PREA Facility Audit Report: Final

Name of Facility: Brunswick County Detention Center
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 09/01/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☑
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☑
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☑
Auditor Full Name as Signed: Joy Catrett-Bell	**Date of Signature:** 09/01/2026

AUDITOR INFORMATION	
Auditor name:	Catrett-Bell, Joy
Email:	jcbell1111@gmail.com
Start Date of On-Site Audit:	07/28/2026
End Date of On-Site Audit:	07/30/2026

FACILITY INFORMATION	
Facility name:	Brunswick County Detention Center
Facility physical address:	70 Stamp Act Drive Northeast, Bolivia, North Carolina - 28422
Facility mailing address:	P.O. BOX 9, BOLIVIA, North Carolina - 28422

Primary Contact

Name:	Erica Patelos
Email Address:	erica.patelos@brunswickncsheriff.gov
Telephone Number:	910-253-2510

Warden/Jail Administrator/Sheriff/Director	
Name:	MICHAEL FOWLER
Email Address:	MICHAEL.FOWLER@BRUNSWICKNCSHERIFF.GOV
Telephone Number:	9102532885

Facility PREA Compliance Manager	
Name:	David Frye
Email Address:	david.frye@brunswickncsheriff.gov
Telephone Number:	910.253.2755
Name:	James Williams
Email Address:	james.williams@brunswickncsheriff.gov
Telephone Number:	910.253.2762

Facility Health Service Administrator On-site	
Name:	EMILY BENTON
Email Address:	EMBENTON@WELLPATH.US
Telephone Number:	910-253-2728

Facility Characteristics	
Designed facility capacity:	440
Current population of facility:	297
Average daily population for the past 12 months:	262

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys
Age range of population:	16-83
Facility security levels/inmate custody levels:	MINIMUM, MEDIUM, MAXIMUM
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	300
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	2
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	60

AGENCY INFORMATION	
Name of agency:	Brunswick County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	70 Stamp Act Drive Northeast, Bolivia, North Carolina - 28422
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Erica Patelos	**Email Address:**	erica.patelos@brunswickncsheriff.gov

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-07-28
2. End date of the onsite portion of the audit:	2026-07-30

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Safe Alliance

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1791
15. Average daily population for the past 12 months:	2400
16. Number of inmate/resident/detainee housing units:	38
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	( ) Yes (●) No ( ) Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
23. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	2400
25. 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:	2
26. 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:	2
27. 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:	2
28. 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:	2
29. 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:	6
30. 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:	8

31. 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:	2
32. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
33. 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:	3
34. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. 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):	The population of inmates meeting the criteria in certain categories was not present.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. 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:	673
37. 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:	208

38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	406
39. 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:	Random staff were selected from all shift assignments. There were no barriers in completing interviews.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	40
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☑ Age ☑ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☑ Length of time in the facility ☑ Housing assignment ☑ Gender ☐ Other ☐ None
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The Auditor reviewed the roster and selected inmates based upon the above factors.
43. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	◉ Yes ○ No

44. 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):	The Auditor reviewed the roster and selected inmates based upon the above factors.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	36
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".	
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	3
48. 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:	2
49. 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:	6

50. 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:	3
51. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	9
52. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	5
53. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.

54. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
55. 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:	9
56. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The Auditor began conducting inmate interviews on the first day of the on-site audit. Based on the population at that time, the PREA Auditor Handbook required a minimum of 40 interviews (20 random and 20 targeted). A total of 41 interviews were completed using established DOJ protocols. All sessions were held in a secure area to ensure privacy. While the process allowed for selecting an alternate inmate from the same housing area in the event of a refusal, there were no instances of selected inmates refusing to be interviewed.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☑ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☑ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Random staff were selected from all shift assignments. There were no barriers in completing interviews.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	21
63. Were you able to interview the Agency Head?	○ Yes ◉ No
a. Explain why it was not possible to interview the Agency Head:	This is a single facility system and does not utilize the hierarchy system that includes an agency head position.

64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	(●) Yes ( ) No
65. Were you able to interview the PREA Coordinator?	(●) Yes ( ) No
66. Were you able to interview the PREA Compliance Manager?	(●) Yes ( ) No ( ) NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. 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

	☑ Other
If "Other," provide additional specialized staff roles interviewed:	Training Staff Mailroom
68. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☑ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☑ Medical/dental ☑ Food service ☐ Maintenance/construction ☐ Other

70. Provide any additional comments regarding selecting or interviewing specialized staff.	Random staff were selected and there were no barriers in completing interviews.

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.

71. Did you have access to all areas of the facility?	(●) Yes ( ) No
Was the site review an active, inquiring process that included the following:	
72. 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
73. 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
74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	(●) Yes ( ) No

75. Informal conversations with staff during the site review (encouraged, not required)?	(●) Yes ( ) No
76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	The Auditor was provided with full, unimpeded access to all areas of the facility. During the physical plant review, the Auditor observed the facility layout, staff supervision of inmates, security rounds, and staff-inmate interactions. The tour included a review of shower and toilet areas, search procedures, and the availability of medical and mental health services. Additionally, the Auditor verified the accessibility of PREA information in and adjacent to housing units and observed staff communication within those units. Finally, the Auditor examined the video monitoring system, including camera placement and observation monitors throughout the facility.

Documentation Sampling

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

77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	(●) Yes ( ) No

78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	During the recent review, the Auditor examined employee and inmate files along with documents provided via the PAQ, such as logbooks and institutional forms. The audit focused on compliance with hiring, promotion, and background check procedures for both officers and contract staff. To verify training compliance, the Auditor cross-referenced annual PREA training rosters with staff files. We also discussed the facilitation process for relaying mandated PREA information to new employees and the protocol for annual refresher training. Regarding inmate documentation, the Auditor reviewed intake procedures, initial screenings, housing assignments, and PREA education verification.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	00
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	4	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	4	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.

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	The facility reported there had been no offenses committed to file.

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	4
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	4
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. 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)
100. 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)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The facility reported there had been no offenses committed to file.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

102. 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	
103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	(●) Yes ( ) No
a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:	1
AUDITING ARRANGEMENTS AND COMPENSATION	
108. Who paid you to conduct this audit?	(●) The audited facility or its parent agency ( ) My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ( ) A third-party auditing entity (e.g., accreditation body, consulting firm) ( ) Other

Standards
Auditor Overall Determination Definitions
• Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.11 Zero Tolerance of Sexual Abuse and Sexual Harassment Policy, Materials, Interviews and Other Evidence Reviewed: Employee PREA Training Curriculum Inmate Handbook Interviews PAQ BCDC Policy JOM 466 Sexual Misconduct BCDC General Order Rules of Conduct Organizational Chart

BCDC Policy JOM 466 outlines the facility's approach to implementing practices covered by the facility PREA directives. BCDC PREA directives mandate a zero-tolerance policy on all forms of sexual abuse and harassment and provide definitions of prohibited behaviors. The PREA directives serve to unify the facility's approach to implementing the PREA standards which are covered by a network of policies relative to segregation, employee training, inmate placement, and health care. The PREA Coordinator oversees and coordinates the efforts of BCDC to comply with PREA standards through development and implementation of policy, staff training, and inmate education. The PC coordinates the collection of data and is responsible for the preparation of each three-year cycle audit.

In response to the standards, the Brunswick County Detention Center has assigned a PREA Manager with sufficient time and authority to coordinate the facility's efforts to comply with the standards. The PREA Manager ensures the facility works to achieve compliance of all standards, and the PC is responsible for monitoring and aiding in areas that include staff training, education, reporting, documentation, and investigation of PREA-related allegations. The PC may serve as a member of the incident review team and serve as contact for issues related to PREA requirements.

Conclusion: Based on the Auditor's review of related policy, memos, organizational charts, and staff interviews, the Auditor determined that BCDC meets the mandate for this standard.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.12 Contracting with Other Entities for the Confinement of Inmates Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466-Inmate Sexual Abuse/Sexual Harassment Prevention PAQ MOU's Interviews The PREA coordinator is responsible for reviewing compliance with each potential contracting institution. The PC is responsible for monthly PREA reports, annual reports, investigating all allegations of sexual abuse or sexual harassment, and conducting yearly review of any facility used for contracting inmate housing. BCDC does not contract for housing of their inmates in other dedicated correctional

	facilities. Conclusion: Based on staff interviews and document review, BCDC meets this standard.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.13 Supervision and Monitoring Policy, Materials, Interviews and Other Evidence Reviewed: Pre-Audit Questionnaire Policy JOM 466 Sexual Misconduct PREA Supervisory Rounds PREA Officer Rounds Shift Logs Unannounced Rounds Annual Staffing Plan Review Shift Assignment Roster BCDC policy JOM 466 states that the facility will complete a staffing plan at a minimum, once a year. BCDC directives state that their facility will complete a staffing plan yearly and submit the report for review and approval. The policy states that the Staffing Plan review will be documented on the annual review and maintained by the facility with a copy forwarded to the PC. In circumstances when the staffing plan has deviations, the facility documents the justifications. The most common reasons for deviations are short term disability, emergency medical leave, inmate medical transportation, In-service training, annual leave, and retirements. The audit included an examination of video monitoring systems, interviews, staffing plan, and staff rosters. The Auditor observed staff conducting daily rounds to ensure visibility, safety of inmates, and the opportunity for inmate access to supervisory staff. When conducting rounds, staff identify unusual activity, safety concerns, security improvements, and possible PREA violations. Supervisory staff conduct PREA

	rounds and staff are prohibited from alerting other staff members when the PREA rounds are being conducted. The facility staffing plan was developed with minimum operational staffing levels in mind and the Auditor reviewed a staff roster to ensure adequate staff for critical and non-critical posts. The security staff post assignments are managed by correctional supervisors. Management staff support all efforts to provide adequate staffing levels and make necessary adjustments to comply with the facility's staffing plan requirements. The facility utilizes overtime and draft procedures to fill any vacated critical post during a shift. Daily security staff rosters requested and reviewed by the Auditor reflected changes made and the reason for each change. Review of post assignment rosters verified correctional staff were able to maintain compliance with directives. The staffing plan appears satisfactory in the facility’s efforts to provide protection against sexual abuse and harassment of inmates. Staffing totals are considered to ensure safety of inmates with medical or mental health needs, disabled, or LEP. The Auditor observed cameras throughout the facility and observed interactions between staff and inmates during the tour. Interviews with the Jailer verified that security protocols are a primary focus when reviewing their respective staffing plan. Conclusion: Based on the review of the Staffing Plan, quarterly post assignment, daily post assignment rosters, interviews, and review of unit logs, the Auditor determined the facility meets the mandate for the standard.

