

# PREA Facility Audit Report: Final

**Name of Facility:** Northeast Ohio Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 12/18/2024

**Date Final Report Submitted:** 03/21/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Bryan Pearson	Date of Signature: 03/21/2025

AUDITOR INFORMATION	
Auditor name:	Pearson, Bryan
Email:	bryan@pearsongroupllc.com
Start Date of On-Site Audit:	10/22/2024
End Date of On-Site Audit:	10/24/2024

FACILITY INFORMATION	
Facility name:	Northeast Ohio Correctional Facility
Facility physical address:	2440 Hubbard Road, Youngstown, Ohio - 44505
Facility mailing address:	

Primary Contact
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<b>Name:</b>	[REDACTED]
<b>Email Address:</b>	[REDACTED]ecivic.com
<b>Telephone Number:</b>	[REDACTED]

### Warden/Jail Administrator/Sheriff/Director

<b>Name:</b>	[REDACTED] Fender, Warden
<b>Email Address:</b>	[REDACTED]@corecivic.com
<b>Telephone Number:</b>	[REDACTED]

### Facility PREA Compliance Manager

<b>Name:</b>	[REDACTED]
<b>Email Address:</b>	[REDACTED]@corecivic.com
<b>Telephone Number:</b>	[REDACTED]
<b>Name:</b>	[REDACTED]
<b>Email Address:</b>	[REDACTED]
<b>Telephone Number:</b>	[REDACTED]
<b>Name:</b>	[REDACTED]
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<b>Telephone Number:</b>	[REDACTED]
<b>Name:</b>	[REDACTED]
<b>Email Address:</b>	[REDACTED]
<b>Telephone Number:</b>	[REDACTED]

### Facility Health Service Administrator On-site

<b>Name:</b>	[REDACTED]
<b>Email Address:</b>	[REDACTED]

<b>Telephone Number:</b>	
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Facility Characteristics	
<b>Designed facility capacity:</b>	2106
<b>Current population of facility:</b>	1300
<b>Average daily population for the past 12 months:</b>	1501
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Mens/boys
<b>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b>	
<b>Age range of population:</b>	18-71 average 35
<b>Facility security levels/inmate custody levels:</b>	Low/moderate/High
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	395
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	50
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	50

## AGENCY INFORMATION

<b>Name of agency:</b>	CoreCivic, Inc.
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	5501 Virginia Way, Suite 110, Brentwood, Tennessee - 37027
<b>Mailing Address:</b>	
<b>Telephone number:</b>	615-263-3000

## Agency Chief Executive Officer Information:

<b>Name:</b>	Damon T. Hininger
<b>Email Address:</b>	
<b>Telephone Number:</b>	615-263-3000

## Agency-Wide PREA Coordinator Information

<b>Name:</b>	H [REDACTED] Baltz	<b>Email Address:</b>	[REDACTED]@corecivic.com
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## Facility AUDIT FINDINGS

### Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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

### Number of standards exceeded:

2	<ul style="list-style-type: none"><li>• 115.13 - Supervision and monitoring</li><li>• 115.31 - Employee training</li></ul>
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Number of standards met:	
43	
Number of standards not met:	
0	

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-10-22
2. End date of the onsite portion of the audit:	2024-10-24

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Qualified staff victim advocates were interviewed.

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2106
15. Average daily population for the past 12 months:	1501
16. Number of inmate/resident/detainee housing units:	17
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

<b>18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	0
<b>19. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>20. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>21. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>22. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>23. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>24. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	49

<b>25. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>	6
<b>26. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>	21
<b>27. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>	11
<b>28. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b>	The response from the facility for question #36-41 was "Do not collect data."
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>30. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>	395
<b>31. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	18



32. Enter the total number of <b>CONTRACTORS</b> assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	50
33. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
34. Enter the total number of <b>RANDOM INMATES/RESIDENTS/DETAINEES</b> who were interviewed:	18
35. Select which characteristics you considered when you selected <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
36. How did you ensure your sample of <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees was geographically diverse?	Random selections of inmates for interview was based on a numerical interval applied to the inmate list based on housing unit.
37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>38. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	Twenty inmates were randomly selected. Two were determined to be targeted based on information provided by the inmate during the interview. These were counted as targeted interviews.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	22
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<b>40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>41. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>42. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	0

<p><b>42. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>42. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility said they were not tracking inmates that were blind or have low vision disabilities and could not provide names of inmates that were blind or had low vision for interview. None of the forty inmates interviewed reported being blind or having low vision.</p>
<p><b>43. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>43. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>43. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility said they were not tracking inmates with hearing disabilities and could not provide names of inmates with hearing disabilities for interview. None of the forty inmates interviewed reported having a hearing disability.</p>
<p><b>44. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>

<p><b>44. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>44. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>At the time of the onsite audit, the facility reported no inmates that were limited English proficient. All of the forty inmates interviewed could speak English proficiently.</p>
<p><b>45. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>7</p>
<p><b>46. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>6</p>
<p><b>47. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>2</p>
<p><b>48. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>9</p>

<b>49. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b>	0
<b>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
<b>49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b>	The facility reported no inmates in segregation involuntarily for high risk of victimization at the time of the onsite audit. None of the inmates interviewed in segregation reported being place there involuntarily for reporting sexual abuse.
<b>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	No text provided.
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>51. Enter the total number of RANDOM STAFF who were interviewed:</b>	12



<b>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
<b>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	No text provided.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
<b>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	16
<b>56. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>58. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>59. Were you able to interview the PREA Compliance Manager?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

- ☐ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☐ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☒ First responders, both security and non-security staff
- ☒ Intake staff



	<input type="checkbox"/> Other
<b>61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>61. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>62. Enter the total number of CONTRACTORS who were interviewed:</b>	1
<b>62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>63. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No text provided.

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

<b>69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b>	No text provided.
<b>Documentation Sampling</b>	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
<b>70. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	Staff, contract staff, volunteer, inmate/detainee lists were requested prior to the onsite audit for selection for document review. Most of the documents were received prior to the onsite audit.
<b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>	
<b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	16	2	16	2
<b>Staff-on-inmate sexual abuse</b>	5	4	5	4
<b>Total</b>	21	6	21	6

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	3	0	3	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	3	0	3	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	3	12	0
<b>Staff-on-inmate sexual abuse</b>	0	1	0	4
<b>Total</b>	0	4	12	4

### Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	2	1
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	2	1

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

**Sexual Abuse Investigation Files Selected for Review**

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

18

<b>79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	12
<b>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	6
<b>84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)



<b>85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	6
<b>87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	4
<b>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)



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

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

2

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

☐ Yes

☒ No

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

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

☒ Yes

☐ No

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

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

No text provided.

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

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

☐ Yes

☒ No

## Non-certified Support Staff

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

☐ Yes

☒ No

## AUDITING ARRANGEMENTS AND COMPENSATION

97. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

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

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

☐ Other

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) The Northeast Ohio CC provided the Institution Zero Tolerance Policy for NEOCC. The policy statement requires NEOCC to implement the Ohio DRC's zero-tolerance policy of preventing, detecting and responding to sexual misconduct. The policy includes sections with Sexual Misconduct Prevention Procedures, Sexual Misconduct Detection Procedures and Responding to Report of Sexual Misconduct. It also provides definitions for sexual abuse, sexual contact, sexual conduct, sexual harassment, voyeurism and sexual misconduct. The ODRC policy 79-ISA-01 states "The ODRC shall maintain zero tolerance for sexual misconduct in its institutions and in any facilities with which it contracts for the confinement of incarcerated individuals. Sexual misconduct among incarcerated individuals and by employees, contractors, interns, and volunteers towards incarcerated individuals is strictly prohibited." The definition of sexual misconduct includes sexual abuse or sexual harassment toward an inmate by an employee, contractor, intern, volunteer, or another inmate. The ODRC policy states employees who engage in sexual misconduct with an inmate shall be subject to disciplinary sanctions in accordance with policy ODRC 31-SEM-02 Standards of Employee Conduct. Contract staff and volunteers that engage in sexual</p>

	<p>misconduct with inmates may be prohibited from contact with inmates and referred to law enforcement in accordance with ODRC Policy 71-SOC-01. Inmates that engage in sexual misconduct against another inmate are subject to disciplinary sanctions in accordance with ODRC Policy 56-DSC-01.</p> <p>CoreCivic NEOCC policy 14-2 Sexual Abuse Prevention and Response provides a zero-tolerance policy, definitions of prohibited behaviors, and procedures for prevention, detection, and response to sexual abuse and sexual harassment. The policy designates a CoreCivic PREA Coordinator and a PREA Compliance Manager for NEOCC.</p> <p>b) Document Review - A CoreCivic organizational chart shows the PREA Coordinator is an executive level position at Senior Director that reports to the Vice President of Core Services for CoreCivic. A job description was provided for the PREA Coordinator that assigns the responsibilities for developing, implementing and overseeing the agency efforts to comply with the PREA standards in all CoreCivic facilities.</p> <p>PREA Coordinator Interview - The CoreCivic PREA Coordinator said she has the time and authority to manage the PREA compliance in CoreCivic facilities. She has staff assigned to her to assist with those duties. CoreCivic has a PREA Compliance Manager at 57 facilities. She had quarterly training sessions with the PCM's through virtual communications and individual communications about investigation or audit issues. If she identifies a compliance issue, she will work with the facility on a corrective action plan. If it is a policy issue, she will work with executive staff on policy revision.</p> <p>c) Document Review - The Northeast Ohio Correctional Center organizational chart shows the PREA Compliance Manager is an Assistant Warden that reports directly to the Warden.</p> <p>PREA Compliance Manager Interview - The PCM/AW said she has the time and authority for managing PREA compliance for NEOCC. She has staff that assist her with these duties. She reports directly to the Warden and has frequent discussions about PREA compliance with him on a regular basis.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets all the provisions of this standard.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	PREA Coordinator Interview - The PREA Coordinator said CoreCivic is not a public agency that contracts with private agencies for the confinement of its inmates.

	<p>CoreCivic has been contracted by the Ohio Department of Rehabilitation and Corrections for the confinement of inmates at Northeast Ohio Correctional Center.</p> <p>Document Review – The ODRC contract with CoreCivic that includes Northeast Ohio Correctional Center was provided for review.</p> <p>Based on the interview with the PREA Coordinator and review of the contract, this auditor finds the standard is not applicable to CoreCivic or NEOCC.</p>
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115.13	Supervision and monitoring
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) ODRC policy 79-ISA-01 states “In accordance with ODRC Policy 23-BUD-01, Staffing Requirements, and the PREA Staffing Plan (DRC1189) each institution shall develop, document, and make its best efforts to comply with a staffing plan that provides for adequate levels of staff and, where applicable, video monitoring, to protect incarcerated individuals against sexual misconduct. In calculating staffing levels and determining the need for video monitoring, the institutions shall consider: a. Generally accepted correctional practices, b. Any judicial, federal investigative and internal/external oversight agency findings of inadequacy, c. The facility’s physical plant including blind-spots or areas where staff or incarcerated individuals may be isolated, d. The composition of the incarcerated population, e. The number and placement of supervisory staff, f. Institution programs occurring on a particular shift, g. The prevalence of substantiated and unsubstantiated incidents of sexual abuse, h. Applicable state or local laws, regulations, standards, or any other relevant factors.”</p> <p>CoreCivic policy 14-2 page 7 states “The facility, in coordination with CoreCivic FSC, shall develop an annual 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 staffing.” The CoreCivic policy requires the staffing plan to be based on the same eleven factors as the ODRC policy and this provision of the standard.</p> <p>The PCM reported on the PAQ the facility had an average daily population of 1170 since the last PREA audit. The facility staffing plan was predicated on an average daily population of 1928.</p> <p>Tour – The tour of the facility was completed on the first day of the onsite audit. All areas of the facility were visited on the tour. The tour included the segregation unit, medical unit, mental health offices, intake area, commissary, maintenance area, dining room, production kitchen, library, vocational training, chapel, education, sixteen housing units and the visiting room. There were no blind spots or line of sight issues identified in the housing units. One Inmate bathroom door was found to have a lock inside of the door in the chapel. The lock would allow an inmate to lock the</p>

door from the inside. The staff were asked to have the lock removed. Staff were present in all areas that inmates occupied. Staff were seen conducting rounds and monitoring inmates/detainees in program, work and housing unit areas. The staff monitoring of inmates was appropriate for the custody level of the facility. Cameras were observed throughout the facility covering cellhouse dayrooms and in hallways.

Corrective Action Completed: The lock on the inmate bathroom in the chapel was removed during the tour. This auditor went back to verify the removal and document with pictures. The lock was removed, and the bathroom could no longer be locked from the inside. Access to the bathroom is monitored in an area where staff are always occupying when inmates are present.

Warden Interview – The Warden said the staffing plan is reviewed regularly with HR and annually. The staffing plan focuses on mandatory posts for proper supervision of the inmate population in all areas of the facility. The contract with the client guides the staffing plan for the facility. The frequency and type of PREA incidence are taken into consideration to determine if there is a need for a change in or addition to staff coverage of an area. Changes to the staffing plan can be requested through the ODRC and USMS.

PCM Interview - The PREA Compliance Manager stated the staffing levels and vacancies are reviewed on a weekly basis in addition to the required annual staffing plan review. The review is documented on a CoreCivic form 14-2I and forwarded to the Warden for review and signature.

b) Policy Review – CoreCivic policy 14-02 requires the Chief of Security to review the shift roster for deviations from the staffing plan and notify the PREA Compliance Manager of the deviations.

Warden Interview – The Warden said there were no deviations to the staffing plan during the review period. He described a deviation from the staffing plan as the closure of a mandatory post. Discretionary posts are in addition to the staffing plan. If a mandatory post is not filled with overtime, the ADO is notified as well as the Warden. The Warden reviews the shift report daily for deviations.

c) ODRC policy 79-ISA-01 states “An annual PREA staffing plan assessment shall be completed by LEACI and NEOCC whenever necessary, but no less frequently than once each year. The PREA operational compliance manager will complete the Annual PREA Staffing Plan Assessment (Form 14-2I) and forward it to the warden/administrator for review. Upon completion of the warden/administrator’s review, the Annual PREA Staffing Plan Assessment will be forwarded to the Facility Support Center PREA compliance coordinator.”

CoreCivic policy 14-2 page 8 states “The facility PREA Compliance Manager will complete the 14-2I Annual PREA Staffing Plan Assessment and forward it to the Warden/Facility Administrator for review. Upon completion of the Warden/Facility Administrator's review, the 14-2I Annual PREA Staffing Plan Assessment will be forwarded to the FSC PREA Coordinator.”

	<p>Document Review – The form 14-2I Annual PREA Staffing Plan Assessment for 2023 was provided for review. The form provides the eleven factors in the standard in the Staffing Plan Review Checklist section. The review was conducted by the PREA Compliance Manager, reviewed by the Warden and the PREA Coordinator. Staffing is documented on the NEOCC 2024 Operational Staffing Pattern. This document</p> <p>PREA Coordinator Interview – The PREA Coordinator said the facilities send her the Annual Staffing Plan Review forms for her review and approval annually. She is also consulted if the facility had a significant change in the plan that would require a re-evaluation.</p> <p>d) ODRC policy 50-PAM-02 page 3 requires a shift supervisor to conduct unannounced rounds in each inmate occupied areas at least once per shift.</p> <p>CoreCivic policy 14-2 page 7 states “Intermediate level and/or upper-level facility supervisors shall conduct unannounced facility rounds to identify and deter staff sexual abuse and sexual harassment. The occurrence of such rounds shall be documented as an unannounced round or "PREA Round" in the applicable log (e.g. ADO, post log, shift report, etc.) This practice shall be implemented for night shifts as well as day shifts and through all areas where inmates/detainees are permitted. Employees shall be prohibited from alerting other employees that supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.”</p> <p>Intermediate Supervisor Interview – A Captain said when conducting unannounced rounds, he meets with the Correctional Officers in the housing units. The rounds are documented by signing in a log. He is required to visit all housing units on a shift. He prevents staff from alerting other staff of the rounds being conducted by using a different route each time and doing the rounds at different times each day.</p> <p>Document review – Employee Visit Record logs were requested for random consecutive days for a week in three months to show completed unannounced rounds in all housing units. Unannounced rounds were documented on both shifts on each day during the weeks selected. This exceeds the best practice of once a week described in the standards in focus for 115.13.</p> <p>Based on information from interviews, policies and documents reviewed, this auditor finds the facility exceeds this standard.</p>
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115.14	Youthful inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	ODRC policy 71-SOC-05 page 2 requires youth under eighteen (18) years of age to be placed at the Correctional Reception Center.

