### **PREA Facility Audit Report: Final**

Name of Facility: Mountrail County Correctional Center

Facility Type: Prison / Jail

**Date Interim Report Submitted:** 06/02/2021 **Date Final Report Submitted:** 11/05/2021

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.		V	
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: Melinda Allen  Date of Signature: 11/05/2021			

AUDITOR INFORMATION		
Auditor name:	Allen, Melinda	
Email:	preaaudit@gmail.com	
Start Date of On-Site Audit:	05/14/2021	
End Date of On-Site Audit:	05/14/2021	

FACILITY INFORMATION		
Facility name:	Mountrail County Correctional Center	
Facility physical address:	101 N Main Street, Stanley, North Dakota - 58784	
Facility Phone		
Facility mailing address:	PO BOX 155, Stanley, North Dakota - 58784	

Primary Contact	
Name:	Laurie Johnson
Email Address:	ljohnson@co.mountrail.nd.us
Telephone Number:	7016288900

Warden/Jail Administrator/Sheriff/Director		
Name: Laurie Johnson		
Email Address:	ljohnson@co.mountrail.nd.us	
Telephone Number:	7016288900	

Facility PREA Compliance Manager		
Name: Laurie Johnson		
Email Address:	ljohnson@co.mountrail.nd.us	
Telephone Number:	M: 701-628-8900	

Facility Characteristics		
Designed facility capacity:	42	
Current population of facility:	6	
Average daily population for the past 12 months:	1	
Has the facility been over capacity at any point in the past 12 months?	No	
Which population(s) does the facility hold?	Both females and males	
Age range of population:	18+	
Facility security levels/inmate custody levels:	Low risk - high risk	
Does the facility hold youthful inmates?	No	
Number of staff currently employed at the facility who may have contact with inmates:	18	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	1	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	2	

AGENCY INFORMATION	
Name of agency:	Mountrail County Board of Commissioners
Governing authority or parent agency (if applicable):	
Physical Address:	101 N Main Street, Stanley, North Dakota - 58784
Mailing Address:	PO BOX 155, Stanley, North Dakota - 58784
Telephone number:	701-682-8900

Agency Chief Executive Officer Information:		
Name: Laurie Johnson		
Email Address:	ljohnson@co.mountrail.nd.us	
Telephone Number:	7016288900	

Agency-Wide PREA Coordinator Information			
Name:	Terra Grundvig	Email Address:	tgrundvig@co.mountrail.nd.us

#### **AUDIT FINDINGS**

#### Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The auditor, Melinda Allen, is an independent contractor that contracted directly with the Mountrail Community Correctional Center (MCCC) to audit the correctional Center. The facility is located in Stanley, North Dakota. The audit was scheduled to take place May 14-17, 2021.

Several interviews were handled off-site to include SANE, Medical, and Mental Health since they would not be available during the on-site phase of the audit. MCCC has been audited once before, in 2018. The contract for this audit was signed on December 13, 2019. The audit was initially scheduled to be completed in 2020 but was rescheduled due to COVID-19. There were no other barriers to the completion of the audit

#### 1. Pre-Onsite Audit Phase

During the pre-audit phase, the auditor conducted a review of the Pre-Audit Questionnaire (PAQ) as well as other documentation provided by the facility through May 5, 2021. The auditor also reviewed MCCC's Annual PREA Reports for 2019 and 2020, their public website, and other related PREA information.

During the pre-onsite audit phase, the auditor participated in multiple telephone calls and exchange of emails with the agency's PREA Correctional Administrator. The calls and email discussions centered around the auditor's unimpeded access to every area of the facility, document and record review, and interviews with the staff, volunteers, contractors, and inmates. Additionally, an overview of the audit process, the audit goals, audit expectations and were discussed. The calls and emails also provided an opportunity to discuss points of contact, communications, logistics, and timelines. The Process Map was provided to the Agency on May 4, 2021.

#### Notice of Audit Posting:

The Notice of the audit posting was in both English and Spanish and posted on March 17, 2021. The facility provided a sampling of pictures of the audit posting throughout the facility. The English version stated:

The Mountrail Community Correctional Center will be undergoing an audit for compliance with the United States Department of Justice's National PREA Standards to Prevent, Detect, and Respond to Prison Rape under the Prison Rape Elimination Act (PREA) for jails during the following period, May 14 – May 17, 2021.

Any person with information relevant to this compliance audit may confidentially\* correspond with the auditor via the following address:

#### Melinda Allen

P.O. Box 703 Braselton, GA 30517

\*CONFIDENTIALITY – All written and verbal correspondence and disclosures provided to the designated auditor are confidential and will not be disclosed unless required by law. There are exceptions when confidentiality must be legally breached. Exceptions include, but are not limited to the following:

- · if the person is an immediate danger to her/himself or others (e.g. suicide or homicide);
- · allegations of suspected of child abuse, neglect, or maltreatment;
- · in legal proceedings where information has been subpoenaed by a court of appropriate jurisdiction.

This statement was translated into Spanish and posted also throughout the facility. MCCC sent the auditor photographic proof of the posting of the Notices of Audit. The facility was advised to treat any mail addressed to the auditor as legal mail to ensure confidentiality. The auditor did not receive any letters of correspondence before the audit as a result of the audit notice postings as of the start of the onsite audit.

#### B. Timeline:

A kickoff meeting was held with the MCCC on January 6, 2021. The kickoff meeting included a discussion of logistics for access to the facility and involved the need for unimpeded access to all areas of the facility and access to documents and staff for an interview. A review of the in-brief purpose and process was discussed during the kickoff meeting. A scheduled review of the audit was completed with the PREA Compliance Manager and included scheduling, the process and timelines for the interim report, corrective action, and recommendations. The agency and auditor decided to use the online audit system (OAS) to complete the audit. The facility initiated the online audit on March 24, 2021. The process map was sent to MCCC on May 4, 2021, to use as a guideline in the process.

The PAQ was completed by the facility on April 16, 2021. The auditor reviewed the PAQ and the supporting documents provided before the

on-site audit. Several gaps of information were noted and an email was sent requesting the documents be provided to the auditor. An issue log was not created as the auditor and the PREA Compliance Manager discussed the file size and nature of documents Some of the documents were sent in advance of the audit while others were secured during the on-site audit. It was agreed that the remaining files would be secured while on-site.

The auditor requested a variety of lists from the facility in advance of the audit to include the following:

- · Housing Roster
- · Youthful inmates
- An inmate with disabilities or Limited English Proficient Inmates LGBTQI Inmates
- Inmates in Segregation Housing
- · Residents in Isolation
- Inmates who reported Sexual Abuse
- Inmates who reported sexual victimization during Risk Screening Staff Roster
- Medical Roster
- · Specialized Staff Identified
- . Contractors and Volunteers that have contact with Inmates Grievances from the prior 12 months
- Incident reports from the prior 12 months
- All allegations of sexual abuse or sexual harassment in the 12 months preceding the audit List of inmates determined to be at risk of sexual abuse
- A list of hotline calls
- · List of inmates determined to be at heightened risk of sexual abusiveness
- A reiteration of all Sexual Abuse or Sexual Harassment incidents for the prior 12 months. (detailed below).

C. Research: On May 4, 2021, the auditor researched MCCC to ascertain if there were articles and information regarding PREA-related news or events and accomplishments. The auditor did not locate any articles, regarding alleged sexual misconduct at the facility.