115.14	**Youthful inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14 Youthful Inmates Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention(Sexual Misconduct) Policy D-351- Inmate Classification Daily Population Report Jail Diagram Memo Interviews PAQ

	The Auditor reviewed BCDC directives, which state that youthful inmates will not be placed in a housing unit in which the inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom, shower area, or sleeping quarters. BCDC Policy D-351 states that the Brunswick County Detention Center will provide the separate management of inmates based on gender as well as other classifications including civilly committed inmates, witnesses, community custody inmates, inmates with special needs, inmates requiring disciplinary detention, administrative segregation/protective custody, and youthful inmates. The Auditors interviewed staff who stated they had no knowledge of youthful offenders being housed at the facility during this audit cycle. The PAQ, documentation review, and interviews with staff confirm there have been no youthful inmates housed at the facility. Conclusion: Interviews with the Jailer, PREA manager, and PREA coordinator confirmed that BCDC does not house youthful offenders and is therefore compliant with provisions and meets the standard.

115.15	**Limits to cross-gender viewing and searches**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.15 Limits to Cross-Gender Viewing and Searches Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Sexual Misconduct Staff Training and Development Staff Training Records Cross Gender Announcement Interviews OMS System(Offender Management System) Memo Policy D-257- Search During Intake Policy 463- Body Cavity Searches Standard 115.15 mandates that Cross-gender strip or cross-gender body cavity

	searches are prohibited, except in emergency situations or when performed and documented by a medical practitioner. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. Interviews with staff confirmed that they were aware of the restrictions of visual body cavity or strip searches of the inmates of the opposite sex except in exigent circumstances. Staff interviews confirmed that officers have been trained to conduct cross-gender pat searches and received required training. The PAQ listed zero cross-gender strips or cross-gender visual body cavity searches of inmates in the previous 12 months. Interviews with inmates concluded they have not been subjected to any occurrences in which they were exposed to cross-gender viewing by staff during a strip search or visual search. Directives state that a licensed physician, physician's assistant, or nurse practitioner are the only one authorized to conduct a body cavity search. Medical personnel who perform a body cavity search need not be of the same sex as the inmate being searched and other persons who are present during the search will be of the same sex as the inmate. Routine strip searches or visual body cavity searches occur in authorized areas and searches based on reasonable suspicion require the Jailer's authorization. Staff interviewed stated that the opposite gender staff must announce themselves when entering a housing unit and the Auditor observed the practice during the facility tour. Inmates acknowledged that when the opposite gender staff entered the housing units, the opposite gender announcement was made by assigned housing unit officer or by staff entering housing unit. The PC confirmed procedures were developed that allow inmates to shower, change clothes, and use the toilet without being viewed by staff of the opposite gender. The Auditor toured the facility and was granted access to all inmate housing units and other support areas. The Auditor observed shower and restroom areas in the facility and confirmed that inmates could shower and use the restroom without staff of the opposite gender viewing them without clothing. Female correctional officers are allowed to pat-search male inmates and male officers are only allowed to pat-search male inmates and not female inmates. Staff of the same gender perform strip searches exclusively. The facility provides training on searches, restraint application, and body scanning devices. Training topics and definitions were found to be consistent with the standards and facility policies. The PAQ noted that staff have received PREA training and search training. Staff interviewed stated they received PREA training during pre-service training and yearly. The Auditor was provided training rosters identifying security staff's completion of the required PREA training facilitated by training staff in-house and electronically. Conclusion: Based on the review of policies, documents, training rosters, and interviews, the Auditor determined the facility meets the provisions of this standard.

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

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.16 Inmates with Disabilities and Inmates who are Limited English Proficient Policy, Materials, Interviews and Other Evidence Reviewed: Interviews Policy JOM 466 Sexual Misconduct Inmate Tablets Kiosk Google Assist Language Service Inmate Orientation Handbook PAQ BCDC Policy JOM 466A- Inmate PREA Education Limited English-Speaking Inmates English/Spanish Inmate Brochure Zero Tolerance Posters Standard 115.16 states that inmates with disabilities and inmates who have limited English will not be discriminated against, and the facility will provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act. BCDC Policy JOM 466A, Inmate PREA Education, states that the Brunswick County Detention Center will provide inmate education in formats accessible to all inmates including inmates who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as inmates who have limited reading skills. The directive states the facility will take steps to ensure that inmates with disabilities, including those who are deaf, blind or have intellectual limitations, will have an equal opportunity to participate and benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and harassment. BCDC directives state that the facility will provide PREA education in formats understandable by all the inmate population and if required, the facility will aid inmates using interpretation apps. Inmate interpreters will only be utilized in limited circumstances where an extended delay in obtaining a specialized interpreter service could compromise an inmate's safety. BCDC directives are written in accordance with Standard 115.16 and states that the PREA manager is responsible for development and distribution of educational

	materials. The materials reference education of inmates regarding the facility's zero tolerance pertaining to sexual abuse and sexual harassment, how to report threats, or retaliation for reporting or participating in an investigation. Educational material information on treatment, advocacy, and counseling services was posted in accessible areas and afforded to the inmates through various avenues. The Jailer confirmed that the facility is taking significant steps to ensure that materials are provided in various formats to include inmate computer tablets and closed captioning video formats. Posters displaying PREA reporting information were observed in housing units in English and Spanish and the Auditor verified the translation service provided by the facility. Inmates entering the facility are provided a written copy of the Zero Tolerance for Sexual Abuse and Sexual Harassment and provided PREA education within 30 days of arriving at the facility. Inmates are required to sign as verification of receipt of the inmate computer tablet and PREA education. Conclusion: The Auditor reviewed the facility policies, procedures, PREA educational video, inmate files, and training records. The Auditor determined the facility meets the requirements of this standard.

115.17	**Hiring and promotion decisions**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.17 Hiring and Promotion Decisions Materials, Interviews, Policies and Other Evidence Reviewed: PAQ BCSO General Order (C-21)-Employment, Recruitment, Selection and Promotion Employee Roster BCDC County Application Background Screening Form PREA Acknowledgement Form Employee Records Interviews

The Auditor reviewed documentation used by the facility for staff pre-employment and promotional purposes. The facility requires each applicant complete a Pre-employment Background Information questionnaire prior to access to the facility. The BCDC policy prohibits hiring anyone or enlisting the services of any contractor or volunteer who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in U.S.C. 1997), been convicted of engaging or attempting to engage in sexual activity in the community which was facilitated by force, overt or implied threats of force or coercion, if the victim did not consent or was unable to consent or refuse, or been civilly or administratively adjudicated to have engaged in the activities described above. Each candidate is required to complete the Duty to Disclose form (PREA Acknowledgement) prior to working in the facility.

The Auditor reviewed the records of contractors and confirmed the facility conducted a criminal record background check through the North Carolina Criminal Information Network and National Crime Information Center on each applicant prior to enlisting their services. The Auditor verified current employees had a criminal record background check conducted within the previous 5 years.

The policy states that the BCDC will consider any instances of sexual harassment in determining whether to hire or promote anyone or enlist the services of contractors who may have contact with inmates. The Auditor interviewed Human Resources staff who confirmed that instances of sexual harassment would be a factor when making decisions about hiring and/or promotion. All potential employees and contractors undergo a background check and are not offered employment if disqualifying information is discovered. In addition, the BCDC utilizes a checklist for the background process which verifies all steps that have been completed, including the criminal history check. HR staff stated that if a prospective applicant previously worked at another correctional institutional, they try to contact the facility for information on the employee’s work history and any potential issues, including allegations of sexual assault or harassment, or resignation during a pending investigation. In accordance with the standard, BCDC policy stipulates that omissions regarding such conduct or the provision of materially false information shall be grounds for termination. BCDC policy requires that the facility provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer and a signed release of information.

The BCDC maintains written proof of all inquiries and the results are in the candidate’s personnel file and staff responsible for conducting such inquiries are trained in accordance with the standards. The Auditor concluded that BCDC is performing appropriate practices to identify previous acts of sexual misconduct prior to hiring staff, enlisting the services of contractors, or promoting staff members. Staff members are required to complete the facility's Pre-Employment Background Information questionnaire prior to employment and the (Duty to Disclose Misconduct) form. The Auditor observed that employees completed the form on an annual basis

	and prior to any date of promotion. Conclusion: The Auditor conducted a review of the facility's policies, procedures, employment records, conducted interviews, and determined the facility meets the requirements of this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.18 Upgrades to Facilities and Technologies Policy, Materials, Interviews and Other Evidence Reviewed: Interviews Policy JOM 466- Sex Abuse/Sexual Harassment Prevention/Intervention Camera Diagrams Memo PAQ Policy JOM 466 states that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the effect of the design, acquisition, expansion, or modification and the facility’s ability to protect inmates from sexual abuse, will be considered. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the ability to protect inmates from sexual abuse will be carefully reviewed. During interviews with the PREA coordinator and PREA manager, it was noted that the Jailer and the PC would discuss any projects at the facility to ensure compliance with the PREA standards. The Jailer and PC stated that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the facility considers how such technology is needed to facilitate their ability to protect inmates from sexual abuse. Facility staff monitor the institutional cameras to identify any areas that may need additional coverage. The facility noted that there had been no new camera projects or substantial expansion or modification to existing facilities since the last PREA Audit. Conclusion: During review of documentation and interviews with staff, the Auditor determined that the facility meets the provisions of this standard.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.21 Evidence Protocol and Forensic Medical Examinations Policy, Materials, Interviews and Other Evidence Reviewed: PAQ Interviews PREA Investigators Training Certificates Evidence Protocol Policy JOM 466 Sexual Misconduct Gen. Order G-03- Evidence and Property Management Medical Specialized PREA Training Administrative and criminal investigations are completed on all allegations of sexual abuse and sexual harassment cases reported. BCDC directives state that PREA investigations of sexual abuse or sexual harassment will be completed by staff who have received specialized investigator training as outlined in the PREA policy. Facility investigators and BCDC staff are trained in conducting sexual assault investigations in confined settings and prisons. The facility utilizes Vital Core for all medical and mental health needs for the inmates. Vital Core has developed the protocol for collection of physical evidence presented through health examinations that would maximize the potential for administrative proceedings and criminal prosecutions. The policy indicates that evidence collected along with any documentation and actions will be provided to the Sexual Assault Response Team (SART). A review of training documents confirmed that investigators received training in conducting sexual assault investigations. All investigations will be conducted promptly, thoroughly, and objectively in accordance with the Sexual Abuse/Sexual Harassment Investigations protocol. The s conduct sexual abuse investigations and initiate criminal prosecutions on behalf of the BCDC. During a PREA investigation, facility staff are required to preserve the crime scene until an outside investigator arrives to collect and process physical evidence from the scene. Facility investigators are trained using the Crime Scene Management and

	Preservation training modules and the facility provides documentation of staff training. The training includes material reference and sources from the U.S. Department of Justice’s NIC training forum, National Protocol for Sexual Assault Medical Forensic Examinations, PREA Audit Reporting, and Crime Scene Management & Preservation. The facility investigation will be coordinated to prevent any obstacle that would interfere with a prosecution and to remain informed of the status of the investigation. The facility's investigation will proceed in accordance with BCDC protocol regardless of whether the referral results in criminal prosecution. BCDC has a MOU with Coastal Horizons for emotional support services and Rape crisis center. Inmates are made aware of the confidential emotional support services available to them in the inmate handbook, Tablet, and posted contact information. A crisis center member is available to accompany and support an inmate victim through the forensic medical examination process, investigatory interviews, and to provide emotional support, crisis intervention, and provide referrals. Staff at Coastal Horizons are trained to accompany inmates during forensic examinations. The facility does not employ SAFE or SANE staff and therefore forensic examinations are conducted at a local hospital. Conclusion: Interviews with staff and review of supporting documentation, confirm compliance with this standard. The Auditor determined that the facility meets the requirements of this standard.