	<p>Warden Interview – the Warden said inmates/detainees under the age of 18 years old are not housed at Northeast Ohio Correctional Center.</p> <p>The PCM reported zero youthful inmates/detainees housed at NEOCC in the past 12 months on the PRE-Audit Questionnaire.</p>
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) ODRC policy 310-SEC-01 page 2 requires staff to document all cross-gender strip or body cavity searches on an Incident Report.</p> <p>CoreCivic policy 14-2 page 14 states “Cross-gender inmate/detainee strip searches (male staff on female inmate/detainee, or female staff on male inmate/detainee) shall not be conducted except in exigent circumstances or when performed by medical practitioners.”</p> <p>Northeast Ohio Correctional Center reported zero cross-gender strip or cross-gender visual body cavity searches in the last 12 months.</p> <p>Random Staff Interviews – All female staff interviewed were asked if they had conducted a cross-gender strip search. No female staff reported conducting a cross-gender strip search.</p> <p>Inmate Interviews – All inmates interviewed said they have not been strip searched, or visual body cavity searched by or in the presence of an opposite gender staff.</p> <p>c) CoreCivic policy 14-2 page 14 states “Whenever a cross-gender pat search of a female inmate/detainee, cross gender body cavity search of any inmate/detainee, or a cross-gender strip search of any inmate/detainee does occur, the search shall be documented. Documentation shall be in a log maintained by the facility and in a 5-1B Notice to Administration (NTA) 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.”</p> <p>d) Both ODRC 79-ISA-01 page 9 and CoreCivic policy 14-2 page 14 allow inmates to shower, perform bodily functions, change clothes without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia except incidental to cell/living quarter checks. Both require staff of the opposite gender to announce their presence when entering a housing unit, pod, wing, dorm or cell block. If a staff of the opposite gender is already in a housing unit, the announcement does not have to be made. If the opposite gender staff leave and come back to the unit, the announcement must be made again.</p> <p>Inmate Interviews – All inmates said they could use the showers and toilets without</p>



staff of the opposite gender seeing their buttocks or genitalia. They felt like the screens gave them enough privacy. Most inmates said they hear announcements for female staff entering the housing unit or wing. Some said they do not pay attention, could be sleeping or do not hear announcements. All said the female staff make a verbal announcement prior to entering the bathrooms.

Random Staff Interviews - During random staff interviews, all staff said they were aware female staff were required to make an announcement prior to entering a wing/pod or bathroom. Female staff said they make an announcement every time they enter a wing/pod or bathroom. Male staff said they observe female staff making the announcements or they press the button opposite gender recorded announcement for them.

Tour Observation - During the tour of the facility, female staff were observed making opposite gender announcements when entering housing units. A sign was observed on the door to each wing of every housing unit that said "Opposite Gender Must Announce Upon Entry."

e) CoreCivic policy 14-2 page 15 states "The facility shall not search or physically examine a transgender or intersex inmate/detainee for the sole purpose of determining the inmate/detainee's genital status. 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." ODRC policy 79-ISA-05 page 4 has the same requirement as the CoreCivic policy.

Random Staff Interviews - All staff said they could not and have not searched a transgender inmate just to determine their genital status.

Transgender Inmate Interview - Six transgender inmates were interviewed and said they have not been strip searched just for determining genital status.

f) CoreCivic policy 14-2 page 15 states "All searches of transgender and intersex inmates/detainees shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs."

Transgender Inmate Interview - Six transgender inmates were interviewed and said they have been pat and strip searched by female staff since being at the facility.

Male staff conducted the searches when they first arrived prior to meeting with the transgender committee. Once they were asked about their search preferences, they were searched by female staff.

Random Staff Interviews - All security staff said they had received training for cross-gender and transgender pat searches. All staff were aware of the facility policies regarding cross-gender pat searches and transgender pat searches. Transgender inmates can choose the gender of staff that search them.

Document Review - Documentation was provided for all security staff completion of

	<p>the cross-gender and transgender pat search training. The training is part of the PREA training curriculum.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets all provisions of the standard.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) ODRC 79-ISA-01 page 9 states “Staff shall make appropriate provisions for incarcerated individuals not fluent in English, those with low literacy levels, and those with disabilities that hinder their ability to understand the information in the manner provided pursuant to section VI.D.1-3 of this policy. In accordance with ODRC Policy 64-DMC-02, Incarcerated Individuals with Disabilities, the agency PREA coordinator shall ensure those with disabilities have an equal opportunity to participate in or benefit from all aspects of ODRC’s efforts to prevent, detect, and respond to sexual misconduct.”</p> <p>CoreCivic policy 14-2 page 11 states “The facility shall take appropriate steps to ensure that inmates/detainees 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 sexual abuse and sexual harassment.”</p> <p>Tour Observations - Posters with information about reporting sexual abuse and sexual harassment and victim advocate services were observed in inmate housing units, program areas, service areas and administration areas. The posters were placed in enclosed bulletin boards at a height that inmates could easily see. The postings were in English and Spanish. PREA information is placed on the inmate tablets that can be switched to Spanish. The CoreCivic PREA pamphlet is in both English and Spanish. The handbook for both ODRC inmates and USMS Detainees is provided in English and Spanish language versions. The handbook has a section for PREA and reporting sexual abuse and sexual harassment. PREA education could not be observed as there was no intake of inmates/detainees during the onsite audit.</p> <p>Intake Staff Interview – Staff that conduct intake orientation with newly arriving inmates both said they ask inmates/detainees if they need accommodation for reading, hearing, visual impairment of language. Both described the following accommodations for inmates with disabilities: the video shown has closed captioning for hearing impaired, the information is read and explained for inmates that cannot read or are visually impaired and mental health staff would assist with inmates with cognitive disabilities. The facility has a staff member that knows sign language and staff that can interpret Spanish.</p>

	<p>b) CoreCivic policy 14-2 page 11 states “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.”</p> <p>Agency Head Interview – The Vice President of Core Services said CoreCivic maintains contracts with vendors that provide interpretation and sign language services for facilities. He said TTY phones are available at all facilities.</p> <p>Document Review – An ODRC interpretive services contract was provided that allows for video remote interpreting services for sign language, onsite sign language services, and interpretive services for Spanish, core languages and non-core languages.</p> <p>Intake Staff Interview – Staff that conduct intake orientation with newly arriving inmates said if an inmate is limited English proficient, the facility has staff that can interpret Spanish. He said there is a contract for telephonic interpreter services they can use for other languages or when those staff are not available.</p> <p>Random Staff Interviews – all staff were aware there were staff that could provide Spanish interpretive services and there is a telephonic interpretive service that the shift supervisor has the information to access.</p> <p>Inmate Interviews – Four inmates with cognitive disabilities said they were asked by staff if they could read. They said staff met with them individually and made sure they understood the information.</p> <p>c) CoreCivic policy 14-2 page 11 states “The facility will not rely in inmates/ detainees 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/detainee's safety, the performance of first-responder duties, or the investigation of the inmate/ detainee's allegations.” The facility reported on the Pre-Audit Questionnaire no inmate interpreters were used in the last 12 months.</p> <p>Random Staff Interview – All staff said they are not allowed to use another inmate that is bilingual to be an interpreter for an inmate that was LEP to report an incident of sexual abuse.</p> <p>Based on the information from the policies and documents reviewed, interviews and observations during the facility tour, the facility meets the provisions of this standard.</p>
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

a) Policy Review - CoreCivic policy 14-02 requires the agency to decline to hire or promote any individual or decline to utilize a contract staff that would have contact with inmates if they have engaged in, been convicted of or civilly adjudicated for sexual abuse in a correctional institution or in the community. Applicants, employees and contractors that may have direct contact with inmates are required to complete a CoreCivic 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment form. The form is to be filled out for hiring and promotions.

ODRC policy 79-ISA-01 states "All Northeast Ohio Correctional Center (NEOCC) employees who may have contact with incarcerated individuals shall complete a Self-Declaration of Sexual Abuse/Sexual Harassment (Form 14-2H). The PREA operational compliance manager shall ensure the acknowledgement is completed by all employees by December 31st of each year and forwarded to the Personnel Office. It is the responsibility of the PREA operational compliance manager to ensure any positive responses on the Self-Declaration of Sexual Abuse/Sexual Harassment (Form-14-2H) are also forwarded to Legal Services for review. The Personnel Office shall maintain the documents in the employee's personnel file. The Self-Declaration of Sexual Abuse/Sexual Harassment (Form-14 2H) shall be completed upon application for employment and as part of the promotion interview process."

Document Review - Twenty staff hired in the last 12 months were randomly selected for document review. All twenty were asked the required questions about prior sexual abuse and sexual harassment on form 14-2H Self-Declaration at the time of their hire. The questions covered the prohibited behavior in provision (a). NEOCC also requires contract staff to complete a Self-Declaration form at the start of services. Self-Declaration forms were provided for fifteen contract staff.

HR Staff Interview - The HR staff said the 14-2H form Self Declaration is completed by the applicant at the offer for hire.

b) Policy Review - CoreCivic policy 14-02 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/detainees."

HR Interview - The Human Resources manager was asked if incidents of sexual harassment were considered in deciding to hire or promote staff or allow contract staff to provide services at the facility. She said all staff new hires or promotions are asked on the self-declaration form if a substantiated allegation of sexual harassment has been made against them.

Document Review - The Self-Declaration form includes a question covering prior sexual harassment. All twenty new staff were asked a question about prior sexual harassment.

c-d) Policy Review - CoreCivic policy 14-02 states "Before hiring new employees or enlisting the service of any contractor who may have contact with inmates/detainees,

CoreCivic shall ensure that a criminal history record check has been conducted.”

“Consistent with federal, state, and local law, the facility shall 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 CoreCivic 3-20-2B PREA Questionnaire for Prior Institutional Employers form, or contracting agency equivalent form, shall be used to obtain such prior employment information.

HR Staff Interview – HR staff said she has a criminal background check conducted on all staff hired and new contract staff prior to starting work at the facility. She said if they have previously worked for another corrections institution, she will send a request for employment verification asking about prior sexual abuse and sexual harassment investigations or resignations during an investigation.

Document Review – Completed criminal background checks were provided for twenty randomly selected staff hired in the last 12 months. The criminal background checks for nineteen new staff were completed prior to their start date. One was completed four days after the hire date though it was ordered prior to the hire date. Completed criminal background checks were provided for sixteen randomly selected contract staff. All criminal background checks were completed prior to their start date. Three examples of PREA employment verification were provided for new hires in the last 12 months.

e) Policy Review - CoreCivic policy 14-02 states “In addition, 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/detainees, or, have in place a system for otherwise capturing such information.”

HR Staff Interview – HR staff said she completes a new criminal background check on current staff and contract staff every 5 years. She completes the checks in the month prior to the month of their start date.

Document Review – Criminal background checks were requested for ten veteran staff that had been employed for more than five years. All ten criminal background checks were completed less than five years ago. Completed criminal background checks were reviewed for eight contract staff that had been providing services for more than five years. All eight were completed less than five years ago.

f-g) Policy Review - CoreCivic policy 14-02 states “The 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment form shall be completed 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 described in this policy. The annual signature shall be in lieu of having the form completed as part of an annual review process. The completed 14-2H form shall be retained in each employee's personnel file.”

Interview – The HR Manager said the self-declaration is signed during PREA training each year. The self-declaration includes an affirmative duty to disclose the misconduct from the questions on the form. The employee evaluation process does

	<p>not require staff to provide a self-evaluation as part of the process.</p> <p>h) Policy Review - CoreCivic policy 14-02 states 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 former employee has applied to work.”</p> <p>Interview – The HR Manager said if an institutional employer contacts her for a PREA employment background check, she will contact the facility investigator to review any investigations. When former employees are rehired, she contacts the facility investigator to check for prior sexual abuse investigations and documents the check.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) CoreCivic policy 14-02 page 8 states “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 ability of the facility and company to protect inmates/detainees from sexual abuse.”</p> <p>Agency Head Interview – The Vice President said the PREA Coordinator is consulted in new builds and renovations of facilities to ensure PREA compliance is addressed.</p> <p>Warden Interview – The Warden said the PCM would be involved in the planning for any modification, addition or renovation to ensure prevention of sexual abuse is considered in the plans. The facility did not have any additions or modifications since the last audit.</p> <p>b) CoreCivic policy 14-02 page 8 states “When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, CoreCivic will consider how such technology may enhance the ability to protect inmates/detainees from sexual abuse.”</p> <p>Agency Head Interview – The Vice President said video technology is used to support direct supervision by staff. The PREA Coordinator reviews the need for technology at facilities in the annual PREA staffing assessment.</p> <p>Warden Interview – The Warden said the facility had an upgrade to the server and addition of cameras to the video monitoring system in the last year. The PREA Compliance Manager was included in the planning to ensure compliance with the PREA standards.</p>

	Based on the information from interviews and policies reviewed, the facility meets provisions of the standard.
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) CoreCivic policy 14-02 states on page 24 “The Warden/Facility Administrator shall ensure that an administrative investigation and/or a referral for a criminal investigation, is completed for all allegations of sexual abuse and sexual harassment.” On page 25 the policy states “The investigating entity shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.”</p> <p>ODRC policy 79-ISA-02 page 5 requires the scene of a sexual abuse incident to be preserved and protected until appropriate steps can be taken to collect evidence pursuant to ODRC policy 310-SEC-13, Protection of Crime Scene. ODRC policy 79-ISA-02 page 8 states if the Ohio State Highway Patrol is responsible for investigating allegations of sexual abuse, the ODRC shall request that they follow the investigator protocols.</p> <p>Staff Interviews – All staff knew the protocols for evidence protection that are required by the policy. All staff said if the abuse was less than 72 hours before the report the inmate would be instructed not to brush teeth, shower, change clothes, eat, or drink any liquid to protect DNA evidence. They would also protect the scene if identified or notify someone to protect the scene if they couldn’t.</p> <p>b) CoreCivic policy 14-02 states on page 25 “The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011.”</p> <p>c) CoreCivic policy 14-02 states on page 25 “The investigating agency shall offer all victims of sexual abuse access to forensic medical examinations, without financial cost, where medically appropriate or necessary for gathering evidence. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible.”</p> <p>ODRC policy 79-ISA-02 requires all victims of sexual abuse to be provided access to forensic medical examinations at an outside facility without financial cost where evidentiary or medically appropriate.</p> <p>The facility reported four inmates receiving a forensic examination during the review</p>

period. One completed investigation documented a forensic examination was provided at the local hospital.

d) CoreCivic policy 14-02 states on page 25 "As requested by the victim, a victim advocate, shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals."

Document Review – an MOU with Compass Family and Community services was provided for review. The MOU is an agreement to provide emotional support services to inmate victims at NEOCC both at the hospital during a forensic examination or at the facility during investigator interviews. The MOU was signed in August of 2023 and is effective until August of 2026.

PREA Compliance Manager Interview – The PCM said they have seventeen staff that have completed victim advocate training to be qualified to provide victim advocate services at investigator interviews and at forensic exams at the hospital.

Document Review – A memorandum with the list of staff names that are qualified victim advocates for NEOCC was provided along with documentation of the training completion.

e) ODRC policy 79-ISA-02 requires the facility to provide staff victim support persons when victim advocates from local rape crisis centers are not available. The staff victim support person can provide services to the inmate victim during investigative interviews or be present at the hospital during forensic examinations. A Victim Support Person Activity Report form is to be utilized for documenting the activities of the staff victim support person. The facility provided certificates of training for nine staff that completed the VILT PREA Victim Support Person Training.

f) Document Review – ODRC, Ohio Department of Youth Service and Ohio State Highway Patrol an MOU to collaboratively provide a uniform process for evidence collection and the investigation of PREA related incidents. The MOU requires all parties to use an evidence protocol that follows the National Protocol for Sexual Assault Medical Forensic Examinations; provide the victim a forensic examination at no cost; and offer the victim a victim advocate from a rape crisis center or a qualified staff to be present at forensic exams and investigatory interviews.