The facility's 2019, and 2020 annual reports posted to its public website were reviewed as well as the agency's PREA information on their website to include how to file a third-party report.

The auditor reviewed the mandatory reporting laws for North Dakota to ascertain who is mandated to report abuse or neglect of a vulnerable adult. This publication organizes the information in a user-friendly format and expressly demonstrates all staff members of the MCCC are mandatory reporters in the state of North Dakota: https://www.nd.gov/dhs/info/pubs/docs/aging/fact-sheet-mandatory-reporting.pdf

D. External Contacts: External organizations were contacted before the on-site audit phase including Just Detention International (JDI), Domestic Violence Crisis Center (DVCC), and Trinity Medical.

Just Detention International reported having not received any information regarding sexual safety at the Mountrail Community Correctional Center (MCCC) in the last 12 months. MCCC, who has an MOU with DVCC NWND to provide emotional support services, 24/7 crisis support line, specialized counseling, accompany victims to the hospital for forensic medical examinations, and provides notification of allegations of sexual abuse and sexual harassment originating within the jail to MCCC officials was contacted via email and responded to the auditor's request for an interview.

#### E. Listing of Allegations:

The MCCC has three certified PREA investigators who conduct and are responsible for administrative investigations. Administrative cases involving staff may be conducted by the MCCC Investigators and Criminal investigations are conducted by the North Dakota Bureau of Criminal Investigation (BCI) During the onsite audit phase, the facility reported the following:

Allegation Type	Substantiated	Unsubstantiated	Unfounded	Pending
Inmate on Inmate Sexual Harassment	0	0	0	0
Inmate on Inmate Sexual Abuse	0	0	0	0
Staff on Inmate Sexual Harassment	0	0	0	0
Staff on Inmate Sexual Abuse	0	0	0	0

2. Onsite Audit Phase

The rated capacity of the facility is 42 inmates. On May 14, 2021, the first day of the onsite audit, the inmate population of the facility was 14 inmates.

MCCC is made up of one building and houses all custody levels. There are a total of four housing units that are multiple occupancy cells. The facility has a designed capacity of 42 inmates.

#### Site Review:

The auditor arrived at MCCC on May 14, 2021, at 07:30 am and met the Correctional Administrator/PREA Coordinator and PREA Compliance Manager. The public access staff verified the identification of the auditor escorted her into the facility. At 7:45 am an in-brief meeting was held in the conference area, attended by members of the facility and the auditor. During the meeting, the auditor explained the audit process and expectations. MCCC leadership in attendance included Correctional Administrator Laurie Johnson and PREA Compliance Manager Grundvig. Following the in-brief, the auditor was escorted by the MCCC staff for an extensive site review of the facility. The facility is comprised of one building. There are a variety of housing units in the facility. All cells are multi-celled. The units were double-cell units with open day room spaces. A gymnasium is available for inmates to exercise. In most units, the toilets are in a separate area within the unit and have barrier walls for privacy as well as a partial door to the housing area affording the inmate's privacy. In the shower area, doors and shower curtains were observed as having the capability to prevent cross-gender viewing from camera angles as well. The ISO/segregation unit cells have toilets within the cells. It was noted that throughout the site review cross-gender announcements were generally being made by staff. At times, the staff involved in the tour made the announcements.

The auditor toured and reviewed the following locations/areas:

- Administration
- Intake- no inmates were being processed at the time. The auditor asked the intake staff to walk her through the entire booking
  process from intake, screening, classification to housing assignment, and also discussed the grievance and mail process. A
  language line is available for interpretation services.
- Central Control
- Kitchen (No inmates are used in the kitchen)
- · Programs Area
- Laundry
- Gymnasium
- Visitation
- Classroom
- Attorney's Visitation
- Segregation ISO Units
- Classification- staff was interviewed to discuss the classification process and how they utilize the risk screening assessment in determining housing placement.
- Housing units. The facility has four housing areas. There are 21 multiple occupancy cells, and five segregation cells in the facility. In
  a typical housing area, inmates have private toilets and showers. The facility has a robust video monitoring system of 101 cameras
  that record up to forty-five days depending on the activity in the area. No privacy issues were observed in the facility. The auditor
  observed PREA Posters and information in each housing unit.
- The facility does have access to a language line for interpretation services for non-English speaking inmates.

The auditor observed processes and talked with the staff at intake to observe the procedure for booking, intake, classification, property, searching, PREA education, and screening protocols while the inmates are being processed into the jail. She observed and reviewed camera placement, potential cross-gender viewing of shower and toilet areas, placement of PREA education materials, placement of PREA reporting options, and the functionality of those reporting options. Particular attention was given to camera placement, lines of sight, privacy for inmates in bathrooms, showers, and changing areas, PREA reporting signs, victim advocacy signage, door, and key security, inmate movement, and staff and inmate interactions.

Grievance forms were readily available in all units. Inmates interviewed indicated the grievance system works.

PREA education materials were presented in brochures, in Inmate Handbooks, and verbalized by the staff when educating the inmates. There were PREA reporting posters and pamphlets in the housing units. The posters displayed information on reporting sexual abuse through the phone system to an answering service. The phone number on the poster was tested.

The auditor also conducted informal interviews with staff and inmates encountered while on the site review in the various areas. She observed the audit notification in various locations throughout the facility, including each inmate housing unit, programming and work areas, staff, and visitor access areas to ensure that MCCC staff, inmates, and visitors had the opportunity to contact the auditor. The Notices of Audit were posted in English and Spanish.

#### 3. Interviews:

The auditor requested and was provided with rosters of staff available at the facility for the days of the audit, indicating post and shift hours. Also, rosters were received indicating which individuals filled specialized staff positions to include the agency head, Correctional Administrator, PREA Coordinator, and PREA Compliance Manager. The randomly selected staff from the facility rosters representing a diverse sampling of staff to include male and female, various job responsibilities, job assignments, levels of experience. The staff interviews were held in the conference area of the facility. Inmate interviews were held in the program area of the jail.

A roster was received detailing all inmates housed at the facility. The facility did not have any inmates in the targeted interview categories of inmates. There were no targeted inmates interviewed. The auditor supplemented the number of interviews required with additional randomly selected inmates. The interviews were held in private and without staff intervention or oversight.

The auditor conducted a total of 10 inmate interviews out of a population of 14 inmates in population on the day of the audit. This number consisted of 10 random inmates, being interviewed. Inmates were interviewed from every housing unit and security classification, with diversity in age, race, and gender. There were no transgender or intersex inmates available for interviews.

The auditor conducted 9 random staff interviews out of 18 staff employed who have contact with inmates. The auditor also conducted 18 interviews with specialized staff. Some specialized staff had multiple responsibilities and provided information to interviewers from multiple specialized staff interview protocols. Staff members were interviewed from all shifts, and the auditor interviewed only certified staff, as there is no civilian staff. The Correctional Administrator and Agency Head were interviewed. Formal interviews were conducted with inmates and staff in a private office to ensure confidentiality.

One contract allows contractors to enter the facility. The auditor interviewed one contractor. There were no volunteers in the facility.

Interview Selection Methodology:

Random and Targeted Inmates:

The auditor's methodology for selecting inmates to interview was as follows: • Auditor conducted 10 interviews of random inmates, selected randomly from the various housing units. The auditor selected all of the female inmates (2), two inmates from B unit, five from C dorm, the most populated unit, and one from D dorm (the only inmate in the unit). The facility houses minimum, medium, and maximum inmates. Inmates from all demographics and classifications were selected for the interviews.