115.22	**Policies to ensure referrals of allegations for investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.22 Policies to Ensure Referrals of Allegations for Investigations Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466 – Sexual Misconduct/PREA PAQ Investigations Agency Website(www.Brunswicksheriff.com) Grievances Interviews BCDC policies are written in accordance with Standard 115.22 and require that an investigation be completed for allegations of sexual abuse and harassment. The Jailer

	will ensure that information on allegations of inmate-on-inmate sexual abuse or sexual harassment, employee sexual abuse/sexual harassment, or employee overfamiliarity accusations, are entered into the BCDC database. All sexual abuse or sexual harassment investigation has an investigation packet completed for cases reported verbally, in writing, anonymously, or from third parties. The Jailer will refer the allegation as soon as possible, but no later than one business day after the report is made. The facility PC, supervisors, and investigators work closely to ensure that allegations of sexual abuse and harassment are investigated. If an inmate alleges a sexual assault or sexual harassment has taken place, the staff member will notify the supervisor to initiate a report. The supervisor will complete the PREA checklist and complete the investigation packet. The investigator coordinates with the PC to determine the course of action, and the PC is notified. The BCDC conducts all criminal investigations for the facility and if a case is prosecutable, a referral is submitted to local authorities. The information tracked includes the date of the allegation, name of the victim and perpetrator, SHU placement-reviews, after-action review, protocol documents, investigation completion date, inmate outcome notification, and retaliation monitoring review. Once the investigation is closed, a notification is made to the inmate on case outcome. A review of training documents confirmed that investigators received specialized training in conducting PREA investigations. Conclusion: The Auditor conducted interviews, observed daily assignments, and determined the facility is compliant with provisions of this standard.

115.31	**Employee training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.31 Employee Training Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Sexual Harassment Prevention and Intervention General Order A-4-Training Staff Training Development PAQ Staff Interviews

	PREA Refresher Training Staff Training Rosters Vital Core Policy B-5 Response to Sexual Abuse BCDC policies require that facility employees, student assistants, unpaid student interns, and contractors working inside a correctional facility or field office, which includes employees of other State agencies, are required to successfully complete service training in accordance with the requirements set forth in policy directives. In accordance with the PREA policy, employees are required to complete PREA training every two years. Training is completed at the facility to aid in fulfillment of PREA standard requirements and to ensure each employee adheres to policies and procedures regarding sexual abuse and harassment. The facility provided the Auditor copies of the facility's PREA training documents, certificates of completion, and staff training acknowledgement. The facility utilizes an electronic system for tracking staff training and course completions. PREA training conducted at the facility referenced courses that included Zero tolerance, definitions of sexual abuse, staff duty to report, staff neglect and misconduct, anonymous allegations, how to report, retaliation monitoring, and limits to cross gender viewing. The training materials provided for review adequately cover the PREA requirements. Conclusion: The Auditor determined the facility is compliant and meets the requirements of this standard.

115.32	**Volunteer and contractor training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.32 Volunteer and Contractor Training Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Sexual Harassment Prevention and Intervention PREA Acknowledgement Verification Form-(Medical Staff, Contractors, Volunteers) Training and Staff Development Volunteer Training Staff Interviews

	PAQ Training Rosters Brunswick County Detention Center provides standardized training for all new employees, contractors, vendors, and volunteers who provide services at the facility. Vendors who have direct continuous supervision by facility staff are required to review the PREA training modules and provide a signature as verification. The Auditor reviewed the training curriculum, training rosters, and staff training files to verify contracted employees and volunteers have received the required training. New contractors and volunteers are given PREA training during their orientation before assuming their duties and are required to sign a verification form as acknowledgment. Any volunteer or contractor who may have contact with inmates, will be trained on facility's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The training procedures provided information relevant to respectful interactions with inmates, physical boundaries, and overfamiliarity. Interviews with contractors verified they were aware of responsibilities to report incidents of sexual abuse and sexual harassment, as well as how to respond to an incident to preserve evidence. The facility's training curriculum for contractors and volunteers sufficiently addresses the concepts of sexual abuse, sexual harassment, reporting, and response procedures. Interviews with contract staff verified employee training modules by BCDC. Conclusion: The Auditor concluded the facility is appropriately training volunteers, contractors, and staff. The Auditor determined through a review of facility policies, procedures, training curriculum, acknowledgment forms, and interviews, the facility meets the requirements of this standard.

115.33	**Inmate education**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.33 Inmate Education Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Sexual Harassment Prevention and Intervention Policy JOM 466A-Inmate PREA Education LEP- Inmates

	Volunteer Training Interviews Inmate Kiosk Inmate Tablets PREA Education Inmate Handbook (English and Spanish) PREA Posters Inmate PREA Acknowledgement Form Inmate Training Records Inmate Admissions, Transfers, and Discharges Initial Classification of Inmates PAQ BCDC administrative directives are written in accordance with Standard 115.33 which states all inmates will receive comprehensive PREA education during intake and upon transfer from another facility within 30 days of arrival. Within 72 hours of arrival at a facility, an inmate will receive educational material on Zero-tolerance, how to report, name of the facility PC, contact information for outside reporting, victim advocate services, and emotional support services. In accordance with directives, inmates will receive orientation upon arrival at BCDC, and the Jailer will develop and maintain an orientation program. During intake processing, inmates receive comprehensive PREA information explaining the facility's zero-tolerance directives regarding sexual abuse and sexual harassment which is provided in writing and video presentation. Topics covered during inmate education include Inmates' rights to be free from sexual abuse and sexual harassment, retaliation for reporting, methods to report incidents, and facility PREA directives. Interviews with the PC verified PREA training are provided to inmates by officers assigned in the (Booking) department. During intake processing, officers are required to create individual files for each inmate to ensure PREA education sessions are verified and reassessments are tracked. The Auditor reviewed inmate files to verify that PREA education is provided in a timely manner. As part of the facility's intake and assessment process, files are reviewed and inmate PREA training documented. The facility utilizes Language Line Interpretive services for disabled or LEP inmates support services. The facility maintains copies of PREA training materials that include

	PREA publications. The PREA video is closed captioned for the deaf or hearing-impaired population and inmates are provided PREA information, which is played on a loop, in the Arrest Processing Center. The Auditor observed the facility displays PREA resource contact information throughout the facility in English and Spanish. Conclusion: The Auditor determined compliance, and the facility meets the requirements of this standard.

115.34	**Specialized training: Investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.34 Specialized Training: Investigations Policy, Materials, Interviews and Other Evidence Reviewed: Investigator Training Certificates BCDC- Policy JOM 466-Sexual Harassment Prevention and Intervention BLET Training Investigator Training Staff Training and Development Interviews PAQ BCDC policies are written in accordance with standard 115.34 which states that investigations of sexual abuse or sexual harassment will be completed by employees who have received specialized investigator training as outlined in the PREA standard. All investigations will be conducted promptly, thoroughly, and objectively in accordance with the Sexual Abuse/Sexual Harassment investigations portion of the PREA standard and facility investigators are required to receive specialized training to conduct PREA investigations in confinement settings. The facility utilizes the NIC investigator training modules which provide additional specialized training for investigators that assist in PREA administrative investigations. This investigative course covers PREA topics that include, Dynamics of Sexual abuse within Confinement settings, Interview techniques for victims of Sexual abuse, Preservation of evidence, and Garrity and Miranda rights. The evidentiary standard of preponderance is noted within the training referencing administrative investigations. The training provides guidance on the requirements and procedures for referring

	potential PREA criminal investigation and prosecutable cases. The Auditor verified training for investigators, which is electronically maintained in the employee's training record and the investigators will continue to update and maintain training requirements. Conclusion: The Auditor concluded the facility has provided appropriate training for its investigators. The Auditor conducted a review of policies, directives, training curriculum, training records, investigative reports, and interviewed staff. The Auditor determined the facility meets the requirements of this standard.

115.35	**Specialized training: Medical and mental health care**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.35 Specialized training: Medical and Mental Health Care Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Sexual Harassment Prevention and Intervention Pre-Audit Questionnaire Specialized NIC Medical Certifications Staff Training Records Staff Training and Development Medical In-service Training PREA Acknowledgement Interviews BCDC directives require that all staff members receive PREA training in accordance with Standard 115.31. All part- and full-time mental health and medical staff members receive additional specialized PREA training. Student assistants, unpaid student interns, facility employees, who work inside a correctional facility or field office, are required to successfully complete in-service training in accordance with the requirements set forth in policy. The Auditor reviewed the facility training curriculum specific to medical staff and materials concurrent with the training module that covers requirements by PREA standards. Training materials cover the detection of sexual abuse and harassment, preservation of evidence, how to respond to victims of sexual abuse, and reporting

	responsibilities. Medical and mental health practitioners receive PREA training beyond the standard's minimal requirements. PREA directives established procedures that ensure facility employees and contract staff are adequately trained. The facility provided documentation of medical and mental health staff completion of the NIC PREA Specialized training modules provided through the NIC website. During the Auditor's tour, medical staff confirmed that they have received PREA standards required training. The Auditor interviewed medical and mental health supervisors who were knowledgeable of PREA training offered and confirmed having received the general and specialized training during in-service. An interview with a medical practitioner and a qualified mental health practitioner indicated that medical and mental health staff have received specialized training regarding sexual abuse and sexual harassment via the National Institute of Corrections (NIC) which covers how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how to and whom to report allegations or suspicions of sexual abuse and sexual harassment. Conclusion: Based on review of the facility's directives, procedures, staff records, and interviews, the Auditor determined the facility meets the requirements of the standard.