An MOU with the Youngstown Police Department requires the TPD to conduct criminal investigations of allegations of sexual abuse involving USMS detainees. The YPD agrees to follow the evidence protocol requirement of provisions (a) – (e) of this standard. The MOU requires all parties to use an evidence protocol that follows the National Protocol for Sexual Assault Medical Forensic Examinations; provide the victim a forensic examination at no cost; and offer the victim a victim advocate from a rape crisis center or a qualified staff to be present at forensic exams and investigatory interviews. The MOU is in effect until terminated by either party with a 30-day written notice.

h) The facility provided the sign in sheet for victim advocate training for



	<p>seventeen staff that completed the VILT PREA Victim Support Person Training in September of 2023.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of this standard.</p>
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<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a-b) ODRC policy 79-ISA-02 requires all allegations of sexual misconduct and retaliation to be administratively and criminally investigated. All reports of retaliation, sexual abuse and sexual harassment to be forwarded to the Institution Investigator. The Institution Investigator will forward sexual harassment reports to the Operational Compliance Manager for investigation. All reports of sexual abuse and retaliation will be investigated by the Institution Investigator. The ODRC PREA investigation policy is posted at <a href="http://www.drc.ohio.gov/about/resource/policies-and-procedures">www.drc.ohio.gov/about/resource/policies-and-procedures</a>.</p> <p>The CoreCivic policy 14-02, page 24 section N. Administrative Investigations requires reports of sexual abuse and sexual harassment to be forwarded to a facility investigator and page 25 section O. Criminal Investigations requires reports of sexual abuse and sexual harassment to be forwarded to outside law enforcement. This policy is posted on the CoreCivic PREA webpage at <a href="https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea">https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea</a>.</p> <p>NEOCC reported on the Pre-Audit Questionnaire thirty-four allegations of sexual abuse and sexual harassment resulting in thirty-four administrative investigations and one criminal investigation in the last twelve months.</p> <p>Investigation File Review – Fifteen investigations that were completed in the last twelve months were selected by this auditor for review. Twelve were sexual abuse allegations and three were sexual harassment allegations. All fifteen had an administrative investigation completed by the Institutional Investigator. All eleven reports of sexual abuse were referred to the Ohio State Highway Patrol for criminal investigation.</p> <p>Investigator Interview – The Facility Investigators said all reports of alleged sexual abuse are referred to the Ohio State Highway Patrol for ODRC inmates or the Youngstown Police Department for USMS detainees for review of a possible criminal violation. If it is determined a criminal violation has occurred, the OSHP or YPD conducts an investigation. If there is no criminal violation, they notify the Facility Investigator to proceed with an administrative investigation. Both investigators said an administrative investigation is completed on all allegations of sexual abuse or sexual harassment.</p>

	<p>Agency Head Interview – The Vice President of Core Services said it is agency policy to refer all allegations of sexual abuse that are potentially criminal to law enforcement agencies that have the legal authority to conduct criminal investigations. All administrative investigations are conducted by Facility Investigators that have completed the required training.</p> <p>c) ODRC policy 79-ISA-02 requires allegations of sexual misconduct to the referred to the Ohio State Highway Patrol. An MOU between the ORDC and the OSHP requires the OSHP to follow the requirements of standard 115.21 and standard 115.71.</p> <p>NEOCC provided a MOU between NEOCC and the Youngstown Police Department for review. The YPD agrees to conduct criminal investigations in accordance with the requirements of standard 115.21 (a)-(e), follow a uniform evidence protocol and arrange for a forensic medical examination by a qualified SANE or SAFE where required.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of this standard.</p>
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115.31	Employee training
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) The CoreCivic policy 14-02, page 5 states “All CoreCivic facility employees shall receive comprehensive training on preventing, detecting and responding to sexual abuse and sexual harassment.”</p> <p>Curriculum Review – The CoreCivic PREA Overview training curriculum was provided for review. The curriculum is provided to NEOCC new staff training and in-service training. The training covers the CoreCivic zero-tolerance policy; rights of inmates/detainees and staff; dynamics of sexual abuse; signs of victimization; how to detect and respond to signs; avoiding inappropriate relationships; communication with LGBTI inmates/detainees; complying with mandatory reporting to outside agencies; conducting cross gender and transgender searches.</p> <p>Document Review – Twenty new staff hired in the last 12 months were selected for PREA training completion document review. Ten staff completed the PREA training shortly after their hire date. Ten staff resigned prior to completing the training. NEOCC hired 399 staff in the last 12 months for a current staff of 395.</p> <p>Staff Interview – Twelve randomly selected staff were interviewed. All staff could describe the information provided to them that covered the material required in this standard. They said they received the training at a pre-service academy shortly after their start date. Staff that had worked at NEOCC for more than a year said they</p>

	<p>completed the training annually in in-service training.</p> <p>b) CoreCivic policy 14-02, page 5 states “Such training shall be tailored to the gender of the inmates/detainees at the facility. Employees who have transferred or have been reassigned from a facility housing only one gender of inmate/detainee (i.e. male facility to a female facility or vice versa) shall receive additional training.” A review of the PREA training curriculum found the material covers the information staff need to know to work at both male and female facilities.</p> <p>c) CoreCivic policy 14-02 page 5 requires an annual in-service training on the same curriculum as pre-service. Refresher information was observed on posters throughout the facility and on quick reference cards that all staff carry on their person. The training is provided annually satisfying the requirement for refresher information and exceeding the standard for comprehensive training every two years.</p> <p>d) CoreCivic policy 14-02, page 5 states “Employees shall be required to confirm, by either electronic or manual signature, their understanding of the training that they have received. At Pre-Service Training and annual In-Service Training, each employee and contractor shall be required to sign a 14-2A PREA Training Acknowledgment - Pre-Service and In-Service form. Signed documentation will be maintained in the employee's training and/or HR file.”</p> <p>Document Review – Ten veteran staff were selected for PREA training document review. All ten completed the PREA training less than a year prior to the onsite audit. Staff signed a form 14-2A PREA Training Acknowledgement that says they understood the training they received. A screenshot of the electronic signature for the CBT module was provided that says the staff understood the training they received.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility exceeds the requirements of the standard by requiring staff to complete the comprehensive PREA training annually.</p>
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115.32	Volunteer and contractor training
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a-c) CoreCivic policy 14-02 page 6 states “All volunteers and contractors who have contact with inmates/detainees shall receive training on their responsibilities pertaining to sexual abuse and sexual harassment prevention, detection, reporting, and response as outlined in this policy.” “All volunteers and contractors who have contact with inmates/detainees shall acknowledge the CoreCivic zero-tolerance policy regarding sexual abuse and sexual harassment and information on how to report such incidents.”</p> <p>Contractor Interview – A foodservice contract staff said he completed training when</p>

	<p>he started working at NEOCC and annually since then. He said the company has a PREA training he must complete in addition to the CoreCivic training. He said the training covered the zero-tolerance policy, requires contract staff to report all knowledge or suspicion of retaliation, sexual abuse or sexual harassment. If he receives a report, he is required to notify the shift supervisor or custody staff working in the kitchen immediately. Separate the inmate from other inmates or staff involved and instruct them not to destroy evidence.</p> <p>Volunteer Interview – A volunteer said she completed the PREA training annually. The training covers the zero-tolerance policy and what she must do in response to a report of sexual abuse or sexual harassment. She is required to report all knowledge or suspicion of an incident of sexual abuse or sexual harassment to the shift supervisor or security staff immediately.</p> <p>Document Review – Five volunteers and seventeen contract staff were selected for PREA training document review. Documentation of PREA training completion was provided for all requested contract staff and volunteers. The training was completed within the last two years for all staff reviewed.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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115.33	Inmate education
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a-c) ODRC policy 79-ISA-01 states “Oral and written information (incarcerated individual handbook) shall be given to all incarcerated individuals upon their arrival at a reception center or parent institution which explains ODRC’s zero tolerance policy regarding sexual misconduct.” “Within seven (7) calendar days of arrival at a reception center or parent institution, all incarcerated individuals shall be provided comprehensive education through the viewing of the PREA education video. The PREA education video shall inform the incarcerated individual of their rights to be free from sexual abuse, sexual harassment, and retaliation for reporting such incidents. The PREA education video shall also include the ODRC policies and procedures for responding to such incidents.”</p> <p>CoreCivic policy 14-02 page 10-11 states “Upon arrival at the facility for intake, each inmate/detainee shall be provided with information regarding sexual abuse prevention and reporting (e.g. inmate/detainee handbook, CoreCivic 14-2AA Preventing Sexual Abuse and Misconduct Brochure, contracting agency brochure, handout etc.). Inmates/detainees shall sign indicating acknowledgment that they have received Intake information and the 30-day comprehensive education and this documentation shall be maintained by the facility in the inmate/detainee file.”</p>

d-e) CoreCivic policy 14-02 page 11 states "The facility shall provide resident education at intake in formats accessible to all residents, including those who are disabled or Limited English Proficient (LEP)."

Intake Staff Interview - The staff that provide the PREA orientation/education to ODRC inmates and USMS detainees at arrival to NEOCC said the inmates/detainees are provided the PREA brochure as the initial information about reporting sexual abuse and harassment. Comprehensive information is provided through the PREA video, points out the information posted throughout the facility and asking if the inmates/detainees have any questions. Both staff said they meet individually with an inmate/detainee to explain the brochure information, victim services and the different ways to report an incident of sexual abuse or sexual harassment at NEOCC. Both staff said they would try to identify any needs for accommodation at the individual meeting and provide that accommodation. This is the same meeting they use to complete the risk screening. The video is closed captioned for hearing impaired. They explain the information and makes sure the inmate/detainee understands it if they cannot read, have visual or cognitive disabilities. For LEP inmate/detainees, the facility has some staff that can interpret Spanish and there is a telephonic service that they can access if those staff are not available, or it is a different language that staff cannot translate.

Inmate Interview - Forty-one inmates/detainees were interviewed. Most recalled being provided information about reporting sexual abuse or sexual harassment and zero-tolerance policy on the first day at the facility. There were a few inmates/detainees that said they did not get any information. All inmates/detainees interviewed said they see posters or about PREA in the housing units and other areas. They all knew there was a phone number on the posters or painted on the wall by the phones to call for reporting. All inmates knew at least two or more methods of reporting sexual abuse or sexual harassment. Some knew there was an outside organization that is not part of the ODRC or CoreCivic they can report to. All inmates knew they could make a report using their tablet to call the hotline, file a grievance or send a "kite" to staff.

f) CoreCivic policy 14-02 page 11 states "In addition to providing such education, the facility shall ensure that key information is continuously and readily available or visible to inmates/detainees through posters, inmate/detainee handbooks, or other written formats."

Document Review - PREA education completion records were reviewed for thirty-nine inmates/detainees. All had signed an Orientation Acknowledgement form that indicated they received the Handbook; was provided verbal information about sexual misconduct prevention, self-protection, reporting and counseling. The verbal explanation and handbook were provided on the day of arrival. The PREA video is shown to them as part of an overall orientation within 7 days of arrival.

Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of this standard.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a-b) The CoreCivic policy 14-02, page 6 states “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.”</p> <p>ODRC policy 79-ISA-01 states “Prior to conducting a PREA investigation, all investigators shall receive specialized training which shall include, but not be limited to, conducting investigations in confinement settings, interviewing techniques for sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.”</p> <p>Investigator Interview – A facility investigator was interviewed that conducts investigations for ODRC inmate allegations and another that conducts investigations USMS detainee allegations. Both said they have completed the NIC Investigating Sexual Abuse in a Confinement Setting. They said all designated investigators at NEOCC have completed the NIC training.</p> <p>c) Document Review - The NIC Investigating Sexual Abuse in a Confinement Setting curriculum was reviewed and found to cover interview techniques, Miranda and Garrity warnings, evidence collection, and criteria and evidence required to substantiate an administrative case or a criminal case. The facility provided completion certificates for the NIC Investigating Sexual Abuse in a Confinement Setting for the seven staff designated to conduct investigations.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of this standard.</p>

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) ODRC policy 79-ISA-01 page 7 and CoreCivic policy 14-02 page 6 requires all full and part-time medical and behavioral health staff and contractors to receive specialized training that includes the four topics in the standard. The specialized medical training is in addition to the PREA training required for staff in 115.31 and contract staff required in 115.32.</p> <p>The CoreCivic policy 14-02, page 6 states “Medical and Mental Health Staff are required to document completion of this training by signing the 14-2A1 PREA Training</p>

	<p>Acknowledgment for Specialty Training. This documentation shall be maintained in the employee training file.”</p> <p>c-d) Document Review – PREA training completion documents and specialized medical training documents were requested for eight contract medical staff and five CoreCivic medical staff. The facility provided PREA training completion documents and the specialized medical training completion documents for all twelve.</p> <p>Medical and Mental Health Staff Interview – Two mental health staff and one medical staff were interviewed. All three said they had completed specialized medical PREA training that covered how to detect and assess signs of sexual abuse, preserving evidence, responding to victims, and how to report sexual abuse or sexual harassment. All three said they have also completed the PREA training that all other staff complete annually. All three demonstrated knowledge of their responsibility if an inmate/detainee reports sexual abuse or sexual harassment to them while they are providing services.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of this standard.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) The CoreCivic policy 14-2, page 9 states “All inmate/detainees shall be assessed during an intake screening in order to obtain information relevant to housing, cell, work, education, and program assignments. The goal is to keep separate those inmates/detainees at high risk of being sexually victimized from those at high risk of being sexually abusive.”</p> <p>ODRC policy 79-ISA-04 requires all inmates to be assessed for risk of sexual victimization or abusiveness upon arrival of intake and upon transfer to another institution.</p> <p>b) The CoreCivic policy 14-2, page 9 states “Inmates/detainees shall be assessed, within 24 hours of arrival at the facility, unless contracting agency policy authorizes 72 hours following arrival.”</p> <p>ODRC policy 79-ISA-04 page 3 requires unit management to complete the screening within 72 hours of the inmate’s arrival at the facility.</p> <p>Screening Staff Interview – Two staff that complete the initial risk screening of inmates/detainees at arrival to the facility said the screening is completed on the first day the offenders/detainees arrive or the next morning if they arrive late in the day.</p> <p>Inmate Interviews – Forty-one inmates/detainees were interviewed. Most inmates/</p>

detainees could recall being asked questions for the risk screening on the first or second day after they arrived at the facility. Some said they were not asked or didn't recall.

Document Review – Intake risk screenings were reviewed for thirty-nine inmates/detainees that arrived during the review period. Thirty-six were completed within the required 72-hour time frame for substantial compliance with this provision.

c) The CoreCivic policy 14-2, page 9 states “Screenings will be completed and documented using an objective screening instrument. The CoreCivic 14-2B Sexual Abuse Screening Tool shall be utilized for this purpose unless the contracting agency requires usage of another form or computerized screening process.”

d) The victim screening instrument assesses for developmental, mental or physical disabilities; age; physical build; prior incarceration; violence in priors; prior sex offense convictions against a child or adult; reported or perceived sexual orientation (gay or bisexual) reported or perceived gender identity (transgender or intersex) or gender non-conforming; prior victim of sexual abuse in the community or institution; and the inmate's/detainee's perception of vulnerability to sexual victimization. The assessment follows this provision of the standard.

Screening Staff Interview – Two staff that conduct initial risk screenings were interviewed. They were asked what factors the risk screening considers for risk of victimization. The factors both described covered all ten required by the standard and the policy. Some of the information is gathered or verified from review of the inmate/detainee records and some is gathered from inmate/detainee responses to questions in a private interview.

e) The abusiveness screening instrument assesses for prior institutional sexual abuse or violence, conviction for a sex offense against an adult or child, and prior or current conviction for a violent offense. The assessment follows this provision of the standard.

Screening Staff Interview – The staff that complete the initial screening said answers from the inmate/detainee interview and the inmate/detainee record are used to assess for prior acts of sexual abuse, prior convictions for violent offenses and a history of prior institutional violence or sexual abuse. Both said they review the criminal history and institutional conduct record in addition to asking the inmate/detainee questions about prior criminal history and conduct.

f) ODRC policy 79-ISA-04 page 3 requires a reassessment to be completed within 30 days of the inmate's arrival at the facility but no sooner than 15 days. The policy requires the inmate to be present at the review.

CoreCivic policy 14-2, page 10 states “Within a set period of time not to exceed 30 days from the inmate's arrival at the facility, a reassessment of the inmate/detainee's risk level of victimization or abusiveness, will be completed utilizing the 14-2B Sexual Abuse Screening Tool, or contracting agency equivalent instrument.”



Screening Staff Interview – The two staff that complete the risk screening re-assessment said they interview the inmate/detainee again to ask the same questions that are used for the intake screening. The inmate’s/detainee’s answers and the inmate/detainee record are used to review the intake risk assessment for changes due to new information prior to 30 days. They said the re-assessment is usually completed around 25 days after arrival.

Inmate Interview – Forty-one inmates/detainees were interviewed and asked if staff asked them questions about prior victimization, disabilities, identifying as or are perceived to be transgender, gay or bisexual, or if they felt vulnerable to sexual abuse at the facility a second time around 30 days after arrival. Thirty-four inmates/detainees recalled being asked the questions a 2nd time. Six said they were not asked again or couldn’t recall being asked the questions again.