The auditor did not conduct any interviews of targeted inmates selected inmates were from the following targeted populations since none were available.

Random Staff:

The Auditor conducted 9 interviews with random staff. All of the staff present were interviewed, choosing half from the Day shift, and the other half from the Evening shift.

Specialized Staff:

The auditor conducted 18 interview protocols with specialized staff, with some staff members being asked questions from multiple interview protocols based on their assigned job responsibilities. The interviews conducted with specialized staff were as follows: Agency Head, PREA Coordinator, PREA Compliance Manager, Agency contract Administrator, Human Resources, Intermediate or higher-level, Investigators, Staff who Monitor Retaliation, Staff who supervise Segregated (Isolation), Staff who conduct screening, Medical, and Mental Health staff, Contractors, Intake and Classification staff, SANE, Incident Review Team member, and a First responder.

4. File Review Methodology (Staff, Volunteers, and Contractors):

The auditor's file review methodology selection was as follows:

From the 18 staff, and contractors identified as being assigned to the facility, 11 files were selected for review. The employee file review for hiring and promotion requirements was conducted in the jail. Since the facility opened in 2017, several of the staff were hired from the former jail operated by the Sheriff's Office.

The contractor files were reviewed for training requirements. All staff names were selected from the roster provided that included new staff, more seasoned staff, administrators, supervisory staff, line staff, and contractors (kitchen). These names were also used in reviewing their training records.

The sampling of files the auditor selected were eleven (11) staff to include Correctional Officers, Supervisors, one (1) contractor file to review.

File Review Methodology (Inmate):

The auditor's file review methodology selection was as follows:

Ten (10) inmate names and associated files were randomly selected to ascertain the following documentation:

- Date and time when the initial Risk Assessment was conducted
- Date and time Reassessments were conducted
- Applicable medical and mental health follow-up for disclosing prior victimization
- Receipt of PREA information during the intake process
- Comprehensive education provided within 30 days of intake.

#### Other files reviewed included:

- There were no investigative files to review.
- Grievances list
- Logs of Unannounced Rounds-3

#### Facility Debriefing:

On May 13, 2021, the auditor conducted an out-brief with the facility leadership. The auditor discussed the next steps to include additional requests for documentation and the receipt of the interim report within the next 45 days.

#### Barriers encountered:

There were no barriers encountered during the documentation review, site review, informal interviews with random staff and inmates, formal interviews with random and specialized staff, and formal interviews with random inmates.

#### Conclusion:

The auditor certifies that no conflict of interest exists concerning her ability to conduct an audit of the agency under review. (28 C.F.R. § 115.403(a)).

Agency-wide policies and procedures comply with relevant PREA standards. (28 C.F.R. § 115.403(b).

#### **AUDIT FINDINGS**

#### **Facility Characteristics:**

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Mountrail County Correction Center (MCCC) is located in Stanley, North Dakota approximately 163 miles northwest of Bismark, ND, in Mountrail County. The Mountrail County Justice Center is newly constructed with construction completed in January 2017. The building was an addition to the existing Mountrail County Courthouse. The newly constructed spaces include the Sheriff's Department, the State's Attorney, a new courtroom as well as a new section for the Correctional Center. The Correctional Center opened with its first inmate in April 2017. The first PREA audit was conducted in 2018.

The Correctional Center is encompassed within one level with all wings radiating out from central control. The one exception is the secured elevator access to the 2nd floor. On this area of the 2nd floor are two holding cells and a secure hallway to take inmates to court and a secure door to access the second-floor lobby. The Correctional Center was constructed by a firm specializing in jail construction. The facility is run within indirect supervision. Both the facility design and technology applications installed in the new jail have inmate safety in mind. There are four housing units, A through D, that are directly in the forward-facing view of the main control. The designed capacity is 42 inmates. The facility intake area consists of a vehicle entrance and booking area for the intake of inmates. The booking area includes a prebooking area, holding cells, the main booking desk with excellent visibility of holding cells, and processing areas. There is a medical area that consists of an examination room, storage room, and restroom. There is an indoor recreation area that opens up to allow for fresh air intake and a classroom.

Each housing unit consists of cells on a lower tier and an upper tier, a dayroom and an upper-tier mop room, and a lower-tier mop room. All cells have double bunks, a shower, and a toilet and sink within the cell. Units A and D have four cells – two lower tier and two upper-tier cells, for a total of eight (8) inmates. In addition, Units A & D have sub-dayrooms to further separate the population. Lower tier cells number 1 and 2 have cameras within the cells for observation in special management situations. The auditor verified that the video system software allows for a black box to be placed strategically on the view of the toilet for privacy. The shower has a curtain for privacy. Units B and C have three lower-tier cells and three upper-tier cells, for a total of twelve (12) inmates per unit. Lower tier cell number 2 within Units B and C have cameras within the cells for observation in special management situations. All inmates eat meals within the day room of their unit.

The inmates are housed based upon needs and their respective levels of classification. All inmates are supervised by trained Corrections Officers. The main control room observes all wings and the facility.

The MCCC employs 18 staff members who have regular contact with inmates. The facility is equipped with 101 cameras located inside and out. Officers in Central Control monitor these cameras 24 hours a day, 7 days a week. There are safety and emergency communications systems to increase the safety of employees and inmates.

#### **AUDIT FINDINGS**

#### **Summary of Audit Findings:**

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). 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:	1
Number of standards met:	44
Number of standards not met:	0

The on-site audit was completed May 14-May 17, 2021. The interim report was provided June 2, 2021, to the Mountrail County Correction Center reporting the following:

Exceed Standards: 01

Meets standards: 37

Did Not Meet standards: 07

Exceeded Standards: 115.31

**Met Standard:** 115.11, 115.12, 115.14, 115.15, 115.16, 115.17, 115.18, 115.22, 115.32, 115.33, 115,34, 115.35, 115.42, 115.43, 115.51, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.401, 115.403

Did not Meet Standard: 115.13, 115.21, 115.41, 115.52, 115.87, 115.88, 115.89

#### §115.13 Corrective Action Recommendation:

- 1. Develop and Implement a PREA Compliant Staffing Plan to include the required missing elements:
  - The composition of the inmate population
  - Institution programs occurring on a particular shift
  - The prevalence of substantiated and unsubstantiated incidents of sexual abuse
  - Complete the annual review of the Staffing Plan.
- 2. Continue conducting unannounced rounds utilizing intermediate or higher level supervisors in the facility.

The Moss Group has a free resource guide for completing the staffing plan at:

https://www.prearesourcecenter.org/sites/default/files/library/staffingplanfinalwbjalogosubmt.pdf.

#### §115.21 Corrective Action Recommendation:

1. Provide proof of requesting BCI to follow the requirements of paragraphs (a) through (e) of section 115.21 when conducting a sexual abuse investigation.

#### §115.41 Corrective Action Recommendation:

1. Complete and document the required 30-day reassessments.

#### §115.52 Corrective Action Recommendation:

- 1. Revise the Inmate Handbook to include allowing third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse.
- 2. Agency policy 8.07 should be revised to require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

#### §115.87 Corrective Action Recommendation:

1. Revise the annual reports to include the number of inmates in the facility at the end of the year, by gender, the number of inmates

admitted, and average daily populations.