115.41	**Screening for risk of victimization and abusiveness**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.41 Screening for Risk of Victimization and Abusiveness Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention Intake Screening Instrument PAQ Medical Screening 30 Days Reassessments Interviews JOM 466.D-Initial Risk Assessment Screening

	BCDC policy states that a transferred inmate will be screened within 72 hours of arrival at the facility to identify any history of sexually aggressive behavior and risk of sexual victimization. Staff will complete the PREA risk assessments in accordance with the directive and document the findings. Policy states that inmates should be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or being sexually abusive toward other inmates. The facility's database and risk assessment tools are used to determine an inmate's risk, and risk assessments are completed using information contained in the inmate's file, facility databases, and information obtained during the inmate interview. Inmates interviewed during the risk screening are not disciplined for refusing to answer any interview questions. The initial screening considers prior acts of sexual abuse, convictions for violent offenses, victimization, and prior institutional violence or sexual abuse. The Auditor interviewed classification staff responsible for the inmate intake process after arrival at the facility. Interviews with staff verified that within 72 hours of admission, inmates are screened for risk of sexual abuse victimization and the potential for predatory behavior(HRSA & HRSV). Referrals to medical are made if the inmate requests or staff document the need as urgent. Inmates stated during interviews they had been asked PREA related questions during intake orientation. Review of inmates' files verified that an initial risk assessment was conducted within 72 hours of arrival, psychological screening, and reassessment within 30 days from date of arrival at the facility. Inmate's risk level is reassessed at any time when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information of an inmate's risk of sexual victimization or abusiveness. During the initial screening, inmates are asked about their sexual orientation and how safe they feel. This information and the staff's perception of the inmate is documented. An electronic reminder is generated to each classification staff member 25 days after the initial assessment, that a 30-day reassessment is due to determine if there have been any changes to the inmate's status. The Auditors interviewed staff who conduct screenings. They stated the risk screenings are completed within 72 hours, and previous PREA risk assessments are reviewed. The Auditor reviewed inmate files, intake records, and risk screenings to confirm the screenings were documented. Conclusion: The Auditor reviewed policies, procedures, and inmate records, made observations, conducted interviews, and determined the facility meets the requirements of this standard.

115.42	**Use of screening information**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.42 Use of Screening Information

Policy, Materials, Interviews and Other Evidence Reviewed:

Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention

Inmate Housing Assignments

PAQ

Interviews

Initial Classification

Medical Screening

JOM 466.8.A-Risk Screening

OMS-Offender Management System

BCDC facility directives require that the facility will consider housing for inmates on a case-by-case basis to ensure the health and safety of the inmate and take into consideration any potential management or security problems. The directive also stipulates that inmates will not be placed in a dedicated facility, unit, or wing solely based on such identification or status, unless the placement is established in connection with a consent decree, legal settlement, or legal judgment.

The Auditor reviewed inmate classification records that confirmed individualized considerations for each inmate were made when determining their housing, cell, work, and other assignments to ensure each inmate’s safety in the facility. Staff are responsible for entering information to ensure HRSV inmates are not placed in a work assignment, cell, or education assignment with those identified as potential abusers. The Auditor verified that officers conduct risk screening for each inmate during the intake process. The screening tool includes sections for the staff to document their perceptions of the inmate vulnerability and records staff provide information into the Offender Management System (OMS).

The facility utilizes a centralized assessment process to determine the inmate’s classification status during the intake process. When an inmate is classified as HRSV or HRSA, it is the responsibility of the staff member conducting the screening, to document the information and submit medical referrals. An inmate that is determined to be at high risk for victimization will not be placed in the same cell or programming assignments as an inmate that has been determined to be at high risk for abusiveness. It is the responsibility of screening staff to check the status of each inmate being placed in a job assignment to prevent possible victimization or harassment.

Conclusion: The Auditor reviewed policies, procedures, inmate records, made observations, and conducted interviews to determine the facility meets the

	requirements of this standard.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.43 Protective Custody Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Screening for Risk and Abusiveness Inmate Housing Rosters Interviews PAQ Special Management Roster BCDC policy states that inmates at high risk for sexual victimization or who are alleged to have suffered sexual abuse will not be placed in involuntary segregation unless an assessment of all available alternatives is completed, and a determination has been made that no less restrictive means of separation from likely abusers exist. If the review cannot be conducted immediately, the inmate may be held in temporary segregation for up to 24 hours while the review is completed. If no less restrictive means of separation from the abuser or likely abusers exist, the inmate will be assigned to temporary segregation for a period not to ordinarily exceed thirty calendar days. The Jailer stated that segregation is not used to protect inmates at high risk of sexual victimization unless it is the only means of keeping them safe. Such placement is limited to less than 24 hours and reviewed for appropriate housing within the facility or transferred to a different facility. Inmates housed in restrictive housing maintain access to recreation, educational programming, and religious programming to the extent administratively feasible and can be safely afforded. In the event of restrictions, the facility is required to document the nature of the restrictions. Staff at BCDC are aware of the administrative directives and their responsibilities regarding this standard. Staff interviewed stated they would conduct an immediate assessment of available housing alternatives prior to placing inmates in special

	management housing. Staff must assess and document all available alternatives prior to placing an inmate at high risk of sexual victimization or an inmate who has alleged sexual abuse or sexual harassment in involuntary segregated housing. Staff interviewed stated that an inmate identified as HRSV would be moved to another housing location and not placed in segregation unless it was a temporary placement to keep the inmate safe until the investigation was complete, or the inmate requested protective custody. The PREA manager verified there were no inmates during the audit period that had been placed in restrictive housing involuntarily to separate them from potential abusers. The facility takes adequate measures to ensure individualized safety needs are considered. The facility reported that there were no instances of inmates being placed into involuntary segregation for risk of victimization. Conclusion: The Auditor reviewed policies, procedures, housing alternatives, risk assessment form, and conducted interviews. The Auditor determined the facility has demonstrated compliance with the provisions and meets this standard.

115.51	**Inmate reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.51 Inmate Reporting Policy, Materials, Interviews and Other Evidence Reviewed: Inmate Orientation Handbook Kiosk Tablets Policy JOM 466- Sexual Misconduct Initial PREA Questionnaire PREA Signage Interviews BCDC policies states that the facility must provide multiple internal ways for inmates

	to privately report sexual abuse or sexual harassment, retaliation for reporting, staff neglect, and violation of responsibilities which may have contributed to such incidents. The policy designates multiple mechanisms for the internal reporting. The PREA directives state that inmates may privately report sexual abuse, sexual harassment, retaliation by other inmates or staff, staff neglect, or dereliction of duties. Inmates can file reports verbally, writing staff, or via third parties, to report sexual abuse or sexual harassment, retaliation, and any staff neglect that may have contributed to a PREA claim. Inmates are not required to resolve an incident of sexual abuse or sexual harassment with the staff member who is the subject of their allegation. When staff receive any report of sexual abuse or sexual harassment regardless of the source, they will promptly document and forward the complaint to the appropriate supervisory staff for investigation. Facility staff were aware of their obligations to accept reports from inmates and document the allegations. Staff members are informed of these avenues during PREA training and are aware they can contact any facility member, Jailer or PREA coordinator, to report sexual abuse or harassment of inmates. Information for inmate and staff reporting is documented on the BCDC website. Third party reporting posters and the employee handbook provide information for staff concerning their responsibility to report sexual abuse and sexual harassment. Staff interviewed were aware of the PREA hotline number and a website address available for anonymous reporting. BCDC provides inmates third-party contact information to a Victim Advocate hotline for reporting any abuse or harassment and they can also contact the Brunswick Sheriff department. Conclusion: The Auditor reviewed facility policies, procedures, inmate handbook, grievances, investigative records, and conducted interviews and determined the facility meets the requirements of this standard.

115.52	**Exhaustion of administrative remedies**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.52 Exhaustion of Administrative Remedies Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention JOM-403- Inmate Grievances Inmate Handbook (English/Spanish)

	Grievances Interviews PAQ BCDC directives state that the facility has a grievance procedure in place for addressing inmate grievances. The inmates are not required to use an informal grievance process to resolve an alleged incident of sexual abuse and are not required to submit a grievance to a staff member who is the subject of a complaint. The inmate can submit a grievance form which is part of the administrative remedy procedure to any staff member. It provides an avenue for inmates to obtain a formal resolution of an issue from the Jailer. Conclusion: Based on the review of policies, notification of the investigation findings, interviews, and observations, the Auditor determined the facility has demonstrated compliance and meets requirements of this standard.

115.53	**Inmate access to outside confidential support services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.53 Inmate Access to Outside Confidential Support Services Policy, Materials, Interviews and Other Evidence Reviewed: Inmate Handbook PREA Posters Interviews Acknowledgement Receipt of Handbook Coastal Horizons MOU Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Inmate Tablet BCDC directives state that facilities provide inmates with access to outside victim advocates for emotional support services related to sexual abuse. BCDC has established a MOU with Coastal Horizons for providing counseling and emotional support services related to sexual abuse. The facility works collaboratively to

	establish relationships with outside support services. BCDC Inmate Handbook, page 6, provides a list of victim assistance numbers and addresses from Coastal Horizons, the Rape, Abuse, and Incest National Network (RAINN), and the National Organization for Victim Assistance. The facility advertises the availability of these resources on inmate bulletin boards within the housing units. Inmates are made aware of external communications monitoring, and which lines of communication are confidential and not monitored. Signs posted in the inmate housing units include statements advising that PREA calls may be made anonymously and will not be monitored. Administrative directives require that inmates and staff be allowed to report sexual abuse or harassment confidentially and require that medical and mental health personnel inform inmates of staff limits of confidentiality. Interviews with medical and mental health staff confirmed they are aware of their obligations to inform the inmates of the limits of confidentiality. PREA signage was located throughout the facility with contact information provided that include phone numbers, addresses, and web site links. Inmates are informed of the PREA contact information during intake, and the facility provides inmates information regarding confidential support services in the inmate handbooks and computer tablets. Conclusion: Based on policy review, interviews, and correspondence contact, the Auditor determined the facility meets the requirements of this standard.