Document Review – Thirty-nine inmates that arrived in the last 12 months were selected randomly from the intake list for review of the risk assessments. Thirty-seven inmates/detainees were at the facility for 30 days or more requiring a reassessment. Two were released prior to 30 days and two were released just after 30 days but did not receive a reassessment. Twenty-four reassessments were completed within 30 days of arrival at the facility. Fifteen reassessments were completed past 30 days from arrival, not meeting the standard. The facility reported the facility was on lockdown for twelve days preventing staff from completing the reassessments, however only four of the reassessments that were late should have been completed during the time frame of the lockdown. The facility must remind staff of the 30-day requirement of the standard and provide additional assessments for review during the corrective action period for proper time frame.

g) ODRC policy 79-ISA-04 page 4 requires a reassessment when an inmate returns from detention at a county jail for a court hearing or for an inmate victim and abuser involved in an incident of sexual abuse that was substantiated or unsubstantiated.

The CoreCivic policy 14-2, page 9 states “A reassessment shall also be completed when warranted, due to a referral, request, incident of sexual abuse, or receipt of additional information that may impact the inmate/detainee’s risk of victimization or abusiveness. Following an incident of sexual abuse, a reassessment shall be completed on both the alleged victim and alleged perpetrator.”

Screening Staff Interview – The staff that complete assessments said they are required to complete a reassessment when new information changes the results of prior assessments or there is a referral due to an incident of sexual abuse.

h) CoreCivic policy 14-2, page 9 and ODRC policy 79-ISA-04 page 3 states inmates may not be disciplined for refusing to answer, or for not disclosing complete information, in response to questions regarding disabilities, LGBTI or gender non-conforming, prior victimization, or the inmate’s perception of vulnerability to sexual abuse.

Screening Staff Interview – The staff that complete assessments said the inmate/

	<p>detainee does not have to answer the questions being asked for an intake assessment or reassessment.</p> <p>i) ODRC policy 79-ISA-04 states “Staff shall ensure the sensitive assessment information is not exploited and that any documents obtained from the assessment are secured.”</p> <p>CoreCivic policy 14-2, page 10 states “The facility shall control the dissemination within the facility of responses to questions on the screening forms in order to ensure that the sensitive is not exploited to the inmate/detainee's detriment by staff or other inmates/detainees.”</p> <p>PREA Coordinator Interview – the PREA Coordinator said the information on the risk assessments is confidential and limited to staff that complete them or who are authorized access. The assessments are in an electronic system that is password protected.</p> <p>PCM Interview – The PCM said the risk assessment is in an electronic system with limited access. Only staff that complete the assessment or review assessments are authorized access.</p> <p>Screening Staff Interview – The staff that complete risk assessments all said the information that is contained on a risk assessment is confidential and only authorized staff have access.</p> <p>Corrective Action Required: Many reassessments are being completed beyond the 30-day time frame required by provision (f). The facility must provide a sample of 30-day reassessments each week for review during the corrective action period. The reassessments must be completed within the required time frame.</p> <p><b>Corrective Action Completed:</b> Thirty-eight initial and thirty-one 30-day reassessments completed after the onsite audit during November, December were reviewed. All intake risk assessments were completed within 72 hours of the inmate/detainee’s arrival and all 30-day reassessments were completed within 30 days of the inmate/detainee’s arrival. An additional sample of assessments completed in January and February was requested after a movement report indicated transfer intake occurred. One hundred and twenty intake assessments were selected at random for review. Ninety-six were completed within 72 hours of the inmate/detainee arrival for substantial compliance. Sixty-eight reassessments were randomly selected for review. All sixty-eight were completed within 30 days of the inmate/detainee’s arrival at the facility. The facility has now demonstrated it meets the standard over a period of time.</p> <p>Based on the information from interviews, documents and policies reviewed, the facility meets all provisions of the standard.</p>
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	<div data-bbox="256 118 959 152" data-label="Section-Header"> <p><b>Auditor Overall Determination: Meets Standard</b></p> </div> <div data-bbox="256 197 542 230" data-label="Section-Header"> <p><b>Auditor Discussion</b></p> </div> <div data-bbox="256 275 1498 2056" data-label="Text"> <p>a) CoreCivic policy 14-2, page 12 states “The facility shall use the information from the 14-2B Sexual Abuse Screening Tool, or equivalent contracting agency form, completed at initial screening and at all subsequent reassessments, in the consideration of housing recreation, work program and other activities.”</p> <p>ODRC policy 79-ISA-04 page 6 states “Receiving institution staff shall review the Transport Authorization/Pass (DRC5055) to identify any IP with a PREA classification or a transgender/intersex IP (i.e., V, PV, A, PA, T, I) to prevent victims or potential victims from being housed with abusers or potential abusers.”</p> <p>PCM Interview – The PCM said the risk assessment results are utilized as a factor in inmate housing assignments. Alerts are generated for inmates at risk of being a victim or an abuser. An inmate that is at risk of being a victim cannot be housed with an inmate that is at risk of being an abuser/perpetrator.</p> <p>Risk Screening Staff Interview – The two staff that complete the risk assessments said the results can be either a risk for victimization, risk for abuser/perpetrator or no risk. The results create alerts in the inmate information system. The risk assessment alerts are reviewed when making housing assignments.</p> <p>b) CoreCivic policy 14-2, page 13 states “The facility shall make individualized case by case determinations about how to ensure the safety of each inmate/detainee.”</p> <p>ODRC policy 79-ISA-04 page 6 states “Based on the information obtained in the PREA Risk Assessment System, assigned PREA classification and good correctional judgment, the UMC, or in their absence the acting UMC, shall complete a PREA accommodation strategy to make individualized determinations about how to ensure the safety of each IP.”</p> <p>Risk Screening Staff Interview – The staff that complete the risk assessments said the results can be either a risk for victimization, risk for abuser/perpetrator or no risk. The results create alerts in the inmate information system. The risk assessment alerts are reviewed when making housing assignments.</p> <p>c) ODRC policy 79-ISA-05 page 3 requires staff to consider on a case-by-case basis whether the housing assignment for a transgender or intersex inmate would ensure the inmate’s health and safety or whether the placement would present management or security problems. The policy requires the facility to have a PREA Accommodation Strategy Team that consists of the Operational Compliance Manager, Unit Management Chief, medical and mental health staff, and other staff as necessary.</p> <p>CoreCivic policy 14-2, page 13 states “In deciding whether to house a transgender/intersex inmate/detainee in a male or female unit, pod, cell, or dormitory within the</p> </div>
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facility subsequent to arrival, or, when making other housing and programming assignments for such inmates/detainees, the facility shall consider whether the placement would ensure the inmate/detainee's health and safety and whether the placement would present management or security problems."

PCM Interview – The PCM said she is notified by the staff that conduct the risk screening when an inmate/detainee identifies as transgender. She said the facility SART has a PAST committee that meets with the transgender inmate/detainee to ask them about their views about safety in the gender of housing assignment, work and program assignments at the facility. The committee also asks the transgender inmate/detainee what their preference is for gender of staff for searches, pronoun preference and if they want to shower separately from the other inmates/detainees in the housing unit. This is all documented on the PAST assessment form.

Inmate Interviews – Six inmates/detainees that identified as transgender were interviewed and said they met with the facility Transgender Committee the first week after arrival at the facility. The committee asked them about their views of safety and preferences of facility placement based on gender, bed assignment, work and program assignments, pronouns, searches and showers.

Document Review – The facility provided the PAST assessment forms for eleven inmates/detainees that identified as transgender at the risk assessment. The form documents the transgender inmate's/detainee's views of safety, preferences for showers, searches, and cross-gender institution. An accommodation plan for housing, work, education, and programs is documented. The members of the PAST committee are documented on the form as well. The committee consists of the AW/PCM, Unit Manager, medical staff, mental health staff, and the PREA Case Manager.

d) ODRC policy 79-ISA-05 page 3 requires the PAST to reassess all transgender and intersex inmates every 6 months regarding their safety, placement and programming assignments using the PREA Assessment Strategy.

CoreCivic policy 14-2, page 13 states "Placement and programming assignments for each transgender or intersex inmate/detainee shall be reassessed at least twice each year to review whether any threats to safety were experienced by the inmate/detainee."

ten transgender inmates/detainees were not at the facility long enough to have another PAST review. One had reviews at intake and 12 months. The 6-month review was missed when the PCM was vacant. The current PCM has made the correction ensuring the last 6-month review was completed.

e) ODRC policy 79-ISA-05 page 4 and CoreCivic policy 14-2 page 16 states transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

Inmate Interview – The seven transgender inmates/detainees interviewed said they were offered and use separate shower times by the PAST committee.

	<p>f) ODRC policy 79-ISA-05 page 3 prohibits placing LGBTI inmates in dedicated facilities, units, or wings based solely on their identification unless there is a consent decree or legal judgement requiring their protection.</p> <p>CoreCivic SCC policy 14-02 states “The establishment of a unit, pod or wing 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.”</p> <p>Inmate Interview – seven transgender, gay or bisexual inmates/detainees were interviewed and said their housing assignment were not in a dedicated unit based on their sexual orientation or gender identity.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of this standard.</p>
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115.43 Protective Custody	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) CoreCivic policy 14-02 page 13 states “Inmates/detainees at high risk for sexual victimization shall not be placed in involuntary restrictive 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 restrictive housing for less than 24 hours while completing the assessment.”</p> <p>ODRC policy 79-ISA-02 requires an imminent risk of sexual abuse assessment to be completed to determine a means of separation from a likely abuser. If the assessment cannot be completed immediately, the inmate can be held in TPU (segregation) for 24 hours.</p> <p>b) CoreCivic policy 14-02 page 13 states “Inmates/detainees placed in restrictive housing pursuant to section I.8. above shall have access to programs, privileges, education, and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) the reasons for such limitations.”</p> <p>ODRC policy 79-ISA-02 requires inmates that are determined to be high risk for victimization not to be placed in TPU until an assessment of all alternative housing has been reviewed. If an inmate is involuntarily placed in segregation, a PREA Involuntary Placement in RH form will be completed to document the review of alternative housing and concerns for safety. Restrictions on privileges, work</p>

	<p>opportunities, programs, and education are to be documented on the form.</p> <p>c) CoreCivic policy 14-02 page 14 states “Restrictive 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 30 days.”</p> <p>ODRC policy 79-ISA-02 requires the inmate to be provided with an initial response within 48 hours and a final decision within 5 days from the initial response.</p> <p>The facility reported on the PAQ that no inmates were involuntarily held in restrictive housing due to high risk for victimization from the assessment during the review period.</p> <p>Warden Interview – The Warden said an inmate has not been involuntarily placed in restrictive housing based on a high risk of victimization assessment in the last year. Staff will look at all alternatives in housing prior to placing an inmate involuntarily in restrictive housing. The goal is to keep the inmate in general population.</p> <p>Staff that Supervise Segregated Housing – A Unit Manager that supervises the TPU (segregation) was interviewed. He said that inmates involuntarily placed in restrictive housing for high risk of victimization would still have some access to education or other program materials through workbooks or their tablets. Restrictions on privileges and programs would be documented. A review of placement in restrictive housing is conducted 7 days after placement and then every 30 days. The goal is to get them removed from TPU as soon as it is safe to do so. He said there has not been an inmate involuntarily placed in segregation for high risk of victimization in the last year.</p> <p>Based on the information from interviews and policies reviewed, this auditor finds the facility meets the provisions of this standard.</p>
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115.51	Inmate reporting
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-02 states “Inmates/detainees shall be encouraged to immediately report pressure, threats, or instances of sexual abuse or sexual harassment, as well as possible retaliation by other inmates/detainees or employees for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.”</p> <p>ODRC policy 79-ISA-02 page 2 provides inmates with several methods to report allegations of sexual misconduct. Neglect to report by staff or retaliation to any staff. Reports may be made either verbally or in writing.</p> <p>Random Staff Interview – All staff said that an inmate or detainee could make a verbal</p>

report to staff privately anytime, call on the phone to the numbers posted in the housing units, write a report and put it in the mailbox. Anonymous reports can be written without a name on them and dropped in the inmate mailbox.

**Inmate Interviews** – Most inmates/detainees said they could make a report of retaliation, sexual abuse, sexual harassment, and staff failure to report through the PREA hotline on the offender phone system or the tablet, write to their case manager on paper or through a kite, tell their family to report for them, file a grievance or just tell any staff. Some inmates/detainees knew there was a number they could call to report to an outside agency but couldn't remember who it was. Every inmate/detainee interviewed knew several methods of reporting.

**Tour Observations** - During the tour of the facility, PREA reporting information posters were seen in every housing unit wing, dining facility, recreation building, commissary line area, medical waiting area, visiting room and education building. The posters were next to the offender phones or in waiting areas such as medical and commissary. This auditor made a test report for the PREA hotline in the USMS detainee housing unit and ODRC inmate housing unit. Inmates/detainees do not have to use a PIN number or their DOC number to call the speed dial number or the actual full number. This can allow the inmate/detainee to remain anonymous. Staff at the facility verified the report was received shortly after the reports were made. The emails received from the call were forwarded to this auditor for documentation.

b) CoreCivic policy 14-02 states “Each facility shall provide at least one way for inmates/detainees to report abuse or harassment to a public or private entity or office that is not part of CoreCivic or the contracting agency and that is able to receive and immediately forward inmate/detainee reports of sexual abuse and sexual harassment to facility officials, allowing the inmate/detainee to remain anonymous upon request.”  
“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.”

ODRC policy 79-ISA-02 page 2 provides inmates with the ability to report allegations to an outside entity that is not part of the ODRC. The outside entity will then report the allegations to the ODRC PREA Coordinator. Inmates can remain anonymous upon request to the outside entity.

**Document Review** – The ODRC has an MOU with the Ohio Department of Youth Services regarding providing a way for inmates to report allegations of sexual abuse and sexual harassment to a public entity that is not part of the ODRC. The Ohio DYS agrees to provide a phone number with a voicemail box to receive and immediately forward reports of sexual abuse and sexual harassment to the ODRC Chief Inspectors Office to initiate an investigation. The MOU was signed in October of 2023 and is effective for three years.

**PCM Interview** – The PCM said inmates can report to the Division of Youth Services as the agency outside of ODRC and NEOCC. The inmates can mail a written report to DYS Chief Inspector's Office at the address provided. If the inmate wants to remain anonymous, they can leave their name off the report and envelope.

Inmate Interviews – Most inmates and detainees knew there was someone they could report to outside of the facility. If they wanted to remain anonymous, they would just leave their name off the report. When asked if the information was in the inmate handbook, most could recall that they saw it in there. Inmates can also see reporting information on posters in the housing units.

A test call was made by this auditor to the DYS PREA hotline. The message was forwarded to the NEOCC. NEOCC notified this auditor they received the test report within 24 hours.

c) CoreCivic policy 14-02 states “Employees/contractors must take all allegations of sexual abuse seriously, including verbal, anonymous, and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports.”

ODRC policy 79-ISA-02 page 3 requires staff to complete a written incident report when they observe, suspect, or are made aware of an allegation of sexual abuse or sexual harassment. The report is to be immediately forwarded to the facility investigator, shift supervisor, unit management chief and the PREA Coordinator.

Random Staff Interview – Staff said the inmates/detainees could report to them verbally, in writing, anonymously in writing or have the family make a report. Staff said they are required to do an incident report for all reports of sexual abuse or sexual harassment to include verbal reports. The report must be turned in before the end of their shift on the same day.

Inmate Interviews – Most inmates/detainees said they could make a report of retaliation, sexual abuse and sexual harassment through the offender phone system or the tablet, write to their case manager, tell their family to report for them, or just tell any staff. Every inmate interviewed knew several methods of reporting.

d) CoreCivic policy 14-02 states “CoreCivic employees, contractors, volunteers and interested third parties may report allegations of sexual abuse and sexual harassment (including anonymous reports) to the CoreCivic 24-hour Ethics line.”

ODRC policy 79-ISA-02 page 3 allows staff to privately report incidents of sexual misconduct by completing an incident report and marking it confidential and submitting it directly to the operational compliance manager or PREA Coordinator. The OCM or PREA Coordinator will ensure the report is investigated while maintaining the anonymity of the staff.

Random Staff Interviews – When asked how staff can make a private report, all staff said they could use the Ethics Line. They could also ask to talk to their supervisor in private to make the report. Another private way to report was to email the PCM, investigator or shift supervisor.

Investigation File Review – Inmates reported allegations directly to staff either verbally or by writing through the kite system on their tablet. Two reports were made through filing a grievance. One report was on a written note handed to staff.