#### §115.88 Corrective Action Recommendation:

- 1. Revise the annual report to include a comparison of the current year's data and corrective actions with those from prior years.
- 2. Revise the annual reports to indicate a comparison of historical data.

#### §115.89 Corrective Action Recommendation:

1. Add 2017, and 2018 Annual Reports to the website.

#### **Corrective Action Updates:**

§115.13 On May 14, 2021, the auditor discussed the unannounced rounds during the closeout and a remedy was put into place at that time. The facility has continued to utilize intermediate or higher-level supervisors to conduct unannounced rounds.

On September 10, 2021, the facility provided the auditor with an updated staffing plan that covered the areas that were missing from the original staffing plan.

§115.21 On August 9, 2021, the agency provided the auditor with a copy of the North Dakota jail standard that regulates how investigations are handled. This standard, which they have met with the state of North Dakota, mandates that the BCI follow the standards imposed by 115.21.

The ND Standard requires:

The facility administrator shall request an independent investigation from the North Dakota Bureau of Criminal Investigation or the North Dakota Highway Patrol following:

- a. In-custody death of an inmate;
- b. Escape or attempted escape of an inmate, and
- c. Criminal activity committed by facility employees that results in employee or inmate bodily injury.

The facility administrator or the DOCR Office of Facility Inspections may request an independent investigation from the North Dakota Bureau of Criminal Investigation or the North Dakota Highway Patrol following criminal activity committed by facility employees that does not result in bodily injury.

After an incident, the facility shall ensure that all evidence is collected and stored in accordance with evidence collection and chain of custody procedures and that the scene of an in-custody death or crime is preserved for law enforcement investigation.

§115.41 On August 31, 2021, the facility started using a revised reassessment form. On November 5, 2021, the facility provided completed reassessments from an individual who had been in custody for more than 30 days. This is the first individual that had been in custody for more than 30 days or warranted a reassessment since the implementation of the new reassessment form.

§115.52 On August 13, 2021, the agency provided the auditor with an updated Inmate Handbook and updated policy 8.07. The handbook now includes allowing third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse. The policy now requires that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

§115.87 On August 13, 2021, the auditor confirmed that the reports have been updated to show the number of inmates at the end of the year by gender, the number of inmates admitted, and the average daily population.

§115.88 On August 13, 2021, the auditor confirmed that the annual reports have been updated to show a comparison of the current year's data and corrective action with those from prior years.

§115.89 On August 13, 2021, the auditor confirmed that the 2017 and 2018 reports have been added to the agency website.

The facility was found to be in compliance on November 5, 2021.

#### **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.

#### 22 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.01, Prevention and Planning
  - Mountrail County Correctional Center Policies and Procedures Manual 8.04, Employee Hiring and Promotion
  - Mountrail County Correctional Center Policies and Procedures Manual 8.05, Training and Volunteer Contractors
  - Mountrail County Correctional Center Policies and Procedures Manual 8.08, Investigations
  - Mountrail County Correctional Center Policies and Procedures Manual 6.35, Notifications Policy
  - Mountrail County Correctional Center Organizational Chart

#### 2. Interviews:

- PREA Coordinator
- · Correctional Administrator

#### Finding:

The MCCC policy 8.01 addresses the Prison Rape Elimination Act. The agency's policy page 1, mandates zero-tolerance toward all forms of sexual abuse and sexual harassment. The policy outlines, how the PREA standards are implemented and the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment. The facility is expected and does follow the department's policy. Interviews were conducted on-site with the PREA Coordinator and Correctional Administrator to confirm the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment. It was also apparent through the facility walk-through that the facility takes sexual safety seriously through the observation of PREA posters, informational pamphlets, and also through educational programs. The MCCC policy 8.04 contains definitions as required by the standard. Sanctions against PREA related incidents are covered in policy 8.08, Investigations, page 3. Policies 8.01, 8.04, and 8.05 address agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. The facility has a designated PREA Coordinator. The Coordinator indicated that she does have sufficient time to coordinate the facility's efforts to comply with the PREA standards. As with most governmental agencies, staff are required to juggle a plethora of duties and are expected to complete each of the duties in a timely fashion. I observed that the PREA Coordinator's authority to coordinate the facility's efforts to comply with the PREA standards. The PREA Coordinator has the requisite authority to coordinate the facility's efforts to comply with the PREA standards. The PREA Coordinator reports directly to the facility administrator.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	• None
	2. Interviews:
	PREA Coordinator
	Finding:
	The MCCC does not contract for the confinement of its inmates with private agencies. It does contract with the US Marshall's Office and ND Department of Corrections and Rehabilitation to house their inmates.

#### 115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.01, Prevention and Planning
  - Mountrail County Correctional Center Policies and Procedures Manual 8.02, Supervision and Monitoring
  - MCCC Staffing Plan
  - · Organizational Chart

#### 2. Interviews:

PREA Coordinator

#### Finding:

The MCCC has developed a staffing plan for the facility. The staffing plan incorporates the following requirements:

- Generally accepted detention and correctional practices
- · Any judicial findings of inadequacy
- Any findings of inadequacy from Federal investigative agencies
- Any findings of inadequacy from internal or external oversight bodies
- · All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)
- The number and placement of supervisory staff
- Any applicable state or local laws, regulations, or standards
- other relevant factors.

There are several components that are missing from the staffing plan.

- The composition of the inmate population
- Institution programs occurring on a particular shift
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse

It is recommended that the agency develop a more robust staffing plan to include these requirements.

The agency documents any staffing deviations. However, it should be noted that the facility backfills vacant positions when necessary with supervisors or administrative staff in order to provide for minimum staffing.

The agency has completed the annual staffing review for 2021.

The agency has a policy that governs unannounced rounds, Policy 8.02, Supervision, and Monitoring. The policy states that Leadership must conduct the unannounced rounds. During the audit, it was determined that the unannounced rounds have not been conducted by Intermediate or higher-level supervisors. This was discussed during the on-site visit and remedied by requiring Intermediate or Higher supervisors to complete the unannounced rounds. This will be monitored throughout the corrective action phase for continued compliance. The unannounced rounds are documented in the Jail Management System, Zuercher Suites program. The rounds are completed on all shifts and staff are prohibited from alerting other staff when the rounds are occurring.

#### **Corrective Action Recommendation:**

Developing and Implementing a PREA Compliant Staffing Plan to include the required elements that are missing:

- The composition of the inmate population
- Institution programs occurring on a particular shift
- $\bullet\,$  The prevalence of substantiated and unsubstantiated incidents of sexual abuse

The Moss Group has a free resource guide for completing the staffing plan at: https://www.prearesourcecenter.org/sites/default/files/library/staffin gplanfinalwbjalogosubmt.pdf.

Complete the annual review of the Staffing Plan.

Continue conducting unannounced rounds utilizing intermediate or higher level supervisors in the facility.

Update:

On May 14, 2021, the auditor discussed the unannounced rounds during the closeout and a remedy was put into place at that time. The facility has continued to utilize intermediate or higher-level supervisors to conduct unannounced rounds.

On September 10, 2021, the facility provided the auditor with an updated staffing plan that covered the areas that were missing from the original staffing plan.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.01, Prevention and Planning</li> <li>Mountrail County Correctional Center Policies and Procedures Manual 2.05, Juveniles</li> </ul>
	2. Interviews:
	<ul> <li>PREA Coordinator</li> <li>Correctional Administrator (Warden Interview Protocol)</li> </ul>
	Finding:
	The auditor reviewed facility population reports and interviewed the PREA Coordinator and Correctional Administrator to determine that MCCC does not house youthful inmates.