115.54	**Third-party reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.54 Third-Party Reporting Policy, Materials, Interviews and Other Evidence Reviewed: Interviews Inmate Handbook PREA Posters PREA Investigation Hotline Policy JOM-466-Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Website: www.Brunswicksheriff.com Brunswick County Jailer office website provides avenues that meet the requirements of standard 115.54, and the inmate handbook and tablets provide third party contact information. The Auditor reviewed the facility policy which states that inmates may

	report allegations of conduct prohibited to facility staff. Threats of such conduct and retaliation for reporting can be reported verbally or in writing to any facility staff member, the PREA Sexual Abuse Hotline, or third-party avenues. The BCDC website, PREA notices, computer tablets, and inmate handbook provide contact information for the Brunswick Sheriff Department, toll free numbers for Costal Horizons rape crisis center, and other local support organizations. The facility website provides contact information for third party reporting of allegations of sexual abuse or sexual harassment. Third parties can use the BCDC website to report PREA allegations electronically on behalf of inmates. Directives were reviewed that stated third parties, inmates, staff members, family members, attorneys, and outside advocates will be permitted to assist in reporting. The facility website states that all allegations of sexual abuse should be reported and will be investigated. Conclusion: The Auditor reviewed materials, policies, and made observations during the facility tour and determined the facility meets requirements for the standard.

115.61	**Staff and agency reporting duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.61 Staff and Agency Reporting Duties Policy, Materials, Interviews and Other Evidence Reviewed: Policy 466.4- Inmate Grievances Training Records Interviews Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Specialized PREA Medical Training Vital Core Policy B-5 Response to Sexual Abuse PREA Lesson Plan BCDC policy requires confidentiality of all information obtained that is relevant to sexual abuse or harassment beyond what is required to be shared as a part of the

	report, treatment, or investigation. Policy states that anyone interviewed as part of a PREA investigation should be specifically warned not to discuss the investigation with others and staff that intentionally compromise this confidentiality will be subject to discipline in accordance with the Employee Discipline directive. This does not prevent staff from discussing such matters with their attorneys or in accordance with directives. BCDC requires that all staff report sexual abuse and sexual harassment immediately to a supervisor or other staff member of a higher rank. Once the abuse is reported, staff are instructed not to discuss the allegation with anyone unless those staff are investigating the allegation, making security decisions, or providing services to the inmate victim. During interviews with staff, the Auditor determined staff understood their responsibility to report any suspicions they have regarding sexual abuse or sexual harassment of an inmate. The Auditor reviewed facility training curriculum for staff, volunteers, and contractors that included reporting sexual abuse and sexual harassment allegations. Each staff member is required to read the facility's PREA policies and verify receipt of attendance. The Auditor verified staff, contractors, and volunteers, had received training, and reviewed the policies on reporting serious or unusual information related to PREA. Staff understand the need to keep PREA investigative information limited to those that need to know to preserve the integrity of the investigation. Staff interviewed stated that details related to either inmate allegations or staff allegations should remain confidential and should only discuss details of the case with supervisors and investigators. Directives require that all medical and mental health personnel inform inmates of the mandatory reporting requirements and limits of confidentiality to victims of sexual abuse. Facility directives require medical and mental health staff to report any knowledge of sexual abuse within an institutional setting, and clinicians are required to disclose their duties to report to the inmate. Reasonable steps will be taken to ensure the confidentiality of information obtained during the inmate risk assessment process. Conclusion: The Auditor determined through review of policies and interviews, the facility meets the provisions of the standard.

115.62	**Agency protection duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.62 Agency Protection Duties Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention

	PREA Classification Inmate Handbook SHU Roster Specialized Medical Training Interviews PAQ BCDC administrative directives are written in compliance with Standard 115.62 and require that whenever there is a report of sexual abuse or harassment, the victim should be immediately protected. The Auditor reviewed the facility policy which states that when an inmate is subject to substantial risk of imminent sexual abuse or is the alleged victim of sexual abuse, the facility will take immediate action to protect the inmate by preventing any contact between the alleged abuser and the alleged victim. Such actions can include cell changes, temporary segregation, facility reassignment, or transfers. Staff interviewed by the Auditor were able to explain what immediate actions were required by staff when learning that an inmate is at imminent risk of sexual abuse. Supervisory staff interviewed by the Auditor were knowledgeable of the options they have available to protect inmates from sexual abuse and would be determined on a case-by-case basis. The Jailer is required to review the actions within 48 hours to ensure appropriate measures have been taken to protect potential victims. BCDC policies require that medical staff to immediately notify the Jailer when made aware of an incident and they will recommend housing interventions or other immediate action to protect an inmate when it is determined the inmate is subject to a substantial risk of sexual assault. Conclusion: The Auditor reviewed directives, procedures, conducted interviews, and determined the facility meets the requirements of this standard.

115.63	**Reporting to other confinement facilities**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.63 Reporting to other Confinement Facilities Policy, Materials, Interviews and Other Evidence Reviewed: Screening Instrument

	Interviews Policy JOM 466-Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Reporting of Incidents PREA Investigations PAQ Memo JOM 466.4.3-Reporting Sexual Misconduct Policy JOM 466, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, mandates that when receiving an allegation that an inmate was sexually abused while confined at another facility, the incident will be reported to the PREA compliance manager. The Jailer will notify the agency or facility head where the abuse is alleged to have occurred within 72 hours of receiving the allegation. The PC will maintain documentation of the Jailer's notification and any other actions taken regarding the incident. Copies of this documentation will be forwarded to the PREA coordinator's office for investigation. When a PREA allegation is received from an entity other than a correctional facility, it will be reported using contact information located on the BCDC website. This includes any allegation regarding sexual abuse and sexual harassment at a jail, State correctional facility, Federal prison, or a juvenile detention facility. All documents related to the allegation must be made available to the PREA manager for review. The Auditor conducted interviews with facility staff who stated they would immediately report the allegation to their supervisor and submit an incident report including the details of the allegation as reported to them. The Jailer and PC stated if they receive such notice, they will immediately report the allegation to the supervisor at the alleged facility and document. The Jailer stated that if information is received that an inmate alleges to have suffered sexual abuse at another facility, BCDC staff will place a telephone call followed by an email, to the facility affected to complete the notification process. The Jailer stated they would notify their facility investigator, and an investigation would be immediately conducted. Conclusion: Compliance with this standard was verified by reviewing policies, interviews, and documentation. The Auditor determined that the facility meets the requirements of this standard.

115.64	**Staff first responder duties**
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	115.64 Staff First Responder Duties Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Staff training Roster JOM 466.4.3-Reporting Sexual Misconduct Specialized Medical Training PREA Lesson Plan PAQ Interviews BCDC policies require that if the first responder is not a security staff member, they immediately notify a security staff member. The Auditor conducted interviews with non-security personnel and asked what actions they would take following an alleged sexual abuse if reported to them. Staff stated they would ensure the victim remains with them and immediately inform an officer or supervisor. Medical personnel interviewed stated they would first assess a victim's emergency medical needs and would request the victim not to use the restroom, shower, or take any other actions which could destroy evidence. Medical staff informed the Auditor they would immediately notify a supervisor if they were the first person to be notified of an alleged sexual abuse and the victim would be provided immediate attention. The Auditor conducted interviews with supervisory staff to determine what their role would be following a report of sexual assault. The supervisors stated that they would ensure the alleged victim and alleged abuser were removed from the area where the incident occurred and kept separately in the facility for their protection. The area of the incident would be secured and no one allowed in the area to disturb the evidence. The alleged victim would be taken to medical for treatment of any emergency needs and transported to the local hospital for a forensic exam if necessary. Staff first responders stated they were aware of their responsibility regarding their duties during a PREA incident. A review of the investigation files supported that staff acted appropriately when responding to allegation of sexual abuse by taking the required actions to separate the alleged victim from alleged abuser, preserving the crime scene, protecting evidence, and documenting events. The Auditor reviewed the facility's training records for verification that sexual abuse training had been conducted at the facility and personnel had completed the required training. The training records of staff, contractors, and volunteers confirmed they had

	received training to appropriately respond to incidents of sexual abuse. The Auditor determined the facility has trained its staff in their responsibilities as a first responder to an incident of sexual abuse. Staff interviewed as part of this onsite audit were knowledgeable of their responsibilities as a first responder during an allegation of sexual abuse or sexual harassment incident. Conclusion: The Auditor reviewed policies and procedures, coordinated response plan, interviewed staff, and determined the facility meets the requirements of this standard.

115.65	**Coordinated response**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.65 Coordinated Response Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Staff training Roster Policy D-451-Institutional Plan Coordinated Response Plan Interviews BCDC directives require the facility to develop a written plan to coordinate actions taken in response to an incident of sexual abuse. The facility has developed its own operating procedures for the coordinated response plan. BCDC policy describes the procedures employed by the facility when responding to allegations of sexual abuse among supervisory, investigative staff, and facility leadership. The plan should include responsibilities of Staff, Volunteer, Contractor, First Responder (Security/Non-Security), Shift Supervisor, Medical staff, Investigator, PC, and administrative response protocol. The Brunswick County detention center has a response plan which outlines the duties, notifications, and responses of staff, first responders, and leadership. Investigations of staff are conducted by the BCDC and the Brunswick Sheriff Department. Medical and Mental Health is provided by Vital Core who provide care for Inmate-on-Inmate sexual assault and Staff on Inmate sexual assault. A first responder checklist has been created which supplements the facility operating procedures and

	outlines staff duties in response to a sexual assault incident. The Auditor conducted interviews with staff listed in the facility's coordinated response plan and they were knowledgeable regarding their specific duties. The Auditor determined the facility has prepared their staff to take appropriate actions in response to sexual abuse. The Auditor interviewed the Jailer, investigator, medical staff, and PC, regarding the initiation of the coordinated response in the case of an allegation of sexual abuse or harassment. Staff understood their responsibilities and stated that investigations are completed timely, and a case finding is assigned. Staff interviewed stated that cases may be referred for criminal prosecution or investigated administratively. Staff stated that monitoring for retaliation is conducted and that a notice to the inmate victim disclosing the outcome of the case would be delivered once a determination is made. The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse. Conclusion: Based on a review of the facility's policies, procedures, coordinated response plan, training records, and interviews, the Auditor determined that the facility meets the requirements of this standard.

115.66	**Preservation of ability to protect inmates from contact with abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.66 Preservation of Ability to Protect Inmates from Contact with Abusers Policy JOM-466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Staff Rosters Staff Post Assignments Interviews JOM 466.9.C-Retaliation Monitoring PAQ

	A review indicated that BCDC has not entered into any collective bargaining agreements . The facility preserves the ability to remove alleged staff abusers from contact with inmates that are consistent with provisions of the standard. The facility may take actions that include suspension of an employee during an investigation, and this suspension may continue until disciplinary actions are determined. The Jailer confirmed that the facility maintains the right to assign staff. This Auditor confirmed that the facility has the right as the employer to remove alleged staff abusers from contact with inmates, consistent with provisions. Specifically, when warranted, the employer may take actions that include suspension of an employee during an investigation. This suspension may continue until the time when disciplinary actions are determined. Conclusion: The Auditor finds the facility compliant with this standard and meets the requirements.

