet Checklist
- Interview with Incident Review Team Member
- Interview with PREA Compliance Manager
- Investigation Sample

| 115.87 | Data collection | | |
|--------------------|---|--|--|
| | Auditor Overall Determination: Meets Standard | | |
| Auditor Discussion | | | |
| | (a) Policy 14-02 Sexual Abuse Prevention and Response states that each facility will ensure that incidents of sexual abuse are entered into the IRD as required by CoreCivic Policy 5-1 Incident Reporting and 1-2 -BB PREA 5-1 IRD Incident Reporting Definitions. | | |

- (b) Policy 14-02 Sexual Abuse Prevention and Response states that at least annually, CoreCivic shall aggregate the incident-based sexual abuse data.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that the aggregated data will, at a minimum, include all categories of data necessary to respond to the Survey of Sexual Violence as directed by the Department of Justice.
- (d) Policy 14-02 Sexual Abuse Prevention and Response states that all case records associated with claims of sexual abuse, including incident reports, investigative reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained in accordance with the facility's record retention policies.
- (f) Policy 14-02 Sexual Abuse Prevention and Response states that upon request, CoreCivic shall provide all data as outlined above in T.1.a.ii.-iii. from the previous calendar year to the Department of Justice no later than June 30.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response CoreCivic
- CoreCivic 2020 Annual PREA Report
- CoreCivic 2021 Annual PREA Report
- CoreCivic 2022 Annual PREA Report

115.88 Data review for corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states the The FSC PREA Coordinator shall review all aggregated sexual abuse data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, to include Identifying problem areas and taking corrective action on an ongoing basis.
- (b) Policy 14-02 Sexual Abuse Prevention and Response states such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of CoreCivic's progress in addressing sexual abuse.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states CoreCivic's report shall be approved by the company's Chief Corrections Officer and made readily available to the public through CoreCivic website.

(d) Policy 14-02 Sexual Abuse Prevention and Response states specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of a facility, but the nature of the material redacted must be indicated.

During an interview with CoreCivic Vice President, Operations Administration, he stated he reviews and approves annual reports written as per this standard. Further, he stated that PREA data is reviewed on a daily, monthly, and annual basis. Incident data is provided daily to select FSC staff in a daily PREA report. Monthly and annually the data is reported as metrics in a format that can determine if there are trends at individual facilities or with inmate populations. Facilities can use the data to identify where sexual abuse may be occurring and whether changes to either physical plant, presence of staff/video coverage, or procedures would minimize the risks of incidents in those areas.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response
- CoreCivic 2019 Annual PREA Report
- CoreCivic 2020 Annual PREA Report
- CoreCivic 2021 Annual PREA Report
- CoreCivic Public Website
- Interview with CoreCivic Vice President, Operations Administration

115.89 Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) Policy 14-02 Sexual Abuse Prevention and Response states that data collected shall be stored and retained in accordance with the facility's record retention policies.
- (b) Policy 14-02 Sexual Abuse Prevention and Response states that the FSC PREA Coordinator shall make all aggregated sexual abuse data available to the public at least annually through the CoreCivic website.
- (c) Policy 14-02 Sexual Abuse Prevention and Response states that before making aggregated sexual abuse data publicly available, CoreCivic shall remove all personal identifiers.
- (d) The records retention schedule, 1-15B states that aggregated PREA Sexual Abuse data will be retained for 10 years.

Documents Reviewed, Interviews Conducted, and Observations that helped

auditor reach finding:

- Policy 14-02 Sexual Abuse Prevention and Response CoreCivic
- oreCivic 2021 Annual PREA Report
- CoreCivic 2022 Annual PREA Report
- CoreCivic Public Website
- Records Retention Schedule

| 115.401 | Frequency and scope of audits | | | |
|--|--|--|--|--|
| Auditor Overall Determination: Meets Standard | | | | |
| | Auditor Discussion | | | |
| All information for CoreCivic PREA related topics is located at: http://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea | | | | |
| | This includes all prior audits, CoreCivic Policies, reporting information for inmates and their families and friends, the final standards, inmate and detainee rights, zero tolerance, investigations, and all previous agency reports form 2013-2022. | | | |

| 115.403 | Audit contents and findings | | | | |
|---------|--|--|--|--|--|
| | Auditor Overall Determination: Meets Standard | | | | |
| | Auditor Discussion | | | | |
| | All information for CoreCivic PREA related topics is located at: http://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea | | | | |
| | This includes all prior audits, CoreCivic Policies, reporting information for inmates and their families and friends, the final standards, inmate and detainee rights, zero tolerance, investigations, and all previous agency reports form 2013-2022. | | | | |