#### 115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.03, Cross-gender viewing and Searches

#### 2. Interviews:

- · Random Sample of Staff
- Random Sample of Inmates
- There were no Transgender or Intersex Inmates to interview at the time of the on-site audit

#### Finding:

Policy 8.03, Cross-gender viewing and Searches, governs pat searches of inmates. Staff would only conduct a cross-gender strip or cross-gender visual body cavity searches of inmates in emergency situations. In the past year, there have been no emergency situations that required cross-gender strip searches. Male staff members do not pat search female inmates at this facility. Female staff members are available to conduct pat searches. The PREA Policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat searches be documented. These are documented in the Zuercher Suite Program. The facility reported that no cross-gender searches were performed. Agency policy requires staff members of the opposite gender to announce their presence when entering an inmate housing unit. Interviews with inmates confirm that staff members announce their presence. Announcements were heard during the on-site phase of the audit. Inmates also confirmed that they may shower, perform bodily functions, and change clothing without a 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. Interviews with staff and inmates verify that this is not being done. Staff members were well versed in this policy.

If an inmate's genital status is unknown, the facility determines the genital status through conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. Facility staff members have been trained to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. In interviews with staff, I asked staff to explain the process of conducting a cross-gender pat search as well as a search of transgender and intersex inmates. Staff members were well versed in conducting searches in a professional and respectful manner. I was unable to interview any transgender inmates at this facility during the on-site audit, as there weren't any currently in the facility. Policy 8.03, stats, "Inmates will be allowed to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia; except in exigent circumstances or when such viewing is incidental to routine cell/dorm checks. In cell cameras will have a privacy dot."

Policy 8.03, states, " v Staff will not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined through conversation with the inmate, by reviewing medical records, or, if necessary by learning that information as part of a broader medical examination conducted in private by a medical practitioner. During the initial booking process with a transgender or intersex inmate, staff will ask the inmate if they prefer to be searched by a male or female officer. MCCC will train staff on how to conduct a cross-gender pat down search and searches of transgender and intersex inmates in a professional and respectful manner and in the least intrusive manner possible. This information will be recorded on the PREA screening form." All staff members are trained to conduct cross-gender pat- down searches of transgender and intersex inmates in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs during their initial training.

## 115.16 Inmates with disabilities and inmates who are limited English proficient Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.06, Inmate Education
  - PREA acknowledgement in Spanish
  - PREA Video in Spanish
  - · Countract for Language Line Services

#### 2. Interviews:

- Agency Head
- · Random Sample of Staff
- There were no Disabled or Who are Limited English Proficient inmates available in the facility at the time of the audit.

#### Finding:

In the interview with the Agency Head, it was determined that the agency takes appropriate steps to ensure inmates with disabilities and inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. She expounded on the resources that have been made available to inmates. PREA handouts are provided in English and Spanish languages. The agency also has a contract for other language interpretations and utilizes the services when warranted. The facility has uses Language Line Solutions for telephonic interpreters. Staff confirm that inmates are not used as interpreters for issues with sexual abuse and sexual harassment. There were no inmates in the facility at the time of the audit that were limited English proficient. The facility has a large print PREA information brochure for inmates that have difficulty seeing and will read to those unable to see. PREA information would be explained to the inmates with low functioning or inability to read by a caseworker and is available through a video as well. Interviews with staff reveal that inmates that suffer from disabilities or who are limited English proficient would receive special guidance in order to explain the fundamental elements of the PREA policy and standards. Agency policy 8.06, page 3 addresses LEP inmates. The agency provides for the use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations. Interviews with staff and inmates confirm that the policy is being followed.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center Policies and Procedures Manual 8.04, Employee Hiring and Promotion, page 3</li> <li>File for recently promoted staff</li> <li>File for recently hired staff</li> <li>Review of Contractor/volunteer files</li> <li>Employee Application Packet</li> </ul>
	2. Interviews:
	HR Administrative Staff
	Finding:
	Policy 8.04, Employee Hiring and Promotion address hiring and promotion decisions. The agency conducts background investigations or reviews of criminal history on an ongoing basis. The backgrounds are completed when the employee is hired at the facility level. The facility also considers any incidents of sexual harassment in determining whether to promote

Policy 8.04, Employee Hiring and Promotion address hiring and promotion decisions. The agency conducts background investigations or reviews of criminal history on an ongoing basis. The backgrounds are completed when the employee is hired at the facility level. The facility also considers any incidents of sexual harassment in determining whether to promote anyone. This is currently completed for new hires and contractors, who may have contact with inmates. The agency conducts background checks of contractors/volunteers as a practice when they apply. Applicants and employees have a continuing affirmative duty to disclose any sexual abuse in prison or other institution; convicted of or civilly or administratively adjudicated for engaging in sexual activity in the community by force or coercion or the victim did not consent. The facility HR staff reveals information to the caller when another agency calls and inquires about a prior employee's disciplinary or employment history. I reviewed files of recently hired and or promoted staff within the past 12 months for compliance with this standard. The facility has only been open for 4 years, so five-year background criminal history checks are not due yet.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	• None
	2. Interviews:
	<ul><li>Agency Head</li><li>Correctional Administrator</li></ul>
	Finding:
	Interviews with the agency head and Correctional Administrator indicate that consideration is afforded when modifying, expanding, or designing a facility. The MCCC has not upgraded any cameras in the video monitoring system since the last audit. During the on-site review of the facility, I did not note any obvious blind spots that need to be addressed in the facility. Video footage is recorded and maintained for approximately forty-five days, depending on the activity or movement within the facility. The facility uses a combination of standard digital video cameras and pan-tilt-zoom cameras to better monitor the facility. I observed cameras placed throughout the facility during the facility tour. I also reviewed the cameras to determine if there were any obvious blind spots while reviewing footage of unannounced rounds for standard 115.13. The facility is to be commended for the level of a video monitoring system that they have in place. The camera system has the technology to block out areas within the unit. This is used to block the toilets and shower areas to prevent cross-gender viewing.

#### 115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center Policies and Procedures Manual 8.08, Investigations

#### 2. Interviews:

- PREA Coordinator
- · Random Sample of Staff
- · There were no inmates at the facility that have reported sexual abuse
- SANE/SAFE