115.67	**Agency protection against retaliation**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.67 Agency Protection Against Retaliation Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Policy JOM-466.6.C.H-Retaliation Monitoring Interviews Investigative Reports The BCDC’s policy is written in accordance with PREA standard 115.67 and states retaliation by or against any party, staff, or inmate, who participates in a complaint, report of sexual abuse, or sexual harassment, will be prohibited. Facility policy states both staff and inmates who cooperate with sexual abuse and sexual harassment investigations will be protected from retaliation. The facility designates a supervisory staff member other than the direct supervisor, who initiates the retaliation monitoring protocol. The staff member assigned will monitor retaliatory performance reviews, reassignments, and other retaliatory actions that may occur. The PREA manager monitors staff retaliation for up to 90 days and retaliation may be

	monitored beyond 90 days if required. If a staff member engaged in an inmate abuse, the staff member would be separated from the inmate and could receive disciplinary action commensurate with the type of behavior taken. If an inmate retaliates against another inmate, the inmates would be kept separate from one another with possible transfer. Options to protect against retaliation may include protective custody, housing reassignments, or transfer to another facility. Any use of involuntary segregated housing for the inmate who has alleged to suffer sexual abuse will only be used if there are no other alternatives. Supervisory staff will also monitor disciplinary sanctions, housing, or program changes, and conduct periodic status checks for inmates who report or have reported alleged victimization. Retaliation will be grounds for disciplinary action and will be investigated. Any individual who cooperates with an investigation and expresses fear of retaliation, there will be measures initiated to protect that individual against retaliation and retaliation monitoring will cease if an allegation is unfounded. Administrative staff have the authority to move inmates within the facility or to request transfers to other facilities to prevent inmate retaliation. Inmates are not held in the special management housing unless requested by the inmate and the Auditor verified the facility has multiple units that inmates can be placed for separation purposes. Conclusion: Staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members. The Auditor reviewed documents and determined the facility meets this standard.

115.68	**Post-allegation protective custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.68 Post-Allegation Protective Custody Policy, Materials, Interviews and Other Evidence Reviewed: Risk Screening Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Policy D-351- PREA Classification SHU Roster Interviews

	PAQ BCDC’s directives are written in accordance with Standard 115.68 which requires the use of segregated housing to be subjected to the requirements of PREA standard 115.43. Facility policies prohibit the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and there are no available alternative means of separation from abusers. The Auditor determined during document review, that inmates have not been placed in involuntary segregation due to risk of victimization in the 12 months preceding this audit. The facility PC noted the facility did not place any inmate in protective housing due to being at high risk for sexual victimization during the past 12 months and will not use protective housing as a protective measure for a victim at high risk of sexual victimization unless requested by the inmate. Interviews with supervisory staff confirmed their knowledge of their responsibility to protect an inmate after their allegation of abuse. There were no instances where protective custody was used at this facility and none of the inmates interviewed had been placed in restrictive housing for their protection from sexual abuse. Conclusion: The Auditor reviewed facility policy and documentation, conducted interviews, and made observations. The Auditor determined the facility meets this standard.

115.71	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.71 Criminal and Administrative Agency Investigations Materials, Interviews and Other Evidence Reviewed: Investigator BLET Certifications Interviews PAQ Uniform Evidence Protocol Policy JOM 466 Sexual Misconduct/PREA

	General Order (04) Discipline, Internal Investigations and Employee Rights NIC Specialized Training Certificates Investigations Policy JOM 466.6.F-Investigators Responsibility BCDC directives are written in accordance with Standard 115.71 and states that all investigations into allegations of sexual abuse and sexual harassment will be conducted thoroughly and objectively to include third party and anonymous reports. The policy states that when an allegation of sexual abuse or sexual harassment is received, whether reported verbally or in writing, it will be investigated. Staff will ensure all allegations criminal in nature are referred in accordance with policy and in conjunction with the facility's administrative investigation. Referrals to law enforcement will be documented in the facility's investigative report, PREA investigation, and electronic database. Policy prohibits the termination of an investigation if an inmate is released, or a staff member is terminated or resigns. The facility is required to maintain written investigative reports for as long as the alleged abuser is incarcerated or employed by the facility, plus an additional time in accordance with BCDC directives. The Jailer will refer the allegation no later than 72 hours after being reported, creating an entry for each PREA incident. Facility policy requires that reports, regardless of their source of origination, be referred for investigation. BCDC conducts investigations on all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports. It is the responsibility of the Brunswick Sheriff Department, with the assistance of facility investigators to gather and preserve circumstantial evidence, physical evidence, and DNA evidence. Investigators will interview victims, perpetrators, witnesses, and review prior reports of sexual abuse involving parties named. Staff acknowledged that investigations are required to be initiated within 72 hours of being reported and the facility practice is less than 24 hours. All reports of sexual abuse and sexual harassment, including anonymous or third-party reports, are investigated in the same manner as those allegations that have been directly reported at the facility. Credibility assessments are conducted as part of the investigative process by the investigators on all parties involved. Conclusion: The Auditor reviewed directives, conducted interviews, and determined the facility meets requirements for this standard.

115.72	**Evidentiary standard for administrative investigations**

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.72 Evidentiary Standard for Administrative Investigations Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466 -Investigations - Inquiries and Administrative Investigations General Order (04) Discipline, Internal Investigations and Employee Rights PAQ Interview Investigation Packet BCDC policy follows the requirements of Standard 115.72 and imposes no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Interviews with the facility investigator and PC confirmed that staff responsible for administrative adjudication of investigations are knowledgeable of the requirements for the evidentiary standard. Investigators interviewed were able to define what preponderance meant and how they arrived at the basis of case determinations. The Auditor reviewed investigation files that included documentation of case outcomes. Conclusion: Based on policy review, investigative file review, and interviews, the Auditor determined the facility meets the requirements of this standard.

115.73	**Reporting to inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.73 Reporting to Inmates Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Investigations - Inquiries and Administrative Investigations Policy 466.8.-Sexual Misconduct Incident Reviews

	Interviews Policy 466.8.G-After Action Follow-up with Victims PAQ BCDC policy is written in accordance with Standard 115.73 which requires that an inmate be notified when a PREA allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Facility directives state that following an investigation of an allegation that an inmate suffered sexual abuse in a facility, the Jailer will provide the inmate notification in writing as to whether the allegation has been substantiated, unsubstantiated, or unfounded. Following an allegation that a staff member committed sexual abuse against an inmate, the facility will inform the inmate of their determination, and such notifications will be documented. If a notification is unable to be provided, the attempts will be documented as well as the rationale for the inability to notify, and a copy of the notification attempt will be maintained. The facility's obligation to provide notification as outlined in this section will terminate if the inmate is paroled, discharged from their sentence, vacated, or pardoned. The facility investigator is responsible for preparing the Notification of Outcome of Allegation form and presenting it to the alleged victim for a signature. The inmate receives a copy of the form, and a copy is forwarded to the PREA coordinator. BCDC staff stated inmates would be notified regarding investigative findings, disciplinary actions, staff re-assignment, change of work venue, indictments, or convictions of staff. Document reviews and interviews with the PC, administrative staff, investigators, and inmates, verified notifications would be made as required by policy. Conclusion: The Auditor determined the facility meets compliance with the standard.

115.76	**Disciplinary sanctions for staff**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 Disciplinary Sanctions for Staff Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466 - Investigations - Inquiries and Administrative Investigations Interviews

	Policy JOM 466.6.C- Staff Misconduct Policy JOM 466.9.A-Corrective and Disciplinary Actions PAQ BCDC directives were reviewed and are following the requirements of Standard 115.76. Policy states that staff found guilty of violations are subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policies. Policy requires that staff found responsible for sexual abuse of an inmate should be terminated from employment and employees who are found to have violated PREA policy but not actually engaging in sexual abuse will be disciplined in a manner commensurate with nature and circumstances of the acts. BCDC directives state that termination is the presumptive action for employees that are found to have a substantiated case of sexual abuse against them. These cases will be referred for criminal prosecution and will be reported to any relevant licensing bodies. Additionally, disciplinary sanctions will take into consideration the staff member's disciplinary history, sanctions imposed for similar offenses by other staff, and the nature of the acts committed. The Jailer stated that if a staff member is terminated for violating the facility's sexual abuse or harassment directives, the case would be referred for criminal prosecution if criminal in nature. The facility investigator and PC verified that if an employee under investigation resigns before the investigation is complete, or resigns in lieu of termination, the resignation does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature. The facility would still refer the case for prosecution when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment. The Auditor reviewed the facility's policy which included a provision to notify the SBI of criminal violations of sexual abuse and require the PC notify relevant licensing bodies. The Auditor determined the facility has appropriate policies and practices in place, which ensure staff are disciplined for violating the facility's sexual abuse and sexual harassment policies. The facility makes termination the presumptive discipline measure for engaging in acts of sexual abuse and reports violations of sexual abuse to relevant licensing bodies. Conclusion: The Auditor determined the facility meets compliance with the standard

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

	115.77 Corrective Action for Contractors and Volunteers Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Interviews Policy JOM 466.6.C- Staff Misconduct Policy JOM 466.9.A-Corrective and Disciplinary Actions Staff Rosters PAQ BCDC hold both contractors and volunteers to the same standards as employees directly hired by the facility when disciplinary action for engaging in sexual abuse and sexual harassment is conducted. Therefore, any contractor or volunteer engaging in these behaviors would be terminated or prohibited from entering a BCDC facility. Facility policies contain specific language to provide consideration for terminating contracts and prohibiting further contact with inmates in the cases of PREA sexual abuse and sexual harassment policy violations. Contractual employees' allegations of employee misconduct are documented and an investigation is conducted. Conduct of this nature by volunteers or contractors is reported to relevant licensing bodies and the contracting agency may perform a separate investigation and terminate the employee. Whether a contractual employee should remain at the facility will be determined by the Jailer and will vary depending on the severity of the alleged misconduct. Once an investigation is initiated involving a contractual employee, the contract monitor will be notified by BCDC staff and contractual employees who are the subject of the investigation are permitted to have representation during the investigatory interview. The investigator will advise the employee to arrange a date and time that does not delay the investigation. The contractual employee is responsible for obtaining their representative and that person cannot be a BCDC employee. The Jailer confirmed that any contractor or volunteer who violates sexual abuse or sexual harassment policies would be removed from the facility and would have their security clearance revoked immediately. Contract staff could be terminated by the contract employer and if the conduct is criminal in nature and will be referred to the State Bureau of Investigations(SBI) for investigation and prosecution. Conclusion: The Auditor reviewed documentation, directives, and interviewed staff. The Auditor determined the facility meets compliance with the standard.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.78 Disciplinary Sanctions for Inmates Policy, Materials, Interviews and Other Evidence Reviewed: Interview Inmate Handbook Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention The BCDC has zero tolerance for inmate sexual harassment, assault, or abuse. Facility policy states that consensual sexual activity among inmates is prohibited and if an inmate is found to have engaged in sexual activity, the inmate will be subject to disciplinary action. If an inmate reports sexual abuse and the report is made in good faith based upon a reasonable belief that the alleged conduct occurred, they will not be charged for reporting if it is determined to be unfounded. If it is determined that the inmate did commit sexual abuse in the correctional setting, they will be subject to disciplinary sanctions commensurate with the level of the infraction. In addition to potential disciplinary segregation, inmates may have their custody levels raised or may be transferred to another location as determined. The Auditor found no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment in good faith. The facility will take into consideration the inmate's mental stability when considering the appropriate type of sanction to be imposed and underlying reasons or motivations. Conclusion: Based on policy review and interviews, the Auditor determined the facility meets the requirements of this standard.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.81 Medical and Mental Health Screenings; History of Sexual Abuse Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM-466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention