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

| | that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | |
|------------|---|-----|
| 115.13 (a) | Supervision and monitoring | |
| | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into | yes |

| | consideration: Any applicable State or local laws, regulations, or standards? | |
|------------|---|-----|
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? | yes |
| 115.13 (b) | Supervision and monitoring | |
| | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) | yes |
| 115.13 (c) | Supervision and monitoring | |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? | yes |
| 115.13 (d) | Supervision and monitoring | |
| | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? | yes |
| | Is this policy and practice implemented for night shifts as well as day shifts? | yes |
| | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? | yes |

| 115.14 (a) | Youthful inmates | |
|------------|---|-----|
| | Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).) | yes |
| 115.14 (b) | Youthful inmates | |
| | In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).) | yes |
| | 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).) | yes |
| 115.14 (c) | Youthful inmates | |
| | Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).) | yes |
| | 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).) | yes |
| | 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).) | yes |
| 115.15 (a) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners? | yes |
| 115.15 (b) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from conducting cross-gender pat- down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.) | yes |
| | Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the | yes |

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

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

| | with inmates with disabilities including inmates who: Have intellectual disabilities? | |
|------------|---|-----------|
| | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? | yes |
| | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision? | yes |
| 115.16 (b) | Inmates with disabilities and inmates who are limited proficient | l English |
| | Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? | yes |
| | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? | yes |
| 115.16 (c) | Inmates with disabilities and inmates who are limited proficient | l English |
| | 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 | yes |
| | 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? | |
| 115.17 (a) | safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | |
| 115.17 (a) | safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | yes |
| 115.17 (a) | safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? Hiring and promotion decisions Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile | yes |
| 115.17 (a) | safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? Hiring and promotion decisions Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? 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 | |

| | | 1 |
|------------|--|-----|
| | may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? | |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? | yes |
| 115.17 (b) | Hiring and promotion decisions | |
| | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? | yes |
| | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? | yes |
| 115.17 (c) | Hiring and promotion decisions | |
| | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check? | yes |
| | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? | yes |
| 115.17 (d) | Hiring and promotion decisions | |
| | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? | yes |

| 115.17 (e) | Hiring and promotion decisions | |
|------------|---|-----|
| | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? | yes |
| 115.17 (f) | Hiring and promotion decisions | |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? | yes |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? | yes |
| | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? | yes |
| 115.17 (g) | Hiring and promotion decisions | |
| | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? | yes |
| 115.17 (h) | Hiring and promotion decisions | |
| | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) | yes |
| 115.18 (a) | Upgrades to facilities and technologies | |
| | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) | yes |
| 115.18 (b) | Upgrades to facilities and technologies | |

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

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

| | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? | yes |
|------------|--|--------|
| | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? | yes |
| 115.22 (b) | Policies to ensure referrals of allegations for investig | ations |
| | Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? | yes |
| | Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? | yes |
| | Does the agency document all such referrals? | yes |
| 115.22 (c) | Policies to ensure referrals of allegations for investig | ations |
| | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) | yes |
| 115.31 (a) | Employee training | |
| | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? | yes |
| | Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment | yes |
| | Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? | yes |

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| | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? | yes |
| | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? | yes |
| | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? | yes |
| | Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? | yes |
| | Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? | yes |
| 115.31 (b) | Employee training | |
| | Is such training tailored to the gender of the inmates at the employee's facility? | yes |
| | Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? | yes |
| 115.31 (c) | Employee training | |
| | Have all current employees who may have contact with inmates received such training? | yes |
| | Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? | yes |
| | In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? | yes |
| 115.31 (d) | Employee training | |
| | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? | yes |
| 115.32 (a) | Volunteer and contractor training | |
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| | Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? | yes |
| 115.32 (b) | Volunteer and contractor training | |
| | Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? | yes |
| 115.32 (c) | Volunteer and contractor training | |
| | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? | yes |
| 115.33 (a) | Inmate education | |
| | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? | yes |
| | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? | yes |
| 115.33 (b) | Inmate education | |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? | yes |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? | yes |
| | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? | yes |
| 115.33 (c) | Inmate education | |
| | Have all inmates received the comprehensive education referenced in 115.33(b)? | yes |
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| | 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 |
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| 115.33 (d) | Inmate education | |
| | Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? | yes |
| | Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? | yes |
| | Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? | yes |
| | Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? | yes |
| | Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? | yes |
| 115.33 (e) | Inmate education | |
| | Does the agency maintain documentation of inmate participation in these education sessions? | yes |
| 445 00 (0) | | |
| 115.33 (f) | Inmate education | |
| 115.33 (†) | 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 |
| | 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 | yes |
| | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? | yes |
| 115.34 (a) | 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? Specialized training: Investigations In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See | |
| 115.34 (a) | 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? Specialized training: Investigations In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | |

| | Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | |
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| | Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| | Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| 115.34 (c) | Specialized training: Investigations | |
| | Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| 115.35 (a) | Specialized training: Medical and mental health care | |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
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| | suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | |
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| 115.35 (b) | Specialized training: Medical and mental health care | |
| | If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.) | yes |
| 115.35 (c) | Specialized training: Medical and mental health care | |
| | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| 115.35 (d) | Specialized training: Medical and mental health care | |
| | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.) | yes |
| | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) | yes |
| 115.41 (a) | Screening for risk of victimization and abusiveness | |
| | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| 115.41 (b) | Screening for risk of victimization and abusiveness | |
| | Do intake screenings ordinarily take place within 72 hours of arrival at the facility? | yes |
| 115.41 (c) | Screening for risk of victimization and abusiveness | |
| | Are all PREA screening assessments conducted using an objective | yes |
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| | screening instrument? | |
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| 115.41 (d) | Screening for risk of victimization and abusiveness | |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender nonconforming 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? | |
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| 115.41 (e) | Screening for risk of victimization and abusiveness | |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse? | yes |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses? | yes |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse? | yes |
| 115.41 (f) | Screening for risk of victimization and abusiveness | |
| | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |
| 115.41 (g) | Screening for risk of victimization and abusiveness | |
| | Does the facility reassess an inmate's risk level when warranted due to a referral? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to a request? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? | yes |
| 115.41 (h) | Screening for risk of victimization and abusiveness | |
| | Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs $(d)(1)$, $(d)(7)$, $(d)(8)$, or $(d)(9)$ of this section? | yes |
| 115.41 (i) | Screening for risk of victimization and abusiveness | |
| | Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive | yes |

| | information is not exploited to the inmate's detriment by staff or other inmates? | |
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| 115.42 (a) | Use of screening information | |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? | yes |
| 115.42 (b) | Use of screening information | |
| | Does the agency make individualized determinations about how to ensure the safety of each inmate? | yes |
| 115.42 (c) | Use of screening information | |
| | When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? | yes |
| | When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would | yes |

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

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

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

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

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

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

| | abuse or sexual harassment or retaliation? | |
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| 115.61 (b) | Staff and agency reporting duties | |
| | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? | yes |
| 115.61 (c) | Staff and agency reporting duties | |
| | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? | yes |
| | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? | yes |
| 115.61 (d) | Staff and agency reporting duties | |
| | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? | yes |
| 115.61 (e) | Staff and agency reporting duties | |
| | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? | yes |
| 115.62 (a) | Agency protection duties | |
| | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? | yes |
| 115.63 (a) | Reporting to other confinement facilities | |
| | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? | yes |
| 115.63 (b) | Reporting to other confinement facilities | |
| | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? | yes |

| 115.63 (c) | Reporting to other confinement facilities | |
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| | Does the agency document that it has provided such notification? | yes |
| 115.63 (d) | Reporting to other confinement facilities | |
| | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? | yes |
| 115.64 (a) | Staff first responder duties | |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? | yes |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? | yes |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| 115.64 (b) | Staff first responder duties | |
| | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? | yes |
| 115.65 (a) | Coordinated response | |
| | Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in | yes |

| | response to an incident of sexual abuse? | |
|------------|---|-----|
| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers | |
| | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| 115.67 (a) | Agency protection against retaliation | |
| | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? | yes |
| | Has the agency designated which staff members or departments are charged with monitoring retaliation? | yes |
| 115.67 (b) | Agency protection against retaliation | |
| | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? | yes |
| 115.67 (c) | Agency protection against retaliation | |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of | yes |

| | sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? | |
|------------|--|-----|
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? | yes |
| | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? | yes |
| 115.67 (d) | Agency protection against retaliation | |
| | In the case of inmates, does such monitoring also include periodic status checks? | yes |
| 115.67 (e) | Agency protection against retaliation | |
| | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? | yes |
| 115.68 (a) | Post-allegation protective custody | |
| | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? | yes |
| 115.71 (a) | Criminal and administrative agency investigations | |
| | When the agency conducts its own investigations into allegations | yes |
| | | |

| | | |
|--------------------------|--|-----|
| | of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | |
| | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/ facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
| 115.71 (b) | Criminal and administrative agency investigations | |
| | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? | yes |
| 115.71 (c) | Criminal and administrative agency investigations | |
| | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? | yes |
| | Do investigators interview alleged victims, suspected perpetrators, and witnesses? | yes |
| | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? | yes |
| 115.71 (d) | Criminal and administrative agency investigations | |
| | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? | yes |
| 115 71 (-) | | |
| 115./1 (e) | Criminal and administrative agency investigations | |
| 115./1 (e) | Criminal and administrative agency investigations Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? | yes |
| 115./1 (e) | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of | yes |
| 115.71 (e) 115.71 (f) | 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? 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 | |
| | 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? 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? | |

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

| 115.73 (b) | Reporting to inmates | |
|------------|--|-----|
| | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) | yes |
| 115.73 (c) | Reporting to inmates | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes |
| 115.73 (d) | Reporting to inmates | |
| | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? | yes |
| | Following an inmate's allegation that he or she has been sexually | yes |

| | abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? | |
|------------|---|-----|
| 115.73 (e) | Reporting to inmates | |
| | Does the agency document all such notifications or attempted notifications? | yes |
| 115.76 (a) | Disciplinary sanctions for staff | |
| | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? | yes |
| 115.76 (b) | Disciplinary sanctions for staff | |
| | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? | yes |
| 115.76 (c) | Disciplinary sanctions for staff | |
| | Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? | yes |
| 115.76 (d) | Disciplinary sanctions for staff | |
| | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)? | yes |
| | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? | yes |
| 115.77 (a) | Corrective action for contractors and volunteers | |
| | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? | yes |
| | Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? | yes |

| | Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? | yes |
|------------|---|-----|
| 115.77 (b) | Corrective action for contractors and volunteers | |
| | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? | yes |
| 115.78 (a) | Disciplinary sanctions for inmates | |
| | Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? | yes |
| 115.78 (b) | Disciplinary sanctions for inmates | |
| | Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? | yes |
| 115.78 (c) | Disciplinary sanctions for inmates | |
| | When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? | yes |
| 115.78 (d) | Disciplinary sanctions for inmates | |
| | If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? | yes |
| 115.78 (e) | Disciplinary sanctions for inmates | |
| | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? | yes |
| 115.78 (f) | Disciplinary sanctions for inmates | |
| | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish | yes |

| | evidence sufficient to substantiate the allegation? | | |
|------------|---|-----------|--|
| 115.78 (g) | Disciplinary sanctions for inmates | | |
| | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) | yes | |
| 115.81 (a) | Medical and mental health screenings; history of sex | ual abuse | |
| | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison). | yes | |
| 115.81 (b) | Medical and mental health screenings; history of sexual abuse | | |
| | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) | yes | |
| 115.81 (c) | Medical and mental health screenings; history of sex | ual abuse | |
| | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail). | yes | |
| 115.81 (d) | Medical and mental health screenings; history of sex | ual abuse | |
| | Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? | yes | |
| 115.81 (e) | Medical and mental health screenings; history of sex | ual abuse | |
| | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior | yes | |

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

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

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

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

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

| | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.) | yes |
|----------------|--|-----|
| 115.401 (b) | Frequency and scope of audits | |
| | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.) | yes |
| | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.) | yes |
| | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | yes |
| 115.401 (h) | Frequency and scope of audits | |
| | Did the auditor have access to, and the ability to observe, all areas of the audited facility? | yes |
| 115.401 (i) | Frequency and scope of audits | |
| | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? | yes |
| 115.401 (m) | Frequency and scope of audits | |
| | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? | yes |
| 115.401 (n) | Frequency and scope of audits | |
| | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were | yes |
| | communicating with legal counsel? | |

| (f) | | |
|-----|---|-----|
| | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) | yes |