#### Finding:

The agency is responsible for ensuring that administrative and criminal sexual abuse investigations are conducted. The facility conducts the administrative investigations and the North Dakota Bureau of Criminal Investigations (BCI) completes all criminal investigations. The uniform evidence protocol was developed from the North Dakota Sexual Assault Evidence Collection Protocol, 5th ed. All victims of sexual abuse access to forensic medical examinations, at the Mountrail County Medical Center located in Stanley, ND. If for some reason a SANE or SAFE is not available at Mountrail County Medical Center, the individual would be transported to the next closest hospital, Trinity Health, in Minot, who has trained SANE or SAFE staff on duty. The individual would be treated without financial cost, where evidentiarily or medically appropriate. Examinations are performed by Sexual Assault Nurse Examiners (SANEs). If a SANE cannot be made available, other qualified medical practitioners can perform the examination. The auditor communicated with the SANE nurse at Trinity Hospital to confirm services. She operates the Central Dakota Forensic Nurse Examiners program that covers West-Central North Dakota. Trinity Health provides 24/7 coverage currently with two SANEs. The facility has an MOU with the Domestic Violence Program - NWND for advocacy services. The facility has secured an MOU with the Domestic Violence Program, NWND Rape Crisis Center (DVP) for advocacy services. A copy of the MOU for secured during the Pre- Audit phase. The MOU was signed on April 1, 2021, and is reviewed annually. The agency itself is not responsible for investigating allegations of sexual abuse (criminal cases). The agency has not provided proof that they have requested that BCI follow the requirements of paragraphs (a) through (e) of section 115.21. The facility has two trained facility investigators to conduct administrative investigations. All criminal allegations are turned over to the North Dakota Bureau of Criminal Investigation. The Administrative Investigators have completed the North Dakota Department of Corrections and Rehabilitation (ND DOCR) investigator training. All have been trained in either how to preserve or process evidence and they work together for the successful prosecution of sexual assault. Sexual Abuse Victims will bear no financial burden for having an exam. The PREA Coordinator will attempt to make a victim advocate from the Domestic Violence Crisis Center (DVCC) available to the victim in person or by other means. MCCC and DVCC have entered into a memorandum of understanding (MOU) to make victim advocates available when requested. If a victim advocate is not available, MCCC will provide a qualified agency staff member or qualified community-based organization staff member. If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based staff member will accompany and support the victim through the forensic medical examination process and investigatory interviews. The advocate will provide emotional support, crisis intervention, information, and referrals.

#### **Corrective Action Recommendation:**

Provided proof of requesting BCI to follow the requirements of paragraphs (a) through (e) of section 115.21 when conducting a sexual abuse investigation.

#### Update:

On August 9, 2021, the agency provided the auditor with a copy of the North Dakota jail standard that regulates how investigations are handled. This standard, which they have met with the state of North Dakota, mandates that the BCI follow the standards imposed by 115.21.

#### The ND Standard requires:

The facility administrator shall request an independent investigation from the North Dakota Bureau of Criminal Investigation or the North Dakota Highway Patrol following:

a. In-custody death of an inmate;

- b. Escape or attempted escape of an inmate; and
- c. Criminal activity committed by facility employees that results in employee or inmate bodily injury.

The facility administrator or the DOCR Office of Facility Inspections may request an independent investigation from the North Dakota Bureau of Criminal Investigation or the North Dakota Highway Patrol following criminal activity committed by facility employees that does not result in bodily injury.

After an incident, the facility shall ensure that all evidence is collected and stored in accordance with evidence collection and chain of custody procedures and that the scene of an in-custody death or crime is preserved for law enforcement investigation.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center Policies and Procedures Manual 8.08, Investigations</li> <li>Agency Website (http://www.co.mountrail.nd.us/Documents/Uploads/preainvestigationpolicy.pdf)</li> <li>Agency Annual PREA Reports</li> </ul>
	2. Interviews:
	<ul><li>Agency Head</li><li>Investigative Staff</li></ul>
	Finding:
	The agency ensures that an Administrative and Criminal investigation is conducted for allegations of sexual abuse and sexual harassment. This is required in the Investigations policy 8.08. The agency has made public its investigations policy to include the referral to investigators with the authority to present cases for prosecution. The publication describes the responsibilities of both the agency and the investigating entity. The information is made publicly available at http://www.co.mountrail.nd.us/Documents/Uploads/preainvestigationpolic
	y.pdf. This auditor did not have any investigative files to review regarding sexual harassment or sexual abuse. There were no incidents of Sexual Abuse or Sexual Harassment reported at MCCC. The agency policy requires them to document referrals of allegations of sexual abuse or sexual harassment for criminal investigation. There were no cases that required

referral to the BCI, a state entity, during this audit cycle.

## 115.31 Employee training Auditor Overall Determination: Exceeds Standard Auditor Discussion

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center Policies and Procedures Manual 8.05, Training and Volunteer Contractors
  - Employee Acknowledgments of PREA Training
  - Training Curriculum
  - · Sample Training Records
  - Pre and Post Tests
- 2. Interviews:
  - · Random Sample of Staff

#### Finding:

MCCC provides PREA training for all employees, which includes a video and written curriculum. Staff members complete a pre and post-test to evaluate their understanding. Staff acknowledges, in writing, their understanding of the PREA training presented. The acknowledgment form lists the required areas of the standard. A review of the curriculum demonstrates all the required areas are reviewed. A review of staff training files indicates that all staff members have been properly trained. Interviews of staff members demonstrated an understanding of the agency's zero-tolerance policy; the agency policy and procedures for prevention, reporting, and response to a sexual assault or sexual harassment incident, the dynamics of sexual abuse and harassment in a confinement setting, the common reactions of sexual abuse and sexual harassment victims; How to detect and respond to signs of threatened and actual sexual abuse; How to avoid inappropriate relationships with inmates; How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. All newly hired staff receives the initial PREA training before reporting to duty in the facility. During the interviews with a random selection of staff, I quizzed staff members on a variety of these topics and staff responded appropriately. The training provided is specific to both genders of inmates the staff will supervise as this is an intake facility that houses both male and female inmates. There are training materials that detail the differences in gender supervision. The pre-and post-test requirements exceed the standards for this provision.

If a staff member is transferred from another facility, the staff member would be appropriately be retrained. Staff members receive refresher PREA training annually, sometimes twice a year. In years in which an employee does not receive the PREA training, the agency provides refresher information on current sexual abuse and sexual harassment policies. Staff interviewed at this facility were well versed in their responsibilities in responding to an incident of sexual abuse.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center Policies and Procedures Manual 8.05, Training and Volunteer Contractors</li> <li>Training Records of Volunteers and contractors</li> <li>Acknowledgments of Training for Contractors and Volunteers</li> </ul>
	2. Interviews:
	Volunteers and contractor who have contact with inmates
	Finding:
	Contractors and volunteers at the MCCCC are trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response. I reviewed the volunteer and contractor training files for proof of receipt of the training. Interviews also revealed that they are familiar with the agency's zero-tolerance policy and how to report an incident of sexual abuse or sexual harassment. All Contractors and Volunteers receive the required PREA training to satisfy the standard requirements.

## 

- Training Curriculum
- · PREA Pamphlets provided to inmates
- · PREA Posters observed in the facility
- · Acknowledgements of training

#### 2. Interviews:

- Random Sample of Inmates
- Intake Staff

#### Finding:

Offenders at the MCCC are notified of the agency's zero-tolerance policy and how to report an incident of sexual abuse and sexual harassment shortly after entering the facility. Offenders who are being released on their own bond are not provided this information. These offenders are only in the facility for a couple of hours.(Auto releases) Offenders are provided a PREA brochure that details basic PREA standards. Offenders interviewed were familiar with the basics of PREA. The majority of offenders interviewed could articulate how they would report an incident to include reporting to staff, the PREA hotline or going through a third party or in writing. One area that many were not as familiar with was available outside resources for dealing with sexual abuse.