	Policy JOM 466.8.A-Risk Screening 14 Day Referral Interviews Consent form Policy JOM 466.7- Victim Treatment Services Vital Core Policy B-5-Response to Sexual Abuse Inmate Classification Initial Assessment BCDC policy states that if a PREA risk assessment or review indicates an inmate has experienced prior sexual victimization, staff will ensure the inmate is referred for a follow-up meeting with a medical practitioner within fourteen calendar days of the intake screening. Inmates identified as having a history of physical or sexual abuse, or who pose a reasonable concern that they may be sexually victimized while incarcerated due to age, physical stature, history, or physical or mental disabilities, will be referred. An intake screening form documenting the history of sexual abuse is to be completed by staff as part of the initial inmate screening process. All inmates will have access to health services as described in this policy, regardless of custody level or security classification. If a referral is initiated, a mental health staff will be made available to provide mental health services. Inmates in need of mental health care are identified in a timely manner, have reasonable access to care, and be afforded continuity of care, including aftercare planning, and follow-up as indicated. BCDC staff will identify and monitor inmates who are at risk of sexual victimization, as well as those who have a history of sexual assaultive behavior. An inmate whose health care needs cannot be met at the facility will be transferred to a facility where specialized care can be provided. A review of inmate files indicated the screenings were being conducted in accordance with policy. Files of inmates who were identified as needing follow-up care, had been evaluated by medical staff and confidentiality forms were present. Medical staff and mental health staff confirmed that if an inmate reveals previous victimization, they are referred to mental health, and the inmate is offered a return meeting. The facility displayed signage throughout the departments, which explains the limitations of confidentiality and displayed in each medical department. An interview with the staff confirmed that information related to sexual victimization and sexual abusiveness is kept secure and confidential. The confidential information is limited access and only used to make housing, bed, work, education, and other program assignments. Conclusion: Based on interviews with medical staff, mental health, and document review, the Auditor determined the facility meets requirements of this standard.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.82 Access to Emergency Medical and Mental Health Services Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Risk Screenings Interviews Vital Core Policy B-5 Responding to Sexual Abuse Vital Core Policy A-01- Access to Care The BCDC policy is written in compliance with Standard 115.82 and states that all inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. In accordance with the health services directives, inmate victims of sexual abuse will receive timely emergency medical treatment and crisis intervention services determined by medical staff. If a qualified medical or mental health staff are not on duty at the time an allegation is made, custody staff first responders will take preliminary steps to protect the victim in accordance with the protective directives and will immediately provide notification to the appropriate medical and mental health staff. Inmate victims of sexual abuse while incarcerated will be offered information relevant to emergency contraception and sexually transmitted infections prophylaxis. Treatment services will be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with the facility investigation. Interviews with medical staff confirm that victims of sexual abuse would receive timely, unimpeded access to medical services and staff are aware of their responsibilities regarding protection of the victim. Psychology staff will initiate contact with the victim and provide evaluation and treatment as appropriate. For services that are outside the scope of their duties, the inmate will be treated at the local hospital. A crisis support representative is available through Coastal Horizons at the request of the inmate to provide emotional support services and accompany the inmate to the hospital. BCDC directives states that forensic examinations will be performed by Sexual Assault Forensic Examiners or Sexual Assault Nurse Examiners, without a financial cost to the victim. Interviews with medical staff confirm that inmate victims of sexual abuse would not be charged for services received because of a sexual abuse incident. The facility directives state that an inmate, who is alleged to have been sexually

	abused less than 120 hours previously and where forensic evidence may be present, will be transported to a local hospital for a forensic medical examination. If a SAFE or SANE cannot be made available, the examination can be performed by qualified medical practitioner, and the facility will document its efforts to provide the examination. A copy of the PREA forensic examination completed by medical staff at the hospital and any notes evidencing the facility's efforts will be maintained with the investigation packet. When the incident is alleged to have occurred more than 120 hours prior then the report of the allegation, a forensic examination is not required. However, the inmate will be referred to health care and mental health services in accordance with policy. Review of facility investigations confirmed that the facility has an established practice of providing timely and unimpeded access to emergency medical and crisis intervention. Interviews with facility staff indicate their awareness of the provisions of the standard and their responsibilities. The Auditor noted that inmate victims of sexual abuse are provided timely and unimpeded access to medical, mental health care and crisis intervention services at no expense. Conclusion: Staff interviews verified the medical services are provided regardless of the inmates' cooperation with the investigation. The Auditor determined the facility meets compliance for this standard.

115.83	**Ongoing medical and mental health care for sexual abuse victims and abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.83 Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Vital Core Policy B-5Responding to Sexual Abuse Vital Core Policy A-01-Access to Care Interviews

	The facility policy is written in compliance with Standard 115.83 which states that the facility will offer medical and mental health treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims will include follow-up services, treatment plans, and referrals for continued care following their transfer or release. Interviews with medical and mental health staff confirm that these services would be available to inmates who have been victims of sexual abuse, and these services would be consistent with the community level of care. BCDC policies state that 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 practitioner's judgment. Policy requires treatment services to be consistent with the community level of care and provided without financial costs regardless of whether the victim names the aggressor or cooperates with any investigation arising out of the incident. If qualified medical or mental health practitioners are not on duty at the time of a report of recent sexual assault, first responders will take preliminary steps to protect the victim and will immediately notify the shift supervisor. Forensic and sexual assault exams are to be conducted by a qualified professional. Auditors found that appropriate referrals and treatment are being completed in accordance with the standard. Interviews with the health services staff confirmed that inmate victims of sexual assault would be assessed immediately and a determination made if they needed to be transferred to the local hospital. First responders would ensure inmate medical needs would be addressed and no evidence was destroyed. A physician would examine an alleged inmate victim and make appropriate decisions to treat any injuries, infections, STIs, or other medical concerns. BCDC policy states that when learning of inmate-on-inmate abusers, the mental health staff will conduct a mental health evaluation of the abuser's history and offer treatment as deemed appropriate. The Auditor reviewed documentation provided by the facility of services and mental health care for inmates identified as victims. The Auditor interviewed medical staff who confirmed that counseling sessions, referrals if appropriate, and continuation services are provided. Conclusion: The Auditor reviewed policies, procedures, inmate records, and conducted interviews to determine the facility meets the requirements of this standard.

115.86	**Sexual abuse incident reviews**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.86 Sexual Abuse Incident Reviews Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466.6-PREA Investigations SAIR Review Incident Review Team Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Interviews BCDC policy requires review of all substantiated or unsubstantiated allegations of sexual abuse. Policy states that the facility PC will coordinate a sexual abuse incident review at the conclusion of every sexual abuse investigation unless the allegations are determined to be “Unfounded.” The review team consists of upper-level custody and administrative staff, with input from departmental supervisors, investigators, and medical practitioners. An interview with the PC confirmed that a report of the findings, including recommendations for improvement, is completed and submitted in the final report. The PC stated that the review team would review the investigative report, video, investigation reports, and submit to the Jailer for recommendations. Administrative and criminal investigations are completed on all allegations of sexual abuse. The PC stated that any recommendations would be implemented, or the reasons for not doing so would be documented. A written report of the findings is prepared and maintained by the facility PC. Conclusion: Review of incident review forms and interviews with the Jailer, PC, and review team member, confirmed compliance. The Auditor determined the facility meets requirements for this standard.

115.87	**Data collection**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.87 Data Collection The facility maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Policy, Materials, Interviews and Other Evidence Reviewed:

	Pre-Audit Questionnaire BCDC Website: www.Brunswicksheriff.com Interviews Policy JOM 466 -Abuse/Sexual Harassment Prevention and Intervention BCDC policies are consistent with the requirements of Standard 115.87 and states that the facility will collect uniform data annually for allegations of sexual abuse to be used to answer questions from the most recent version of the Survey of Sexual Violence and complete an annual report based upon the statical data collected. It outlines the data collection process and states that allegations of sexual abuse reported to have occurred within the facility will be entered into the BCDC database. Additionally, it indicates that the facility PREA coordinator gathers data on each reported incident to aggregate an annual report which includes data necessary to complete the SSV. Policy directives contain the definitions used to collect data at the facility and the PC is responsible for reporting institutional data. The Auditor requested that an Annual Report be made available on the facility website. The annual report should be approved by the facility administrative staff and the PC prior to publishing on the facility's website. The facility maintains, reviews, and will establish a collection of data from all available incident-based documents, reports, investigation files, and sexual abuse incident reviews as required. Data will be supplied to the Department of Justice no later than June 30th of each year, if requested. The PAQ indicated that the facility’s annual report had not been made available to the public through the facility website. An Auditor interview with the PC confirmed that the annual report will be published on the facility website after the Jailers’ approval. The facility may redact specific material from the report when it presents a clear and specific threat to the safety or security of the facility. A review of the website verified the annual report had been posted as advised. Conclusion: The Auditor reviewed the website, documents, and conducted interviews. The Auditor determined the facility is compliant with this standard.