	Based on the information from interviews, policies, and documents reviewed, the facility meets the provisions of the standard.
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>CoreCivic policy 14-02 states “CoreCivic facilities do not maintain administrative procedures to address inmate/detainee grievances regarding sexual abuse unless specifically mandated by contract. Allegations of sexual abuse and/or sexual harassment are not processed through the facility inmate/detainee grievance process.” “Should a report of sexual abuse or sexual harassment be submitted and received as an inmate/detainee grievance, whether inadvertently or due to contracting agency requirements, it will immediately be referred to the facility Investigator or Administrative Duty Officer for investigation and reporting in accordance with this policy.”</p> <p>A review of the CoreCivic policy finds the agency is exempt from this standard based on the FAQ from July19, 2022. Staff that provide inmate PREA education tell the inmates that reporting sexual abuse in a grievance will automatically be sent to the investigator and not processed.</p> <p>The ODRC PREA Coordinator provided a memorandum that states ODRC does not utilize the grievance process to receive allegations of sexual abuse or sexual harassment. All allegations of sexual abuse and sexual harassment are forwarded to investigators. Inmates are not prohibited from reporting through a grievance, however ODRC educates inmates that allegations received in a grievance will be immediately forwarded to investigators.</p> <p>Based on the information provided, the facility is exempt from this standard.</p>

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b, c) ODRC policy 79-ISA-01 states “The institution OCM and the victim support person shall compile mailing addresses and telephone numbers including toll-free hotline numbers of local, state, or national victim advocacy or rape crisis organizations. This information shall be provided to the unit staff for communication to the incarcerated individual. Incarcerated individuals must be notified that telephone calls are not confidential.” “If a victim advocate from a rape crisis center is</p>

not available to provide victim advocate services, the institution shall make available a victim support person to provide these services. The victim support person supports a victim of sexual misconduct which may include: (1) accompanying the victim to the hospital; (2) supporting the victim through the forensic medical examination and investigatory interview; and/or (3) providing emotional support, crisis intervention, information, and referrals.”

CoreCivic policy 14-02 states “Inmates/detainees shall have access to outside victim advocates for emotional support services related to sexual abuse by being provided with mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations.” “Reasonable communication between inmates/detainees and the posted numbers for emotional support or advocacy services shall be permitted in as confidential manner as possible. The facility shall post the extent to which such communication will be monitored and/or recorded. The facility shall have a process in place to ensure that written correspondence between inmates/detainees and these agencies may remain confidential.”

Document Review – The ODRC has a MOU between the Compass Family and Community Services and Northeast Ohio Correctional Center where the CFCS will provide confidential emotional support services to inmate victims of sexual abuse at NEOCC during forensic examinations, investigatory interviews at the hospital, provide referrals and follow-up services. The MOU was signed in August of 2023 and is effective until August of 2026.

Tour Observations – A memorandum from the Warden to the inmate population informing inmates the facility has an agreement with Compass Family and Community Services that offers services to inmates who have experienced sexual abuse. A bright colored poster was observed posted in the housing units and program areas of the facility that provides information to inmates and detainees about PREA reporting and the services Compass Family and Community Services can provide to victims of sexual abuse. The information is also available in the inmate/detainee handbook.

Staff Interview – A staff was interviewed that provides victim advocate services to inmate victims of sexual abuse. She said she received victim advocate training from the ODRC in 2023 and completes refresher training quarterly. She can provide emotional support services to inmates/detainees at the forensic examination and interviews with facility investigator or the OSHP and YPD if requested by the inmate/detainee. She said the facility has seventeen staff trained as qualified victim advocates.

PREA Compliance Manager Interview – The PCM said they have seventeen staff that have completed victim advocate training to be qualified to provide victim advocate services at investigator interviews and at forensic exams at the hospital.

Inmate Interview – Most inmates/detainees recalled being told about services for victims of sexual abuse during orientation. Some see the memorandum from the Warden about victim services and information on the posters.

	<p>Investigation File Review – in each investigation file a Victim Support Person Activity Report was found that documented the meeting between the staff victim advocate and inmate/detainee victim and what services were offered and accepted by the inmate/detainee victim.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>CoreCivic policy 14-02 states “CoreCivic employees, contractors, volunteers and interested third parties may report allegations of sexual abuse and sexual harassment (including anonymous reports) to the CoreCivic 24-hour Ethics line at 1-866-757-4448 or through <a href="http://www.CoreCivic.ethicspoint.com">www.CoreCivic.ethicspoint.com</a>.” Posters informing inmates/detainees and their visitors how family and friends can make a report on behalf of an inmate/detainee were observed in the visiting room, staff administration area, Officer Dining area, and inmate housing and program areas. The posters provided the phone number and email address to the ODRC.</p> <p>Staff Interview - During random staff interviews, all staff knew of a phone number they could make a third-party report of sexual abuse or sexual harassment on behalf of an inmate/detainee.</p> <p>Inmate Interview - During inmate/detainee interviews, most inmates/detainees said their family could call a phone number to make a report of sexual abuse or sexual harassment on their behalf. This information is posted on the Northeast Ohio Correctional Center webpage at <a href="https://www.corecivic.com/facilities/lake-erie-correctional-institution">https://www.corecivic.com/facilities/lake-erie-correctional-institution</a>.</p> <p>The ODRC PREA webpage has a link to send an email for third parties to report sexual misconduct involving an inmate. The webpage is found at <a href="https://drc.ohio.gov/about/resource/prison-rape-elimination-act-prea/4-prea">https://drc.ohio.gov/about/resource/prison-rape-elimination-act-prea/4-prea</a>. A test report email was sent, and a test report phone call was made by this auditor to the ODRC. This auditor was notified the test reports were received within 24 hours.</p> <p>Based on the information from tour observations, policy and website review, this auditor finds the facility meets this standard.</p>

<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

a) ODRC policy 79-ISA-01 page 3, section 2 requires all staff to immediately report any knowledge or suspicion of an incident of sexual abuse or sexual harassment of an inmate that occurred in an institution. Staff are also required to report any retaliation against staff or inmates that report incidents or staff neglect to report an incident.

CoreCivic policy 14-02 page 17 states "In accordance with this policy, employees/contractors are required to report immediately any knowledge suspicion, or information regarding, an incident of sexual abuse of sexual harassment that has occurred in any facility (including a facility that is not part of CoreCivic)."

Random Staff Interviews - All staff interviewed said they are required to immediately report all knowledge or suspicion of an incident of sexual abuse or sexual harassment; retaliation against staff or inmates that report an incident; and staff neglect to report an incident or retaliation.

b) ODRC policy 79-ISA-01 page 4, section 3 requires staff not to reveal any information related to an incident of sexual abuse or sexual harassment to other staff not involved in the response to or the investigation of a report.

CoreCivic policy 14-02 page 17 states "Apart from reporting to designated supervisors or officials, employees/contractors 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."

Random Staff Interviews - All staff said they are not allowed to share information reported to them about an incident of sexual abuse or sexual harassment with staff that are not involved in the response or investigation.

c) ODRC policy 79-ISA-01 page 3, section 2 requires medical and mental health staff to report all knowledge or suspicion of sexual abuse or sexual harassment that occur in an institution. The medical and mental health staff must also inform inmates of their duty to report such incidents.

CoreCivic policy 14-02 page 18 states "Unless otherwise precluded by federal, state, or local law, medical and mental health professionals shall be required to follow reporting procedures as outlined in this policy. At the initiation of providing medical care, both medical and mental health professionals will inform inmates/detainees of their professional duty to report and the limitations of confidentiality."

Medical Staff Interview - The medical staff interviewed said she is required to report incidents of sexual abuse or sexual harassment that occurred in an institution to the Shift Supervisor. She said inmates/detainees are notified of this duty to report during the medical transfer screening process at arrival to the facility.

Mental Health Staff Interview - The mental health staff interviewed stated they inform inmates/detainees at the beginning of services that they must report any incident of

	<p>sexual abuse and sexual harassment that occurred in a corrections setting. Neither have had an inmate/detainee report anything to them in the last year.</p> <p>d) CoreCivic policy 14-02 page 18 states “If the alleged victim is under the age of 18 or is considered a vulnerable adult under a state or local vulnerable person's statute, the allegation shall be reported to the investigating entity responsible for criminal investigations and the contracting agency under applicable mandatory reporting laws.”</p> <p>PCM Interview – If an inmate/detainee that would meet the definition of a vulnerable adult reported an incident of sexual abuse, the PCM said the facility would contact the Ohio Adult Protective Services as required. She said NEOCC does not have inmates/detainees under 18.</p> <p>Warden Interview – The Warden said if an inmate/detainee that fits the definition of a vulnerable adult alleged being a victim of sexual abuse, the facility would be required to contact the Ohio Adult Protective Services to report the abuse. He said he has not had to make a report on behalf of a vulnerable adult. He said the facility does not house inmates/detainees under 18 years of age.</p> <p>e) Warden Interview – The Warden said all reports of sexual abuse and sexual harassment, including third party and anonymous reports, are given to the facility investigator for review. If the allegation is sexual abuse, the facility investigator will contact the Ohio State Highway Patrol for ODRC inmates or Youngstown Police Department for USMS detainees. If the allegation is sexual harassment, the facility investigator will initiate an administrative investigation.</p> <p>Investigation File Review – fifteen investigations were completed in the last 12 months and provided for review. All reports of sexual abuse and sexual harassment were immediately provided to the Facility Investigator for administrative investigation. Two reports of sexual abuse were referred to the Ohio State Highway Patrol and two were referred to the Youngstown Police Department for investigation of possible criminal violations. Based on the review of investigations, all reports of sexual abuse and sexual harassment were responded to immediately and referred to investigators either at the facility or outside law enforcement in accordance with the facility response plan.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	ODRC policy 79-ISA-002 requires all reports of imminent sexual abuse to be

	<p>immediately forwarded to the facility investigator, OCM, UMC, and shift supervisor. Security staff are required to take immediate action to protect the inmate victim.</p> <p>CoreCivic policy 14-02 page 17 states “When it is learned that an inmate/detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate/detainee.”</p> <p>Agency Head Interview – If an inmate reported being in imminent risk of sexual abuse, the Vice President said the staff will take immediate action to protect the inmate by separating them from the alleged perpetrator. An investigation would be initiated to determine if there are other actions needed in response.</p> <p>Warden Interview – The Warden said staff would take immediate action to separate the victim and perpetrator if there was an imminent risk of sexual abuse. The inmate perpetrator could be placed in segregation or staff would be placed on a post away from the victim or suspended temporarily if needed.</p> <p>Random Staff Interviews – All staff interviewed said if an inmate were in imminent risk of sexual abuse, they would take immediate action to protect the inmate by separating them from other inmates and keeping the inmate with them while they notify the shift supervisor.</p> <p>The facility reported on the PAQ no instances of imminent risk of sexual abuse requiring immediate action during the review period. There were no allegations of imminent risk of sexual abuse found in the investigation file review.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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115.63	Reporting to other confinement facilities
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a-c) If an inmate at NEOCC reports an incident of sexual abuse that occurred at another facility, CoreCivic policy 14-02 requires the Warden to provide the information received from the inmate at NEOCC to the facility head of the facility where the incident was alleged to have occurred within 72 hours. The policy requires NEOCC to document that it has provided the information through the 5-1B Notice to Administration.</p> <p>ODRC policy 79-ISA-02 states if an inmate reports to NEOCC staff an allegation of sexual abuse that occurred at another facility, policy requires NEOCC Warden to provide the information to the facility head at the facility where the sexual abuse occurred within 72 hours.</p> <p>CoreCivic policy 14-02 page 23 states “When the Warden/Facility Administrator of the</p>

	<p>facility that received the allegation shall notify the Warden/Facility Administrator or appropriate headquarters office of the facility or agency where the alleged abuse took place as soon as possible, but no later than 72hours after receiving the allegation.”</p> <p>Warden Interview – During his interview, the Warden said if an inmate at NEOCC reports an incident of sexual abuse that occurred at another facility, he would forward information on a 5-1B form to the facility head of the other facility. This would be done within 72 hours.</p> <p>PCM Interview - If an inmate at NEOCC reports an incident of sexual abuse that occurred at another facility, the Facility investigator will get the report from the alleged victim and send it to the Warden to be forwarded to the facility where the incident took place. She called the facility to provide the information on the same day she received it. It is recommended that the information be emailed as well to provide additional documentation of when it was sent.</p> <p>The facility provided a 5-1B form from the NEOCC Warden notifying the Warden of another an inmate at NEOCC reported an incident of sexual abuse that occurred at their facility. The information was sent within 72 hours of the inmate reporting the allegation to NEOCC staff based on the date of the 5-1B form.</p> <p>d) ODRC policy 79-ISA-02 requires the Warden to refer allegations of sexual abuse that occurred at NEOCC he receives from another facility head regarding a former NEOCC inmate/detainee to NEOCC facility investigators or OSHP or YPD for investigation.</p> <p>Warden Interview - The Warden said if he receives a report from another Warden about an incident of sexual abuse that occurred at NEOCC from a former inmate/detainee at another facility, he will provide the information to the Facility Investigator and OSHP or YPD to conduct an investigation.</p> <p>PCM Interview – The PCM said if the facility receives a report of sexual abuse that occurred at NEOCC from an inmate at another facility, it will be assigned for investigation and the facility will coordinate additional inmate interviews with the holding facility. Sexual abuse allegations would be referred to OSHP for ODRC inmates and YPD for USMS detainees.</p> <p>According to the PCM, the facility did not receive an allegation of sexual abuse from a former inmate/detainee at another institution in the last 12 months. There were no completed investigations reviewed that were initiated from an allegation received from another facility.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-02 requires security staff first responders to: separate the victim from the alleged abuser, preserve and protect evidence at the scene and/or on the victim, take the victim to medical, and notify the highest supervisory authority on site.</p> <p>ODRC policy 79-ISA-02 requires a Sexual Abuse First Responder Checklist to be completed when there is a report of sexual abuse. Security staff are required to separate the victim and abuser, preserve evidence at the scene, instruct the victim not to destroy evidence, prevent the abuser from destroying evidence.</p> <p>b) CoreCivic policy 14-02 states “If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then shall notify security staff.”</p> <p>ODRC policy 79-ISA-02 requires non-security staff to separate the victim from the abuser, protect evidence and contact security staff (shift supervisor).</p> <p>Random Staff Interviews – Security staff were selected at random from shift rosters for interview. All staff were asked to describe their responsibilities and steps they are required to complete when an inmate makes a report of sexual abuse/sexual assault to them. All staff said they were required to separate the victim from the perpetrator, protect evidence on the victim and at the scene, notify the shift supervisor and wait for custody staff to come take the inmate to medical or take the inmate to medical if asked. Non-security contract staff said they are required to keep the inmate with them and notify the shift supervisor so security staff could take them to medical. Non-security contract staff would be notifying security staff when they notify the shift supervisor (a captain or lieutenant) of the report of sexual abuse. Staff showed this auditor a First Responder Card they carry that provides them with quick reference information about the steps they are to follow.</p> <p>Document Review – There were eleven sexual abuse investigations reviewed that were completed in the last 12 months. Inmates/detainees reported allegations to non-security staff in nine sexual abuse investigations and to security staff in three allegations of sexual abuse. The non-security staff notified security staff in all nine cases. Security staff took custody of the victim from the non-security staff in the nine incidents. One case was within a time frame that required custody staff first responders to instruct the inmate victim not to destroy possible DNA evidence.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>



	<p>The coordinated response plan was included in CoreCivic NEOCC policy 14-02 under section L and M. The plan described a Sexual Assault Response Team that included the PCM or Duty Officer, Medical staff, Security Staff, Mental Health Staff, and the Victim Services Coordinator. The plan requires the SART assignments to be made by the PCM or ADO in response to a report of sexual abuse. The plan defined the responsibilities of first responders, security supervisors, executive staff, medical staff, and investigators as the institutional plan to coordinate the response of staff to an incident of sexual abuse. The plan delineates the responsibilities for first responder staff, medical staff, mental health staff, investigators, and facility leadership.</p> <p>CoreCivic policy 13-79 Sexual Assault Response provides the medical response plan.</p> <p>Warden Interview – The Warden said the facility has a Sexual Assault Response Team that consists of first responders, the investigator, medical, Assistant Warden PCM. The SART meets monthly to review incidents and the response protocols. Each SART staff’s responsibilities are outlined in the Institution Sexual Abuse Coordinated Response Plan.</p> <p>Based on the information from review of the facility coordinated plan and the Warden interview, this auditor finds the facility meets the standard.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) Agency Head Interview – The Vice President said CoreCivic has a collective bargaining agreement since 2012 that permits the removal of alleged staff sexual abusers from contact with the inmate while there is a pending investigation.</p> <p>The facility reported on the Pre-Audit Questionnaire that NEOCC does not have a collective bargaining agreement. This was verified with the CoreCivic PREA Coordinator, NEOCC PCM and Warden. CoreCivic does not have an agreement at all CoreCivic facilities.</p> <p>Based on the information from the interview and document review, the facility meets this standard.</p>

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

a) CoreCivic policy 14-02 states “Inmates/detainees and staff who report sexual abuse or sexual harassment (or cooperate with sexual abuse or sexual harassment investigations) shall be protected from retaliation by other inmates/detainees or staff.”

b-d) CoreCivic policy 14-02 states “For at least 90 days (30/60/90) following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates/detainees who reported sexual abuse and inmates/detainees who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation against them by inmates/detainees or staff. The facility shall employ multiple protection measures to monitor retaliation against inmates/detainees including but are not limited to, (a) housing changes or transfers for inmate/detainee victims or abusers, (b) removal of alleged staff or inmate/detainee abusers from contact with victims, (c) emotional support services for inmates/detainees who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, (d) periodic status checks, and (e) monitoring disciplinary reports, housing or program changes”

CoreCivic policy 14-02 states “For at least 90 days (30/60/90) following a report of sexual abuse, the agency shall monitor the conduct and treatment of staff who reported sexual abuse to see if there are changes that may suggest possible retaliation by inmates/detainees or other staff.”

e) CoreCivic policy 14-02 states “If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.”

f) CoreCivic policy 14-02 states “The facility obligation to monitor retaliation for staff and inmates/detainees shall terminate if the facility determines that the allegation is unfounded.”