Caseworkers provide more in-depth training with the offenders within 72 hours of arrival at the facility. This far exceeds the 30-day requirement imposed by this standard. The facility provides education through a variety of mechanisms to connect with a broader range of learners. All offenders receive the required training regardless of where they came from being the streets, court, or another facility. The PREA education and video is available in Spanish and English. For offenders with limited reading abilities, vision, or hearing problems, staff provide the training in a format that is easily understandable for the offender. If an offender speaks a language other than Spanish or English, a language line interpretation would be provided for the offender. The facility documents this training and copies of the training are secured in the offender's file or in Zuercher. The facility does an excellent job of providing continuously available resources using posters, pamphlet and Inmate Handbooks (kiosk). I personally observed posters, and signage posted in each housing unit in the facility. Interviews with offenders indicate an understanding of reporting and the zero-tolerance policy. Inmates receive the required training within thirty days of entering the facility.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center Policies and Procedures Manual 8.08, Investigations</li> <li>Investigative Training Certifications</li> <li>Investigative Curriculum</li> </ul>
	2. Interviews:
	Investigative staff
	Finding:
	While the more serious or Criminal investigations would be handled by the BCI, MCCC has three investigators that have received training to conduct investigations in a confinement setting. The training received included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. I have reviewed both the curriculum and the certificates of completion for the training and found them to follow the requirements of this standard. The investigators interviewed were familiar with each of the required components and fluent in how to handle an investigation in confinement.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	• None
	2. Interviews:
	Agency Head
	Finding:
	The MCCC does not employ full or part-time medical and mental health care practitioners. The medical doctor is contracted for limited sick call hours each Wednesday and the mental health counselor is provided by the North Dakota Department of Social Services when needed. The medical practitioner has received training mandated for contractors and volunteers. The auditor reviewed the proof documentation provided.

#### 115.41 Screening for risk of victimization and abusiveness

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center Policies and Procedures Manual 8.06, Inmate Education
  - · Review of Inmate Files
  - · Records of Initial Assessments

#### 2. Interviews:

- Random Selection of Inmates
- Staff Responsible for Risk Screening
- Intake Staff
- PREA Coordinator

#### Finding:

Agency policy 8.06 Inmate Education, addresses the completion of the Sexual Violence Screening during the booking or intake process. I interviewed intake staff, staff that complete the risk screening instrument, and inmates to verify that the Sexual Violence Screening Instrument is being used effectively to determine if inmates have been designated as a victim or a predator to help ensure sexual safety of the facility. Many of the Inmates interviewed indicated that the questions required by this standard are not asked upon entry into the facility. All screenings are conducted within 72 hours of intake, more often than not, they are completed within the first eight hours of arrival at the facility. The agency utilizes a uniform objective screening instrument to help determine if an inmate is vulnerable or possibly a predator. The objective screening instrument considers each of the required components of this standard. The PREA Policy mandates a thirty (30) day review or reassessment of the Sexual Violence Screening instrument. None of the inmates interviewed indicated they had been asked the same or similar questions again. I did not find records of reassessments within the inmate files. In many cases, tehre were duplicate copies of the initial Risk Screening, but all had the same initial date of booking (Initial screening). In addition to the thirty (30) day reviews, staff must reassess an inmate based on a referral, request, an incident of sexual abuse, or upon receiving additional information that may reveal additional insight into the inmate's vulnerability or likelihood of predation. Inmates are never disciplined for failure to respond to the sensitive questions included in the Sexual Violence Screening Instrument. A review of disciplinary and grievance records did not disclose any disciplinary acts for failure to respond to these questions. The agency has implemented appropriate controls on the dissemination of responses to questions on the screening tool within the facility to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. All interviews confirmed that the screening instrument is being used and that staff members are considering the responses to the instrument when considering placement of the inmates in housing.

#### **Corrective Action Recommendation:**

Complete and document the required 30-day reassessments and warranted reassessments.

#### Update:

On August 31, 2021, the facility started using a revised reassessment form. On November 5, 2021, the facility provided completed reassessments from an individual who had been in custody for more than 30 days. This is the first individual that had been in custody for more than 30 days or warranted a reassessment since the implementation of the new reassessment form.

# 115.42 Use of screening information Auditor Overall Determination: Meets Standard Auditor Discussion 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- Mountrail County Correctional Center Policies and Procedures Manual 8.06, Inmate Education
- · Review of Inmate Files
- · Records of Initial Assessments

#### 2. Interviews:

- · Random Selection of Inmates
- · Staff Responsible for Risk Screening
- Intake Staff
- PREA Compliance Manager
- No Transgender or Intersex inmates were available at the time of the on-site audit

#### Finding:

Interviews with staff and inmates confirm that the risk screening instrument is being used and that staff considers the responses to the instrument when determining the placement of the inmates in housing, bed, work, programming, and education assignments. When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates and in making other housing and programming assignments, the agency considers on a case-by-case basis whether the placement would ensure the inmate's health and safety and whether the placement would present management or security problems. The transgender/Intersex inmate's own views with respect to his or her own safety given serious consideration when making housing decisions. The policy indicates that transgender or intersex inmate's own view of their safety would be given consideration. The MCCC has not identified any Transgender or Intersex inmates to date. Staff members advise that all inmates are permitted to shower alone and that Transgender or Intersex inmates would not be excluded from programming assignments based on their status. Interviews with the PREA Compliance Manager and staff stated they would conduct screenings of transgender/intersex inmates twice a year for any threats to safety experienced by the inmate. The auditor was not able to review any samples for verification of completion. The agency has a policy that allows transgender/Intersex offenders the opportunity to shower alone. The agency does not maintain any dedicated units, wings, or facilities to house LGBTQI offenders. They are not under any court orders, decrees, or legal settlements or judgments to maintain separate wings, facilities, or housing units.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.12, Housing
	2. Interviews:
	<ul> <li>Correctional Administrator</li> <li>Staff Assigned to Segregation Housing</li> <li>There were no inmates present that had been placed in Segregation Housing due to risk of Sexual Abuse</li> </ul>
	Finding:
	Agency policy 8.12 states inmates at high risk for sexual victimization may not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made there are no available alternative means of separation from likely abusers. If assessment can't be completed immediately, the inmate may be held in involuntary segregated housing for less than 24 hours while assigned staff completes the assessment. [115.43 (a)-1]. Section b states, "Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: [115.43 (b)]" Interviews with the staff that works in the segregation housing indicate that there have not been any offenders placed in segregation who were victims or at risk of being victimized. The facility finds alternative housing for the victim. Agency policy requires that if the facility had to use involuntary segregation housing it would only be used until an alternative means of separation could be found, never to exceed 30 days. There were no cases of involuntary segregation due to victimization to review for the prior 36 months therefore there was no documentation of the facility's concern for the offender's safety or reasons why no alternative means of separation can be

arranged. Staff members interviewed that work segregation housing indicated that the reviews would be conducted according

to policy. Again, there were no cases to review for compliance.