115.88	**Data review for corrective action**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.88 Data Review for Corrective Action Policy, Materials, Interviews and Other Evidence Reviewed:

	PAQ Policy JOM 466 -Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Annual Reports BCDC Website Interviews The facility PAQ indicates that the facility will review data annually to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training. The review includes identifying problem areas, taking corrective action, and preparing an annual report that includes any corrective action. The interview with the PC indicated that data will be utilized to assess and improve the facility's PREA safety practices. This includes reviews of sexual abuse incidents, SSV, and annual review by the Jailer. This information identifies trends and helps to improve procedures and practices. The identification of trends, reoccurring issues, or problematic areas are a priority and if discovered, corrective action is initiated. An Auditor interview with the PC confirmed that the annual report is published on the facility website after the Jailers' approval. The facility may redact specific material from the report when it presents a clear and specific threat to the safety or security of the facility. A review of the website verified the annual report has been posted. Conclusion: The Auditor reviewed the website, documents, and conducted interviews. The Auditor determined the facility is compliant with this standard.

115.89	**Data storage, publication, and destruction**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.89 Data Storage, Publication, and Destruction Policy, Materials, Interviews and Other Evidence Reviewed: Policy JOM 466- Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention BCDC Website Interviews BCDC policies mandate aggregated sexual abuse data from facilities under its direct

	control and private facilities with which contracts are securely maintained. BCDC directives are written in accordance with Standard 115.89 and that data collected pursuant to 115.87 will be made readily available to the public through the facility's website excluding all personal identifiers after approval. The directives state the facility will ensure all data collected is securely retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. The PC stated that all electronic data is maintained in a centralized system, and all paper files are secured. The Auditor reviewed the Facility website and found no annual reports posted. The facility PC is responsible for reporting institutional data to the Jailer and posting the annual report on their website. Aggregated sexual abuse data for the facility's annual report is compiled from investigative files, incident reviews, and other relevant documents. Conclusion: The Auditor reviewed the website, documents, and conducted interviews. The Auditor determined the facility is compliant with this standard.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401 Frequency and Scope of Audits Policy, Materials, Interviews and Other Evidence Reviewed: Interviews Institutional tour Documentation Review PAQ The Auditor had access to all areas of the facility and was permitted to receive and copy any relevant policies, procedures, or documents requested. The Auditor conducted private interviews and was able to receive confidential information/ correspondence from inmates. Policies and secondary documentation were provided before the onsite tour and post audit. The facility staff facilitated the interviews in a timely and efficient manner and informal interviews with inmates confirmed that they were aware of the audit and the ability to communicate with the Auditors.

	Prior to the on-site review, emails with the Auditor’s contact information were sent to the facility to be posted advising of the audit. These notices were sent to the facility and facility staff for posting six weeks prior to the onsite visit and were observed posted in various areas of the facility during the audit tour. Conclusion: The Auditor finds this standard to be compliant and meets requirements.

115.403	**Audit contents and findings**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 Audit Contents and Findings The report for BCDC is publicly available at www.Brunswicksheriff.com

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

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

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

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

	facility does not have female inmates.)	
115.15 (c)	**Limits to cross-gender viewing and searches**	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	**Limits to cross-gender viewing and searches**	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.16 (a)	**Inmates with disabilities and inmates who are limited English proficient**	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes

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

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

	consent or refuse?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	**Hiring and promotion decisions**	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	**Hiring and promotion decisions**	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	**Hiring and promotion decisions**	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	**Hiring and promotion decisions**	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	**Hiring and promotion decisions**	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have	yes

	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?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	**Hiring and promotion decisions**	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	**Hiring and promotion decisions**	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	**Upgrades to facilities and technologies**	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	**Upgrades to facilities and technologies**	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	**Evidence protocol and forensic medical examinations**	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the	yes

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (b)	**Evidence protocol and forensic medical examinations**	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	**Evidence protocol and forensic medical examinations**	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	**Evidence protocol and forensic medical examinations**	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na

	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	**Evidence protocol and forensic medical examinations**	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	**Evidence protocol and forensic medical examinations**	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	**Evidence protocol and forensic medical examinations**	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
115.22 (a)	**Policies to ensure referrals of allegations for investigations**	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	**Policies to ensure referrals of allegations for investigations**	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes

	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	**Policies to ensure referrals of allegations for investigations**	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	**Employee training**	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates’ right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with	yes

	inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	
115.31 (b)	**Employee training**	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	**Employee training**	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	**Employee training**	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	**Volunteer and contractor training**	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	**Volunteer and contractor training**	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	**Volunteer and contractor training**	

	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	**Inmate education**	
	During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	**Inmate education**	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	**Inmate education**	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate’s new facility differ from those of the previous facility?	yes
115.33 (d)	**Inmate education**	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes

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

	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	**Specialized training: Medical and mental health care**	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	**Specialized training: Medical and mental health care**	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	**Specialized training: Medical and mental health care**	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental	yes

	health care practitioners who work regularly in its facilities.)	
115.35 (d)	**Specialized training: Medical and mental health care**	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	**Screening for risk of victimization and abusiveness**	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	**Screening for risk of victimization and abusiveness**	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	**Screening for risk of victimization and abusiveness**	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	**Screening for risk of victimization and abusiveness**	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate’s own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	**Screening for risk of victimization and abusiveness**	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	**Screening for risk of victimization and abusiveness**	
	Within a set time period not more than 30 days from the inmate’s arrival at the facility, does the facility reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate’s risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate’s risk level when warranted due to a request?	yes
	Does the facility reassess an inmate’s risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate’s risk level when warranted due to receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness?	yes
115.41 (h)	**Screening for risk of victimization and abusiveness**	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	**Screening for risk of victimization and abusiveness**	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate’s detriment by staff or other inmates?	yes
115.42 (a)	**Use of screening information**	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Education Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	**Use of screening information**	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (d)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (e)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (f)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (g)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.43 (a)	**Protective Custody**	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	**Protective Custody**	
	Do inmates who are placed in segregated housing because they	yes

	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
115.43 (c)	**Protective Custody**	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	**Protective Custody**	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility’s concern for the inmate’s safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation	yes

	can be arranged?	
115.43 (e)	**Protective Custody**	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	**Inmate reporting**	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	**Inmate reporting**	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	**Inmate reporting**	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	**Inmate reporting**	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	**Exhaustion of administrative remedies**	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	**Exhaustion of administrative remedies**	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	**Exhaustion of administrative remedies**	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	**Exhaustion of administrative remedies**	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

	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.)	
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	**Exhaustion of administrative remedies**	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate’s decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	**Exhaustion of administrative remedies**	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days?	yes

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency’s final decision document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	**Exhaustion of administrative remedies**	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	**Inmate access to outside confidential support services**	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	**Inmate access to outside confidential support services**	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	**Inmate access to outside confidential support services**	
	Does the agency maintain or attempt to enter into memoranda of	yes

	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	**Third-party reporting**	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	**Staff and agency reporting duties**	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	**Staff and agency reporting duties**	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	**Staff and agency reporting duties**	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner’s duty to report, and the limitations of	yes

	confidentiality, at the initiation of services?	
115.61 (d)	**Staff and agency reporting duties**	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	**Staff and agency reporting duties**	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	**Agency protection duties**	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	**Reporting to other confinement facilities**	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	**Reporting to other confinement facilities**	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	**Reporting to other confinement facilities**	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	**Reporting to other confinement facilities**	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	**Staff first responder duties**	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	**Staff first responder duties**	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	**Coordinated response**	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	**Preservation of ability to protect inmates from contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency’s behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency’s ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	**Agency protection against retaliation**	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate	yes

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	**Agency protection against retaliation**	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	**Agency protection against retaliation**	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	**Agency protection against retaliation**	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	**Agency protection against retaliation**	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	**Post-allegation protective custody**	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	**Criminal and administrative agency investigations**	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/ facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	**Criminal and administrative agency investigations**	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	**Criminal and administrative agency investigations**	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	**Criminal and administrative agency investigations**	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	**Criminal and administrative agency investigations**	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual’s status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	**Criminal and administrative agency investigations**	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	**Criminal and administrative agency investigations**	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	**Criminal and administrative agency investigations**	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	**Criminal and administrative agency investigations**	

	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	**Criminal and administrative agency investigations**	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	**Criminal and administrative agency investigations**	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	**Evidentiary standard for administrative investigations**	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	**Reporting to inmates**	
	Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	**Reporting to inmates**	
	If the agency did not conduct the investigation into an inmate’s allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	**Reporting to inmates**	
	Following an inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate’s unit?	yes
	Following an inmate’s allegation that a staff member has	yes

	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?	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	**Reporting to inmates**	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	**Reporting to inmates**	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	**Disciplinary sanctions for staff**	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	**Disciplinary sanctions for staff**	
	Is termination the presumptive disciplinary sanction for staff who	yes

	have engaged in sexual abuse?	
115.76 (c)	**Disciplinary sanctions for staff**	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	**Disciplinary sanctions for staff**	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	**Corrective action for contractors and volunteers**	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	**Corrective action for contractors and volunteers**	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	**Disciplinary sanctions for inmates**	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	**Disciplinary sanctions for inmates**	

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	**Disciplinary sanctions for inmates**	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	**Disciplinary sanctions for inmates**	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	**Disciplinary sanctions for inmates**	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	**Disciplinary sanctions for inmates**	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	**Disciplinary sanctions for inmates**	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
115.81 (b)	**Medical and mental health screenings; history of sexual abuse**	

	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	na
115.81 (c)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	**Medical and mental health screenings; history of sexual abuse**	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	**Medical and mental health screenings; history of sexual abuse**	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	**Access to emergency medical and mental health services**	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	**Access to emergency medical and mental health services**	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	**Access to emergency medical and mental health services**	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	**Access to emergency medical and mental health services**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If pregnancy results from the conduct described in paragraph §	yes

	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.)	
115.83 (f)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na
115.86 (a)	**Sexual abuse incident reviews**	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	**Sexual abuse incident reviews**	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	**Sexual abuse incident reviews**	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	**Sexual abuse incident reviews**	

	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	**Sexual abuse incident reviews**	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	**Data collection**	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	**Data collection**	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	**Data collection**	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	**Data collection**	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports,	yes

	investigation files, and sexual abuse incident reviews?	
115.87 (e)	**Data collection**	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	**Data collection**	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.88 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	**Data review for corrective action**	
	Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse?	yes
115.88 (c)	**Data review for corrective action**	
	Is the agency’s annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	**Data review for corrective action**	
	Does the agency indicate the nature of the material redacted	yes

	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?	
115.89 (a)	**Data storage, publication, and destruction**	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	**Data storage, publication, and destruction**	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	**Data storage, publication, and destruction**	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	**Data storage, publication, and destruction**	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	**Frequency and scope of audits**	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	no
115.401 (b)	**Frequency and scope of audits**	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by	na

	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.)	
115.401 (h)	**Frequency and scope of audits**	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	**Frequency and scope of audits**	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	**Frequency and scope of audits**	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	**Frequency and scope of audits**	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	**Audit contents and findings**	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	na