Staff Designated to Conduct Retaliation Monitoring – A staff designated to conduct retaliation monitoring said she is contacted by Teams meeting or chat immediately after a report of sexual abuse or sexual harassment. She meets with the inmate/detainee initially to inform them she will be monitoring for retaliation and there will be a meeting every 30 days. If anything occurs between meetings, the inmate/detainee should contact her or tell other staff about the retaliation. She reviews housing assignments, conduct, program changes for any sudden changes. If she sees anything, she will ask the inmate if there is an issue. She also consults the inmate’s case manager for information about possible retaliation. If retaliation is suspected or there is evidence of retaliation, she contacts the PCM who has an investigation started. Monitoring will last up to 90 days, and it can go longer if needed. If there is an unfounded investigation outcome, she stops the monitoring. She also ensures the mental health referral is completed for emotional support.

Agency Head Interview – The facilities have staff designated to monitor retaliation. Retaliation against a person that reported sexual abuse by staff or inmates is prohibited. All suspected retaliation is investigated and acted upon accordingly.

	<p>Warden Interview – The Warden said the staff monitoring would report suspected or actual retaliation information to the PCM for referral for investigation. If retaliation is suspected or there is evidence of retaliation, the Warden said he would have the Facility Investigator investigate the alleged retaliation. If an inmate is found retaliating against another inmate or staff, he can be disciplined and/or transferred if needed. If staff are retaliating against an inmate or staff, the staff could face discipline up to termination. He would consult with HR to follow progressive discipline.</p> <p>Document Review – Retaliation monitoring was conducted in eight of the twelve investigations of sexual abuse and sexual harassment reviewed. Two allegations of sexual abuse and one sexual harassment were unfounded. Monitoring was documented on a PREA Retaliation Monitoring Report form every 30 days. There was thorough documentation of factors reviewed for signs of retaliation. There were three sexual abuse allegations in 2023 that did not have retaliation monitoring conducted. The PCM said there was an issue identified in February of 2024 resulting in the CoreCivic PREA Coordinator conducting training for retaliation monitoring with the staff designated for monitoring at NEOCC. Documentation of the February 2024 training was provided. Additional retaliation monitoring was requested for allegations received after the training had occurred. Documentation for retaliation monitoring for ten inmates/detainees were provided for review. All were assigned to staff for monitoring immediately after the incident was reported. Four documented a meeting at 30 days from the report but ended due to transfer or release or was still ongoing. Three were assigned to the staff but the inmate/detainee was transferred prior to the first 30-day meeting. Three documented meetings every 30 days through 90 days. From the documentation provided, the facility has made the correction over eight months prior to the onsite audit and has demonstrated consistent compliance with the standard since that time.</p> <p>Inmates that reported sexual abuse – Two inmates that reported sexual abuse reported meeting with a staff member several times and being asked if they think anyone was retaliating against them. They said these meetings were about once a month.</p> <p>The facility meets the provisions of this standard based on the information from interviews, policy and documents reviewed.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) CoreCivic policy 14-02 page 13 states “Inmates/detainees at high risk for sexual victimization shall not be placed in involuntary restrictive housing unless an assessment of all available alternatives has been made, and a determination has</p>

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 restrictive housing for less than 24 hours while completing the assessment.”

ODRC policy 79-ISA-02 requires an imminent risk of sexual abuse assessment to be completed to determine a means of separation from a likely abuser. If the assessment cannot be completed immediately, the inmate can be held in LPU (segregation) for 24 hours.

CoreCivic policy 14-02 page 13 states “Inmates/detainees placed in restrictive housing pursuant to section I.8. above shall have access to programs, privileges, education, and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) the reasons for such limitations.”

ODRC policy 79-ISA-02 requires inmates that are determined to be high risk for victimization not to be placed in TPU until an assessment of all alternative housing has been reviewed. If an inmate is involuntarily placed in segregation, a PREA Involuntary Placement in RH form will be completed to document the review of alternative housing and concerns for safety. Restrictions to privileges, work opportunities, programs, and education are to be documented on the form.

CoreCivic policy 14-02 page 13 states “Restrictive 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 30 days.”

ODRC policy 79-ISA-02 requires the inmate to be provided with an initial response within 48 hours and a final decision within 5 days from the initial response.

The facility reported on the PAQ that no inmates were involuntarily held in restrictive housing that reported sexual abuse during the review period.

Warden Interview – The Warden said an inmate has not been involuntarily placed in restrictive housing for reporting sexual abuse in the last year. Staff will look at all alternatives in housing prior to placing an inmate involuntarily in restrictive housing. The goal is to keep the inmate in general population.

Staff that Supervise Segregated Housing – A Unit Manager that supervises the TPU (segregation) was interviewed. He said that inmates involuntarily placed in restrictive housing for reporting sexual abuse would still have some access to education or other program materials through workbooks or their tablets. Restrictions on privileges and programs would be documented. A review of placement in restrictive housing is conducted 7 days after placement and then every 30 days. The goal is to get them removed from TPU as soon as it is safe to do so. He said there has not been an inmate involuntarily placed in segregation for high risk of victimization in the last year.

	<p>Inmate Interview – An inmate in TPU said their placement in segregation was not an involuntary placement related to reporting sexual abuse. Two inmates that reported sexual abuse said they were not placed in segregation involuntarily. One was in segregation for other pending conduct and the other requested PC.</p> <p>Based on the information from interviews and policies reviewed, this auditor finds the facility meets the provisions of this standard.</p>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) CoreCivic policy 14-02 states “Facility administrative investigations into allegations of sexual abuse and sexual harassment shall be done promptly, thoroughly and objectively for all allegations including third-party reports and anonymous reports.” ODRC policy 79-ISA-02 requires investigations conducted by the facility to be thorough, prompt and objective for all allegations including third party and anonymous reports. Both policies reflect this provision.</p> <p>Facility Investigator Interview – The facility has several investigators. An investigator that conducts investigations for ODRC inmate allegations and one that conducts investigations for USMS detainee allegations were interviewed. The Facility Investigators said they receive information from a report of sexual abuse or sexual harassment the same day or next day depending on the type of incident. Both respond immediately to reports. If it is third-party or anonymous report, the process is the same. He will follow up with a third-party reporter if he needs more information. He will investigate an anonymous report the best he can based on the information provided in the report.</p> <p>Investigation File Review – Fifteen investigations completed during the last 12 months were selected from a list of twenty-nine for review. Most of the investigations did not provide dates for when the investigation began. As a result, this auditor cannot tell if an investigation was promptly started after the report was received. The date the inmate reported the allegation is provided and the date the investigation ends are the only dates in the investigation report. Several investigations did not document interviews being conducted with the victim or alleged perpetrator. The presence or absence of witnesses was not addressed. Some investigation reports documented the victim or alleged perpetrator providing a written statement but did not indicate if the investigator interviewed either. One investigation case file did not have an investigation report to review. The report was requested by this auditor and provided for review after the onsite audit. Corrective action is required for the facility to meet this provision of the standard.</p> <p>b) CoreCivic policy 14-02 states “The facility shall use investigators for administrative investigations who have received special training in sexual abuse</p>

investigations pursuant to Standards 115.34.” ODRC policy 79-ISA-02 also requires Facility Investigator Interview – The Facility Investigators said they have completed the NIC PREA investigations training online.

Document Review - The facility provided completion certificates for the NIC Investigating Sexual Abuse in a Confinement Setting for the staff designated to conduct investigations.

c) CoreCivic policy 14-02 states “Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.” ODRC policy 79-ISA-02 page 10 also requires facility investigators to gather evidence required in the standard and to conduct interviews with the victim, witnesses and alleged perpetrators.

Facility Investigator Interview – Both Facility Investigators said in conducting administrative investigations they review video monitoring evidence, physical evidence, conducts interviews with the alleged victim, witnesses, and the alleged perpetrator. Both will review the conduct and PREA history for the alleged victim, inmate perpetrator and staff perpetrator.

Investigation File Review – Several investigation reports did not document interviews with the suspect, witnesses or the victim. It appeared written statements were the only source of testimonial evidence. Interviews may have been conducted but were not documented in the report. A review of prior investigations and conduct history of the suspect was not documented in all investigations as well. Corrective action is required for the facility to meet this provision of the standard.

d) CoreCivic policy 14-02 states “When the quality of evidence appears to support criminal prosecution, the investigating entity shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.”

Investigator Interview – The Facility Investigator for ODRC inmate allegations said the Ohio State Highway Patrol conducts all criminal investigations. If he receives a report of sexual abuse, he notifies the OSHP and provides the initial information. The OSHP conducts compelled interviews and consults with the prosecutor if needed. The Facility Investigator for USMS detainee allegations said the Youngstown Police Department conducts criminal investigations when there is a potential criminal violation for a report of sexual abuse. The YPD conducts compelled interviews and communicates with the prosecutor’s office if necessary.

e) CoreCivic policy 14-02 states “The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as inmate/detainee or staff. No agency shall require an inmate/detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an

allegation.” ODRC policy 79-ISA-02 page 10 prohibits the use of a polygraph examination or other truth telling device.

Investigator Interview – Both Facility Investigators said they would never require an inmate victim to complete a polygraph examination as a condition to proceed in an investigation. They determine the credibility of victim, witness and suspect on an individual basis and a review of their conduct history, prior PREA investigations or staff discipline record.

f) CoreCivic policy 14-02 states “Administrative Investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse.” ODRC policy 79-ISA-02 page 10 requires administrative investigations to include a review of staff actions or failure to act possibly contributing to the abuse. Reports are required to document physical, testimonial evidence, the reason behind credibility assessments, and investigative facts and findings.

Investigator Interview – The Facility Investigators said they review staff actions or any failure to act in the investigation or at the incident review. They said interviews with victims, witnesses and suspects are documented in the investigation report.

Investigation File Review – None of the Fifteen investigations reviewed documented a review of staff actions or failure to act that may have contributed to sexual abuse. A review of staff actions must be documented in the investigation report. This may involve a review of staff following response protocols or conducting rounds per post orders. Testimonial evidence was based on written statements on most of the fifteen investigations. If investigators were interviewing victims, witnesses and suspects it was not being documented in the investigation reports. Corrective action is required for the facility to meet this provision of the standard.

g) CoreCivic policy 14-02 states “Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.” ODRC policy 79-ISA-02 page 10 requires criminal investigations to be conducted written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. The policy also requires allegations of sexual misconduct to be referred to the Ohio State Highway Patrol. The ODRC has an MOU with the Ohio State Highway Patrol to conduct criminal investigations.

Investigator Interview – The Facility Investigators said the Ohio State Highway Patrol or Youngstown Police Department conducts all criminal investigations.

h) CoreCivic policy 14-02 states “Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.” The policy reflects the requirements for this provision of the standard. ODRC policy 79-ISA-02 page 10 requires substantiated allegations of conduct that appear to be criminal to be referred for prosecution.

Investigator Interview – the facility investigators said if the OSHP or YPD determines

an allegation of sexual abuse is substantiated and there appears to be a criminal violation, the OSHP or YPD will make the referral to the prosecutor.

Investigation File Review – Two investigations of staff sexual abuse had a substantiated outcome but were not referred to prosecutors by OSHP or YPD due to there not being a clear criminal violation.

i) CoreCivic policy 14-02 states “The agency shall retain all investigative reports into allegations of sexual abuse for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.” The policy reflects the requirements for this provision of the standard.

j) CoreCivic policy 14-02 states “The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.” ODRC policy 79-ISA-02 page 10 states “The departure of the alleged abuser or victim from the employment or control of the institution or ODRC shall not provide a basis for terminating an investigation.”

Facility Investigator Interview – Both investigators said the investigation is continued, and they will attempt to contact the alleged perpetrator by phone for interview if this has not been done prior to them leaving. If there is a criminal investigation the OSHP or YPD will continue the investigation.

l) CoreCivic policy 14-02 states “The facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.” ODRC policy 79-ISA-02 page 10 requires the facility to cooperate with outside investigators and remain informed of the progress of their investigations.

Facility Investigator Interview – The Facility Investigators said the detectives for the OSHP and YPD are very good at keeping them informed of progress for criminal investigations. They are told when the OSHP or YPD will not pursue a criminal investigation, and an administrative investigation can be conducted.

Warden Interview – The Warden said the Ohio State Highway Patrol and Youngstown Police Department investigators have very good communication with the Facility Investigators. OSHP and YPD keeps the Facility Investigators up to date on progress with the criminal investigation and informs the Facility Investigators if they are not pursuing charges or provides the outcome of the criminal investigation and referral for prosecution.

PREA Compliance Manager – The PCM/AW said the OSHP and YPD have good communication with the Facility Investigators about the progress of a criminal investigation.

Corrective Action Required: The investigation reports did not provide information that demonstrates compliance with three provisions of the standard.

a) Provide dates for when investigations begin, and evidence is reviewed or collected. Conduct and document interviews with the victim, suspect and identified witnesses. Provide the date the interviews are conducted.



	<p>c) Review prior investigations and conduct history for suspects. Document the review in the report.</p> <p>f) Review staff actions of failure to act that may have contributed to the abuse and document in the investigation report.</p> <p>The facility must provide completed investigations for review as they are completed during the corrective action period.</p> <p><b>Corrective Action Completed:</b> The facility provided nine investigation reports for investigations completed during the corrective action period for review. The investigation reports documented interviews with victims, subjects and witnesses, the review of video evidence, the review of perpetrator history, and the review of staff actions. The investigation reports documented a more thorough investigation that meets the provisions of the standard.</p> <p>Based on the information from interviews, documents and policies reviewed, the facility meets all provisions of the standard.</p>
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115.72	Evidentiary standard for administrative investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-2 states “In any sexual abuse or sexual harassment investigation in which the facility is the primary investigating entity, the facility shall utilize a preponderance of the evidence standard for determining whether sexual abuse or sexual harassment has taken place.”</p> <p>ODRC policy 79-ISA-02 page 10 requires a standard no higher than preponderance of the evidence to determine whether allegations are substantiated.</p> <p>Facility Investigator Interview – The Facility Investigators were asked what standard of evidence they use to substantiate a sexual abuse or sexual harassment investigation. They said they used the preponderance of evidence, which is more likely than not or more than 50% of the evidence shows either the incident did happen as reported or did not happen as reported (unfounded).</p> <p>Investigation File Review – Out of fifteen sexual abuse investigations reviewed, two investigations were substantiated. The outcome appeared to be based on a preponderance of evidence but was not clearly stated.</p> <p>Corrective Action Required: None of the investigation outcomes directly state preponderance of evidence or a similar evidence standard that supports the outcome. A clear statement of an evidentiary standard must be provided that supports the outcome. The facility must provide completed investigations for review during the corrective action period.</p>

	<p><b>Corrective Action Completed:</b> The facility provided nine investigations completed during the corrective action period for review. In all nine investigations, the investigation outcomes had a better description of the evidence relied upon and were based on the preponderance of the evidence standard.</p> <p>Based on the information from interviews, documents and policies reviewed, the facility meets the standard.</p>
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<b>115.73</b>	<b>Reporting to inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-2 states “Following an investigation into an inmate/ detainee's allegation that he/she suffered sexual abuse at the facility, the inmate/ detainee shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.” The policy reflects this provision of the standard.</p> <p>ODRC policy 79-ISA-02 page 9 requires the facility investigator to inform the inmate victim whether the investigation outcome has been determined to be substantiated, unsubstantiated or unfounded.</p> <p>Investigation Review – There were twelve sexual abuse investigations selected for review that were completed during the review period. The victim was notified of the outcome in writing in ten sexual abuse cases. The inmate victim was released prior to notification in one investigation and another was transferred to another facility prior to closing the investigation.</p> <p>Warden Interview – The Warden said all inmates are notified of the outcome for both sexual abuse and sexual harassment investigations by the Facility Investigator.</p> <p>Investigator Interview – The Investigators said they notify the alleged victims of the investigation outcome for sexual abuse and sexual harassment involving staff and inmate perpetrators. The Inmate/Detainee PREA Allegation Status Notification 14-2E form is signed and filed in the inmate record.</p> <p>Inmates that reported sexual abuse interview - Two inmates interviewed had reported sexual abuse while housed at NEOCC. One said he was notified of the outcome of the investigation on a form he signed. The other said he had just reported to staff and the investigation was still pending.</p> <p>b) CoreCivic policy 14-2 states “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/detainee.” ODRC policy 79-ISA-02 page 9</p>

requires the investigator to request investigation outcome information from the OSHP when they conduct a criminal investigation.

The facility reported on the Pre-Audit Questionnaire there were twenty-five investigations of sexual abuse by outside investigators and a notification of outcome was provided in all twenty-five.

Document Review – Twelve sexual abuse investigation files were selected for review. The sexual abuse allegations were forwarded to the Ohio State Highway Patrol or Youngstown Police Department for review and investigation. In all twelve, the OSHP or YPD notified NEOCC they would not be pursuing a criminal investigation. The inmate victims were notified of the status of criminal investigations and the outcome of the facility administrative investigation that were documented on the written notice of outcome.

c) CoreCivic policy 14-2 states “Following an inmate/detainee's allegation that an employee has committed sexual abuse against the inmate/detainee, the facility shall subsequently inform the inmate/detainee (unless the facility has determined that the allegation is unfounded) whenever: a. The employee is no longer posted within the inmate/detainee's unit as a result of the findings of the investigation; b. The employee is no longer employed at the facility as a result of the allegation; c. The facility learns that the employee has been indicted on a charge related to sexual abuse within the facility; or d. The facility learns that the employee has been convicted on a charge related to sexual abuse within the facility.” ODRC policy 79-ISA-02 page 9 has the same requirement and reflects this provision of the standard.

Investigation File Review – There were six allegations of staff sexual abuse reviewed. Two allegations of staff sexual abuse were referred to OSHP and two were referred to YPD during the review period. There were two allegations of sexual abuse that did not appear to be criminal violations and were not referred to outside law enforcement. Inmates/detainees were provided the notification of outcome in all six cases.

d) CoreCivic policy 14-2 states “Following an inmate/detainee's allegation that he/she has been sexually abused by another inmate/detainee, the facility shall subsequently inform the alleged victim whenever: a. The facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or b. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.” ODRC policy 79-ISA-02 page 9 has the same requirement and reflects this provision of the standard.

Investigation File Review – There were five inmate sexual abuse allegations reviewed. One allegation was referred to the YPD and four were referred to the OSHP. There was an administrative investigation completed in all five cases. The inmate/detainee victims signed the notice of outcome verifying they were notified in three cases. Notice of outcome was not provided to inmates in two investigations. The inmate victim was released prior to the investigation conclusion in one case, therefore he was not notified of the outcome. The other was at another ORDC facility and was

	<p>notified of the outcome for both OSHP's investigation and the NEOCC administrative investigation.</p> <p>e) CoreCivic policy 14-2 states "All inmate/detainee notifications or attempted notifications shall be documented on the 14-2E Inmate/Detainee Allegation Status Notification. The inmate/detainee shall sign the 14-2E, verifying that such notification has been received. The signed 14-2E shall be filed in the inmate/detainee's institutional file." ODRC policy 79-ISA-02 page 9 requires Northeast Ohio Correctional Center to use the form 14-2E to document notifications. The policies reflect this provision of the standard.</p> <p>Investigation File Review – A written notification of outcome was provided to inmate victims in ten of the twelve sexual abuse investigations.</p> <p>Based on the information from interviews, policies and documents reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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115.76	Disciplinary sanctions for staff
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-2 states "Employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic sexual abuse or sexual harassment policies." The policy reflects the provision of the standard.</p> <p>ODRC policy 79-ISA-01 states "In accordance with ODRC Policy 31-SEM-02, Standards of Employee Conduct, all employees shall be subject to disciplinary sanctions up to and including termination for violating ODRC sexual misconduct policies. Terminations for violations of ODRC sexual misconduct policy, or resignations by staff that would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and reported to any relevant licensing bodies."</p> <p>b) CoreCivic policy 14-2 states "Termination shall be the presumptive disciplinary sanction for employees who have engaged in sexual abuse." The policy reflects the provision of the standard.</p> <p>c) CoreCivic policy 14-2 states "Disciplinary sanctions for employee violations of CoreCivic policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the employee's disciplinary history, and the sanctions imposed for comparable offenses by other employees with similar histories." The policy reflects the provision of the standard.</p> <p>d) CoreCivic policy 14-2 states "All employee terminations for violations of</p>

	<p>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.” The policy reflects the provision of the standard.</p> <p>NEOCC reported on the Pre-Audit Questionnaire there was one substantiated incident of sexual abuse or sexual harassment involving staff that resulted in termination during the last 12 months. Documentation of the termination was provided. OSHP chose not to take the case for criminal investigation because there was no clear criminal violation. The facility reported one employee being disciplined short of termination during the last 12 months. After discussion with the PCM it was determined this was reported in error. One staff resigned prior to the investigation conclusion and was not subjected to a discipline process. This number should have been included in (b-2). The finding of the investigation was substantiated for staff sexual misconduct. The PCM reported that the YPD chose not to conduct a criminal investigation for this case because there was not a clear criminal violation.</p> <p>Investigation File Review – There were two investigations of staff sexual abuse that were substantiated during the review period. Both cases had an administrative investigation but not a criminal investigation. Both cases were referred to outside law enforcement agencies that decided not to pursue a criminal investigation. One staff was terminated and one staff resigned prior to termination. Neither had a professional license for their position, therefore there was no report to a licensing board.</p> <p>Based on the information from documents and policies reviewed, this auditor finds the facility meets the provisions of this standard.</p>
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115.77	Corrective action for contractors and volunteers
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-02 states “Any civilian, volunteer, or contractor who engages in sexual abuse shall be prohibited from contact with inmates/detainees and shall be reported to law enforcement agencies and to any relevant licensing body.” The policy reflects the provision of the standard.</p> <p>ODRC policy 79-ISA-01 states “In accordance with ODRC Policy 71-SOC-01, Recruitment, Training, and Supervision of Volunteers, and ODRC Policy 39-TRN-12, Contractor Orientation, any contractor, intern, or volunteer who engages in sexual misconduct is prohibited from contact with incarcerated individuals and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The facility shall take appropriate remedial measures and terminate the contract or volunteer arrangement with contractors, interns, or volunteers or shall demand that the offending employee of a contractor be excluded</p>

	<p>from providing services under the contract.” The policy reflects the provision of the standard.</p> <p>b) CoreCivic policy 14-02 states “Any other violation of CoreCivic sexual abuse or sexual harassment policies by a contractor will result in appropriate corrective action up to and including restricting contact with inmates/detainees and removal from the facility.” The policy reflects the provision of the standard.</p> <p>The ODRC Standards of Conduct for Contractors, Volunteers and Interns was provided for review. The standards of conduct prohibits contractors and volunteers from engaging in inappropriate relationships but does not specifically prohibit contractor and volunteer sexual harassment or sexual abuse of an inmate. It is recommended that this be added to the document to align it with ODRC policy 79-IS-01.</p> <p>Warden Interview – The Warden said contract staff’s access to the facility would be removed if they are the subject of an administrative investigation of sexual abuse. If the outcome was substantiated, the contract staff’s removal from the facility would become permanent. These cases would also be referred to OSHP for allegations involving inmates or YPD for allegations involving USMS detainees for criminal investigation and possible referral for prosecution.</p> <p>Investigation File Review – There were no investigations where contract staff were the subject of an allegation of sexual abuse or sexual harassment during the review period. NEOCC reported on the Pre-Audit Questionnaire zero contractors or volunteers reported to law enforcement for engaging in sexual abuse during the last 12 months.</p> <p>Based on the information from interviews and policies reviewed, this auditor finds the facility meets the provisions of this standard.</p>
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115.78	Disciplinary sanctions for inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-02 states “Inmates/detainees shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate/detainee engaged in inmate/detainee-on-inmate/detainee sexual abuse or following a criminal finding of guilt for inmate/detainee-on-inmate/detainee sexual abuse.” The policy reflects the provision of the standard.</p> <p>The review of all investigations completed during the review period found there were no substantiated cases of sexual abuse by an inmate. The facility reported two on the Pre-Audit Questionnaire in error. There were two inmates that were disciplined for consensual acts that were prohibited that then turned into an investigation of sexual</p>

abuse that was unsubstantiated.

b) CoreCivic policy 14-02 states "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate/detainee's disciplinary history, and the sanctions imposed for comparable offenses by other inmates/detainees with similar histories." The policy reflects the provision of the standard.

c) CoreCivic policy 14-02 states "The disciplinary process shall consider whether an inmate/detainee's mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed." The policy reflects the provision of the standard.

d) CoreCivic policy 14-02 states "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." The policy reflects the provision of the standard.

Mental Health Staff Interview – The mental health staff interviewed said therapy is offered to abusers similar to victims. If the inmate/detainee refuses they will not be prohibited from participating in other programs.

e) CoreCivic policy 14-02 states "An inmate/detainee may be disciplined for sexual conduct with an employee only upon a finding that the employee did not consent to such contact." The policy reflects the provision of the standard.

f) CoreCivic policy 14-02 states "Inmates/detainees who deliberately allege false claims of sexual abuse may be disciplined. For the purposes of a disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying even if the investigation does not establish evidence sufficient to substantiate the allegation." The policy reflects the provision of the standard.

g) CoreCivic policy 14-02 states "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." The policy reflects the provision of the standard.

Document Review – A conduct report and rules infraction board hearing was provided for an incident of inmate consensual sexual conduct.

Warden Interview – The Warden said inmates/detainees may be subject to disciplinary sanctions if there is a substantiated finding in an incident of sexual abuse involving an inmate perpetrator. The sanctions would be progressive based on the inmate's/detainee's discipline history and consider any mitigating circumstances, such as mental illness or disabilities. Inmates/detainees would only be disciplined for committing sexual offenses against staff that did not consent.

The facility meets the standard based on the information from interviews, documents and policies reviewed.

115.81	Medical and mental health screenings; history of sexual abuse
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) CoreCivic policy 14-02 states “Inmates/detainees identified during the intake screening as at risk for sexual victimization with a history of prior sexual victimization whether it occurred in an institutional setting or the community shall be offered a follow-up meeting with a medical or mental health practitioner or other qualified professional within 14 days of the intake screening.” The policy reflects the requirements of this provision of the standard.</p> <p>ODRC policy 79-ISA-04 states “If the assessment indicates the IP is at risk or has experienced prior sexual victimization, whether it occurred in an institution setting or in the community, staff shall offer a follow-up meeting with a mental health practitioner within fourteen (14) calendar days of the intake screening. All IPs shall be screened by behavioral health in accordance with ODRC Policy 67-MNH-02, Mental Health Screening and Mental Health Classification.”</p> <p>Risk Screening Staff – Two staff that complete the initial risk assessment and re-assessment screening said they offer mental health services to inmates/detainees that report being a prior victim of sexual abuse either in the community or in an institution. The offer is documented on a Referral to Holistic Services form that is emailed to mental health staff.</p> <p>Inmate Interview – Eight inmates/detainees that reported being a prior victim of sexual abuse on the initial screening were interviewed. All reported being offered mental health services or seeing mental health staff within two weeks of arrival.</p> <p>Document Review – Twelve inmates/detainees that reported being a prior victim at the risk assessment were selected for document review. The facility provided documentation of mental health services being provided within 14 days of arrival for seven of the twelve, but most were not specific to reporting being a prior victim of sexual abuse. For ODRC inmates, the facility can provide the risk assessment questions screen to show that documents the offer for mental health services to question number 1 or 2. For USMS detainees, the facility must show a documented referral to mental health for being a prior victim of sexual abuse.</p> <p>b) CoreCivic policy 14-02 states “Inmates/detainees, excluding jail inmates/detainees, identified during the intake screening as high risk with a history of sexually assaultive behavior, whether it occurred in an institutional setting or in the community, shall be offered a follow-up meeting with a mental health practitioner or other qualified professional within 14 days of the intake screening.” The policy reflects the requirements of this provision of the standard.</p> <p>ODRC policy 79-ISA-04 states “If the assessment indicates that the IP is at risk or has previously perpetrated sexual abuse, whether it occurred in an institution setting or in the community, staff shall offer a follow-up meeting with a mental health practitioner</p>



within fourteen (14) calendar days of the intake screening. All IPs shall be screened by behavioral health in accordance with ODRC Policy 67-MNH-02, Mental Health Screening and Mental Health Classification.”

Risk Screening Staff Interview – Two staff that conduct risk screenings said they offer mental health services for prior perpetrators of sexual abuse within 14 days. They said this includes inmates/detainees with prior convictions for sex offenses.

Mental Health Staff Interview – Mental Health staff said the inmates that are prior perpetrators of sexual abuse are offered mental health services within 14 days of arrival.

Document Review – Thirty-nine Risk Screenings were reviewed for randomly selected inmates/detainees that arrived in the last 12 months. Four inmates/detainees were documented as having a prior conviction for sex offenses against a child or adult.

The PREA screening questions form for the ODRC risk assessment documents prior conviction for sex offenses in question #19 but did not prompt staff to offer the inmate mental health services. The form did prompt staff to offer mental health services to inmates that were documented as a prior perpetrator of sexual abuse in an institution on question #17. To meet this provision of the standard, the facility must document an offer for mental health services to inmates that have prior convictions for sex offenses against a child or adult under questions #19. The facility did provide mental health notes for each inmate, but they were not specific to being a prior perpetrator of sexual abuse.

d) CoreCivic policy 14-02 and ODRC 79-ISA-02 states “Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.” The policy reflects the requirements of this provision of the standard.

Tour Observation – medical files were observed in an office that was in an area restricted to inmates/detainees. The files were in locked cabinets and a locked office.

Risk Screening Staff Interviews – Two staff that completed risk assessments said the information obtained during the screening is confidential and limited access to authorized staff. For ODRC inmates, the assessment information is entered into an electronic system. For USMS detainees, the risk assessment is completed on a paper form that is stored in the detainee files that are locked in an office in locked cabinets.

e) CoreCivic policy 14-02 states “Medical and mental health practitioners shall obtain informed consent from inmates/detainees before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate/detainee is under the age of 18.” The policy reflects the requirements of this provision of the standard.

ODRC policy 79-ISA-04 states “Medical and mental health practitioners shall obtain informed consent from IPs before reporting information to law enforcement about prior sexual victimization that occurred in the community. If an IP wishes to report the information, the Informed Consent (DRC1169) shall be completed and forwarded to the institution investigator. The institution investigator shall contact the Ohio State Highway Patrol (OSHP) and provide them with the information. The institution investigator shall document the contact with the OSHP. The only exception where the Informed Consent (DRC1169) is not necessary is if the alleged victim is under the age of eighteen (18) or considered a vulnerable adult as defined by this policy, the institution shall report the allegation on an Incident Report (DRC1000) and send it to the institutional investigator who will then report the allegation to the OSHP.”

**Mental Health Staff Interview** – The two mental health staff interviewed said if an inmate reported prior sexual abuse that occurred outside of a correctional institution, they would have to be given consent to share that information with facility investigators.

**Medical Staff Interview** – The medical staff interviewed said if an inmate reported prior sexual abuse that occurred outside of a correctional institution, she would have to be given consent to share that information with facility investigators.

**Corrective Action Required:** The PREA Screening Questions form documents prior conviction for sex offenses in question #19 but did not prompt staff to offer the inmate mental health services to the inmate. To meet this provision of the standard, the facility must document an offer for mental health services to inmates that have prior convictions for sex offenses against a child or adult under questions #19. ODRC will be changing the screening questions to prompt staff to offer MH to inmates that have prior sex offense convictions. After the change, the facility will provide completed screening questions for ODRC inmates with prior sex offense convictions and that report being a prior victim of sexual abuse. Documentation of referral for either prior victim of sexual abuse or prior perpetrator of sexual abuse for USMS detainees.

**Corrective Action Completed:** During the corrective action period, there were one hundred fifty-eight initial risk assessments reviewed during the corrective action period. Through that review, nine prior victims and thirteen prior perpetrators were identified that required an offer or referral to mental health within 14 days.

Documentation was provided of an offer for mental health services or an acceptance of the offer and referral to mental health. Mental Health provided notes of the meeting for those that accepted the offer. The offers were documented for ODRC inmates on the ODRC risk assessment system. Screen shots of the offer were provided. ODRC made a change to the system that required staff to document the offer for prior perpetrators before they could complete the assessment. USMS detainees had a documented referral on a CoreCivic form 13-61B.

Based on the information from interviews, policies and documents reviewed, the facility now meets the provisions of the standard.

115.82	Access to emergency medical and mental health services
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) CoreCivic policy 13-79 states “The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates/detainees who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.”</p> <p>ODRC Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse B-11 requires all inmates who report sexual conduct and/or recent sexual abuse to be escorted to health services as soon as possible after the reported conduct or recent sexual abuse. If evidentiary or medically appropriate, the patient will be transported to the emergency department for examination, treatment, and counseling. The policy requires the inmate victim to be referred to mental health.</p> <p>Medical Staff interview – The Medical Staff said a victim of sexual abuse or sexual assault would be evaluated for emergent injuries, stabilized and sent the local hospital for emergency medical services or forensic examination based on the time frame.</p> <p>Mental Health Staff Interview – staff said they would provide immediate crisis intervention services and ensure the inmate victim is stable.</p> <p>Inmates that Reported Sexual Abuse – Two inmates that reported sexual abuse during the review period said they were seen by medical and offered mental health services immediately after reporting the sexual abuse incident.</p> <p>b) Staff Interviews – All randomly selected staff were asked about first responder duties. All staff said the facility has 24-hour nursing and would not have a situation where medical staff are not on duty. All staff said they would protect the victim, notify the shift supervisor and wait for other custody staff and medical staff to respond. Some said they could take the inmate to medical if needed.</p> <p>c) CoreCivic policy 13-79 states “Inmate/detainee 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 professionally accepted standards of care, where medically appropriate.”</p> <p>ODRC Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse B-11 requires inmate victims to receive STI testing and treatment at the facility if it is not provided at the hospital or if the inmate victim does not go to the hospital.</p> <p>Medical Staff Interview – Medical staff said victims of sexual assault/sexual abuse can be offered STI testing and treatment at the emergency room or at the facility if there is not forensic examination due to late time frame.</p> <p>d) CoreCivic policy 13-79 states “Treatment services shall be provided to all</p>

	<p>victims of sexual abuse while incarcerated without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>Inmates that reported Sexual Abuse – Two inmates that reported sexual abuse said they were offered mental health and medical services. The offer wasn’t contingent upon their cooperation. Neither inmate reported being charged for medical or mental health services.</p> <p>The facility meets the provisions of this standard based on information from interviews, policy and document reviews.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) CoreCivic policy 13-79 states “The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates/detainees who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.” The policy reflects the requirements of this provision of the standard.</p> <p>ODRC 79-ISA-02 requires medical staff to follow Protocol B-11with follow-up procedures for STI testing, counseling, prophylactic treatment, follow-up services, and mental health referrals. Mental health staff shall complete further screenings or assessments consistent with ODRC policy 67-MNH-02.</p> <p>b) CoreCivic policy 13-79 states “The evaluation and treatment of such victims shall 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.” The policy reflects the requirements of this provision of the standard.</p> <p>Medical Staff Interview – The medical staff interviewed said that an inmate/detainee victim would be offered a mental health referral, medical monitor and treatment of wounds or injuries and access to medications for STI.</p> <p>Mental Health Staff Interview – The two mental health staff interviewed said mental health follow up services and treatment would be offered and provided to the inmate/ detainee victim of sexual abuse. Referral could be made to outside services upon release.</p> <p>c) CoreCivic policy 13-79 states “The facility shall provide such victims with medical and mental health services consistent with the community level of care.” The policy reflects the requirements of this provision of the standard.</p>

	<p>Medical and Mental Health Staff Interview – All medical and mental health staff said the level of care they can provide is consistent with the community level of care.</p> <p>Document Review – medical records were provided for review with reports of sexual abuse investigations during the review period. The level of care appeared to be consistent with the community level of care.</p> <p>f) Medical Staff Interview – The medical staff interviewed said that testing for STI’s would be completed at a forensic examination. If the inmate/detainee victim refused the forensic exam or the abuse was out of time frame for a forensic exam, the facility medical staff could offer and conduct a test for STI’s at the facility.</p> <p>g) CoreCivic policy 13-79 states “Treatment services shall be provided to all victims of sexual abuse while incarcerated without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.” The policy reflects the requirements of this provision of the standard.</p> <p>Inmates that reported Sexual Abuse – Two inmates that reported sexual abuse that were interviewed said they were offered mental health and medical services. The offer wasn’t contingent upon their cooperation. They did not report being charged for the services.</p> <p>h) Mental Health Interview – Two Mental Health Staff interviewed said if there is a substantiated incident of inmate/detainee sexual abuse, the inmate/detainee perpetrator is referred to mental health for services. Both said they can offer therapy to identify triggers for the behavior.</p> <p>Based on the information from interviews, policies and documents reviewed, the facility meets the provisions of the standard.</p>
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115.86	Sexual abuse incident reviews
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-2 states “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.”</p> <p>ODRC policy 79-ISA_03 Sexual Abuse Review Team requires the facility to have a review team that consists of the OCM, Deputy Warden, Investigator, Staff Victim Advocate, and other relevant staff. Reviews are required to be completed within 30 days of the conclusion of the investigation. The SART considers the five topics of review in the standard and makes recommendations for improvement or corrective</p>

action. The review is documented in the PREA Incident Reporting System.

b) CoreCivic policy 14-2 states “Sexual Abuse Incident Reviews shall occur within 30 days of the conclusion of the investigation.”

c) CoreCivic policy 14-2 states “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.”

d) CoreCivic policy 14-2 states “All findings and recommendations for improvement will be documented on the 14-2F Sexual Abuse or Assault Incident Review Report or required equivalent contracting agency form. Completed 14-2F forms will be forwarded to the Warden/Facility Administrator, the PREA Compliance Manager, and the FSC PREA Compliance Coordinator/designee.”

e) CoreCivic policy 14-2 states “The facility shall implement the recommendations for improvement or shall document reasons for not doing so.”

Document Review – Fifteen completed investigations were selected for review from a list of twenty-nine. There were twelve completed sexual abuse investigations and three sexual harassment investigations. Documentation for thirteen completed incident reviews were provided for review. Eleven of the twelve sexual abuse investigations received an incident review. Two were completed on an out-of-date form that did not meet all provisions of the standard due to being completed only by the investigator and did not cover recommended corrective actions. These were completed in April of 2024. Nine sexual abuse incident reviews were completed on the current form that covered all provisions of the standard, documented all members of the review team and recommended corrective actions if any to the Warden. One sexual abuse investigation that concluded in April 2024 did not have a completed sexual abuse incident review. Two sexual harassment investigations had a completed incident review with one being an unfounded outcome. The review found three out of the twelve did not meet the standard. The PCM said the problem with sexual abuse incident reviews being completed on an out-of-date form or not at all was discovered and corrected. As a result, the facility was asked to provide additional incident reviews completed after April 2024 to determine the current practice. Five additional completed incident reviews were reviewed. All were found to be on the current form that follows the provisions of the standard and within 30 days of the investigation conclusion. Four of the five were completed in October and November 2024. An additional sample of completed incident reviews will be reviewed for a compliant practice over a longer period of time.

Warden Interview – The Warden said the SART reviews each PREA investigation. The SART consists of the Assistant Wardens, Chief of Custody, Assistant Chief of Custody, Facility Investigator, medical staff, mental health staff, and the PCM. The team reviews all completed investigations to determine if there was something that could have been prevented, if the response was appropriate, were there blind spots, if staff were conducting proper rounds, and if the inmate/detainee was classified appropriately. The team makes recommendations for correction to him for review and approval.

	<p>PCM Interview- The AW that is a member of the incident review team said the team consists of the PREA Case Manager, Investigator, medical staff, mental health staff and himself. The team reviews all evidence for the case. This may include the review of video in addition to the review of the investigation report and accompanying documents. They may ask staff that were involved in the response to attend the review. They also look at the mental health referral, offer or use of victim advocate and the retaliation monitoring that may be ongoing.</p> <p>Corrective Action Required: The facility had incident reviews that did not meet the standard or were not completed during the review period. Another sample of completed incident reviews must be submitted to determine if the practice has been compliant over a longer period of time.</p> <p><b>Corrective Action Completed:</b> The facility provided ten sexual abuse incident reviews (SART reviews) completed during December, January and February. The reviews were completed within thirty days of the investigation conclusion and documented on the current form that covers all provisions of this standard. This demonstrates that the facility has been continuing to meet the standard since April of 2024.</p> <p>Based on the information from interviews, documents and policies reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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115.87	Data collection
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a-c) ODRC policy 79-ISA-01 page 11 states “The institution investigators shall ensure all fields in the PREA Incident Reporting System as provided by the agency PREA coordinator are accurately completed. This data shall be aggregated at least annually.”</p> <p>CoreCivic policy 14-2 page 29 states “CoreCivic shall collect accurate and uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.” “The incident-based sexual abuse data shall be aggregated annually and shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice.” The PREA Incident Packet Instructions were provided for review. These are the instructions for staff to follow for entering the data for an incident of sexual abuse or sexual harassment incidents. The instructions provide a set of definitions that are the same as the PREA standards definitions. The same data is entered into the that is used to complete a Survey of Sexual Victimization Incident Report form. The policies reflect the requirements of the provisions of the standard.</p>

	<p>PREA Coordinator Interview – The Core Civic PREA Coordinator said there has not been a request from the DOJ for the SSV Summary report for Northeast Ohio Correctional Center in the last five years. She said sexual abuse and sexual harassment reporting data is collected each year and used in the CoreCivic Annual PREA Report and can be used for the DOJ SSV report if requested.</p> <p>Document Review – The CoreCivic Annual PREA Reports for 2020, 2021 and 2022 were provided for review. The annual reports compared the current year’s sexual abuse and sexual harassment reporting data to previous years. The data for each incident of sexual abuse and sexual harassment is entered in the ODRC PREA Incident Report Application. Incident reports were provided in the investigation files. The information reported is the same as the incident forms for the DOJ SSV report.</p> <p>d) CoreCivic policy 14-2 page 29 states “CoreCivic shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.”</p> <p>Based on the information from the policies and documents reviewed, this auditor finds the facility meets the provisions of the standard.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>a) CoreCivic policy 14-2 page 29 states “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.”</p> <p>Document Review – The CoreCivic Annual PREA Reports for 2020, 2021 and 2022 were provided for review. The reports include information about identified problem areas and corrective actions.</p> <p>Agency Head Interview – The CoreCivic Vice President said PREA data is reviewed on a regular basis and compiled in an annual report. He reviews and approves the annual report.</p> <p>PREA Coordinator Interview -The PREA Coordinator said she gathers PREA data from the facilities and combines it in an annual CoreCivic PREA Report that is posted on the CoreCivic website.</p> <p>PREA Compliance Manager Interview - The PREA Compliance Manager at NEOCC said the PREA incident data is entered into the Incident Reporting Database. All incident reviews are sent to the CoreCivic PREA Coordinator for review. Information for the</p>



	<p>PREA annual report can be gathered from the IRD and incident reviews. The facility annual report is sent to the CoreCivic PREA Coordinator. The auditor found the annual reports on the CoreCivic PREA web page.</p> <p>b) CoreCivic policy 14-2 page 29 states “CoreCivic will prepare an annual report of its findings and corrective actions for each facility, as well as the agency. Such report shall include a comparison of the current year’s aggregated data and corrective actions with those from prior years and shall provide an assessment of the agency’s progress in addressing sexual abuse.”</p> <p>Document Review – The CoreCivic Annual PREA Reports for 2020, 2021 and 2022 were provided for review. The annual reports compared the current year’s data to previous years.</p> <p>c) CoreCivic policy 14-2 states “The CoreCivic Annual report shall be approved by the company Chief Corrections Officer and made available to the public through the CoreCivic website.”</p> <p>Agency Head Interview – The CoreCivic Vice President said PREA data is reviewed on a regular basis and compiled in an annual report. He reviews and approves the annual report.</p> <p>Document Review – The CoreCivic Annual PREA Reports for 2020, 2021 and 2022 were provided for review. The reports were signed by the Vice President.</p> <p>d) CoreCivic policy 14-2 page 29 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.”</p> <p>PREA Coordinator Interview – The PREA Coordinator said the annual report does not include the identity or personal and medical information for inmates or staff.</p> <p>Based on the interviews, policies and documents reviewed, this auditor finds the facility meets all provisions of this standard.</p>
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115.89	Data storage, publication, and destruction
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>a) CoreCivic policy 14-2 page 30 states “All case records associated 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.” The policy reflects the provision requirements.</p>

	<p>PREA Coordinator Interview – The PREA Coordinator said files and information from investigations are retained in the IRD Incident Report Database. The IRD is a secure database with limited access to authorized staff.</p> <p>Tour Observations – During the tour, the hardcopy investigation files were observed in a locked filing cabinet in a locked office of the PCM.</p> <p>b) CoreCivic policy 14-2 page 29 states “The CoreCivic Annual report shall be approved by the company Chief Corrections Officer and made available to the public through the CoreCivic website.”</p> <p>Document Review – The CoreCivic Annual PREA Report for 2020, 2021 and 2022 was provided for review. These reports were found on the CoreCivic website at <a href="https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea">https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea</a>.</p> <p>c) CoreCivic policy 14-2 states “Before making aggregated sexual abuse data publicly available, CoreCivic shall remove all personal identifiers.”</p> <p>Document Review – The CoreCivic Annual PREA Report for 2020, 2021 and 2022 was provided for review. No personal identifiers were found on the reports.</p> <p>d) CoreCivic policy 14-2 states “The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.”</p> <p>A review of the CoreCivic webpage <a href="https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea">https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea</a> found PREA Annual Reports going back ten years to 2013.</p> <p>Based on the Interviews, policies and documents reviewed, this auditor finds the facility meets all provisions of this standard.</p>
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115.401	Frequency and scope of audits
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>a) A review of the CoreCivic webpage for Northeast Ohio Correctional Facility at <a href="https://www.corecivic.com/facilities/northeast-ohio-correctional-center">https://www.corecivic.com/facilities/northeast-ohio-correctional-center</a> found a PREA audit report posted for audits in 2019 and 2022.</p> <p>b) CoreCivic has been receiving audits in its facilities every year since 2013. The PREA Coordinator said CoreCivic attempts to have one-third of its facilities audited each year, however the clients may make changes to their audit schedule that prevents CoreCivic from meeting that goal. A state DOC could move the CoreCivic facility audit to correct the state’s one-third goal. This is out of CoreCivic’s control.</p>

	<p>h) This auditor was allowed access to all areas of the facility during the facility tour.</p> <p>i) This auditor was provided with all documents requested, either electronic or hard copy.</p> <p>m) This auditor was allowed to interview inmates in a private area during the onsite audit.</p> <p>n) Inmates were allowed to send confidential correspondence to this auditor. One piece of correspondence was received. The letter was unopened and uncensored.</p>
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	A review of the CoreCivic webpage for Northeast Ohio Correctional Facility at <a href="https://www.corecivic.com/facilities/northeast-ohio-correctional-center">https://www.corecivic.com/facilities/northeast-ohio-correctional-center</a> found a PREA audit report posted for audits in 2019 and 2022. This auditor will ask the CoreCivic PREA Coordinator to have the final audit report posted on the website.

**Appendix: Provision Findings****115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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**115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
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**115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
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Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
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**115.12 (a) Contracting with other entities for the confinement of inmates**

If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
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**115.12 (b) Contracting with other entities for the confinement of inmates**

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na
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	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

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

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

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



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

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

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

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

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

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

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

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	



	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<b>115.33 (d)</b>	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

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

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

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

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



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

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

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

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	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.)	na
	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.)	na
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	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.)	na
	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.)	na
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

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

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

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

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



	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

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

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

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

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

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

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	no
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

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



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

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

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

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

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

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	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.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403</b>	<b>Audit contents and findings</b>	

(f)			
	<table><tr><td data-bbox="316 174 1289 568"><p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p></td><td data-bbox="1289 174 1490 568">yes</td></tr></table>	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes
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