15.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.07, Reporting Sexual Assault and Sexual Harassment</li> </ul>
	Inmate Handbook
	<ul><li>PREA Posters</li><li>PREA Pamphlet/Brochure</li></ul>
	PREA PampnievBrochure
	2. Interviews:
	Random Sample of Staff
	Random Sample of Inmates
	PREA Compliance Manager
	The facility provides multiple mechanisms for reporting sexual harassment and sexual abuse. The facility has posted PREA Posters, and third-party reporting posters posted throughout the facility. I observed at least one poster in each housing unit.
	Interviews with a sampling of inmates revealed that inmates are familiar with a variety of ways to report a PREA incident.  The information is also readily available in the Inmate Handbook and in the PREA brochure provided during intake. Inmates were familiar with the mechanisms available for privately reporting a case of sexual harassment or sexual abuse, how to
	report retaliation, and staff neglect. Many inmates indicated that they would tell an officer or call the PREA number. The
	offenders feel comfortable reporting directly to the officers in this facility. The facility has provided at least one way for an
	offender to privately report an incident to a public/government or private entity that is not a part of the agency. Inmates may
	also contact the National Sexual Assault Hotline from any inmate phone, or write the Domestic Violence Crisis Center
	(DVCC). The phone numbers and directions are prominently displayed on all PREA posters, in MCCC Inmate Handbooks,

in the MCCC PREA Brochure, and reviewed in the Inmate PREA Orientation Education groups/classes. Inmates may remain anonymous in the complaint. Agency policy does not address Foreign Nationals as they would not hold individuals with only a civil hold. Policy 8.07 addresses reporting. Staff members are mandatory reporters of all incidents of sexual harassment and sexual abuse. Interviews with staff reveal that they are aware of this requirement. Staff also indicated that they are required to document all complaints in writing. When asked how staff could privately report an incident of sexual harassment or sexual abuse, most staff indicated that they would report the incident directly to their supervisor. They also advised that they could send an email, drop an anonymous note, call or call the PREA Hotline. The hotline was tested by calling and leaving a message for the recipient to contact the auditor once the call was received. The call was responded to in a timely

manner.

#### 115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.07, Reporting Sexual Assault and Sexual Harassment
  - Inmate Handbook
  - · Review of Grievances filed, there were no Emergency Grievances filed related to Sexual Abuse

#### 2. Interviews:

• There were no inmates available to interview that had reported sexual abuse

#### Finding:

Agency policy 8.07, page 2, governs the grievance system for sexual abuse claims and specifically emergency grievances. An inmate may file a grievance regarding sexual abuse without a time limitation. The offender is not required to use the formal grievance procedures or to submit a complaint to his/her alleged abuser to file a complaint or grievance. The offender can give the grievance to any staff member. Staff members that receive a formal grievance alleging sexual abuse are required to forward it to their supervisor or another supervisor who is not the subject of the alleged abuse. Staff members are required to address the grievance and issue a final determination on the case within 90 days. A 70-day extension can extend the response if needed. The facility did not receive any grievances related to sexual abuse in 2020. A review of grievances, in general, indicates that all grievances are taken seriously and responded to in a timely manner. None of the cases reviewed extended beyond the 90-day limitation. The policy covers the requirement that at any level of the administrative process, including the final level if the inmate does not receive a response within the time allotted for the reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level. Offenders are made aware of the deadlines and time limitations imposed by this standard as well as the stipulation that offenders may be assisted by a third party in generating the grievance, that they do not have to submit the grievance to the officer they are grieving. Agency policy addresses the duty to provide an initial response within 48 hours, and that a final agency decision be made within five days. The Inmate Handbook provides information notifying the inmate in writing of any such extension and provide a date by which a decision will be made, The initial response and final agency decision shall document the agency's determination whether the inmate is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance, and the Inmate Handbook includes information on the ability to have assistance in utilizing a third party including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies.

The Inmate Handbook does not address allowing third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse. The policy and handbook do permit third parties to file such requests on behalf of inmates.

Agency policy 8.07 does not require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

#### Corrective Action Recommendation:

Revise the Inmate Handbook to include allowing third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse.

Agency policy 8.07 should be revised to require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

Update: On August 13, 2021, the agency provided the auditor with an updated Inmate Handbook and updated policy 8.07. The handbook now includes allowing third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse. The policy now requires that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.07, Sexual Assault and Sexual Harassment
	MOU with Domestic Violence Program NWND
	Marsy's Law
	2. Interviews:
	Random Sample of Inmates
	There were not inmates who had reported sexual abuse in the facility to interview at the time of the audit.
	MCCC provides a victim advocate for any inmate pooding to speak with an advocate. Outside advocates are available to all

MCCC provides a victim advocate for any inmate needing to speak with an advocate. Outside advocates are available to all offender victims of sexual abuse through the Domestic Violence Crisis Center NWND (DVCC). Offenders are provided the names, addresses, and telephone numbers of advocacy groups in the Inmate Handbook. Most offenders interviewed were familiar with the availability of services but very few could provide specific names of the agencies, it is most critical that they be aware that services are available and where to locate the information on how to contact them if needed. This information is available in the inmate handbook. Offenders are not provided with immigrant services agencies for persons detained solely for civil immigration purposes as the agency has never housed an inmate solely for the purposes of civil immigration. Offenders are afforded access to these services via mail or telephone in as confidential a manner as possible. The agency has an MOU with the Domestic Violence Rape Crisis Center to provide inmates with emotional support services related to sexual abuse.

Attempts are made to provide confidential contact between the advocate and the inmate when safe. The inmate handbook advises inmates that phone calls may be monitored and/or recorded by the MCCC staff or law enforcement.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.07, Sexual Assault and Sexual Harassment</li> <li>Mountrail County Correctional Center website: http://www.co.mountrail.nd.us/pages/mountrail-county-correctional-cent er</li> </ul>
	2. Interviews:
	• None
	Finding:
	The MCCC has provided a mechanism for third-party reporting. The policy is posted on their website located at: http://www.co.mountrail.nd.us/pages/mountrail-county-correctional-cent er. The website provides a printer-friendly pdf file that the viewer can print if needed for ease of access. Interviews with investigative staff indicate that all third-party reports will be taken seriously and followed up on appropriately. I also observed posters within the facility (lobby and visitation) that provided visitors with this information. Inmates interviewed are familiar that they may report through a third party.

# Staff and agency reporting duties Auditor Overall Determination: Meets Standard Auditor Discussion 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.) • Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.07, Sexual Assault and Sexual

- 2. Interviews:
  - Correctional Administrator

• There were no sample reports available to review

- PREA Coordinator
- PREA Compliance Manager
- · Random Sample of Staff
- · Medical and Mental Health Staff

### Finding:

Agency policy 8.07, requires all staff, contractors, and volunteers to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews with a random sample of staff confirm that they are required to report and knowledge, suspicion, or information regarding sexual harassment or sexual abuse, retaliation, or staff neglect. Staff interviewed are familiar that they should not share private information surrounding a claim or incident of sexual harassment or sexual abuse other than disclosing the information to their supervisor(s) or other staff to assist in making treatment, investigation, and other security and management decisions. The facility does not employ Medical or Mental Health staff, but staff members do come in on an as-needed basis. Interviews with Medical and Mental Health staff revealed that apart from reporting to designated supervisors or officials, medical and mental health staff 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 unless prevented by Federal, State or local law. This facility does not house offenders under the age of 18 or Youthful Offenders. If they were to have a vulnerable adult or youthful offender in the facility that claimed sexual harassment or sexual abuse, they would be required to report the allegation, including third-party and anonymous reports, to the facility's designated investigators.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.12, Housing</li> <li>Training Curriculum</li> </ul>
	2. Interviews:
	<ul> <li>Agency Head</li> <li>Correctional Administrator</li> <li>Random Selection of Staff</li> </ul>
	Finding:
	Agency policy 8.12, page 2, requires staff to take immediate action to protect inmates that are subject to a substantial risk of imminent sexual abuse. Interviews with staff indicated that staff members are cognizant of their duties to protect all inmates, especially those that are at risk of imminent sexual abuse. Staff interviewed stated they would take every precaution necessary to protect the individual by separating them from the potential abuser, maintaining a visual on the individual, and contacting their supervisor to make more permanent arrangements in protecting the individual. All cases would be addressed immediately after learning the inmate is at risk of sexual abuse. There were no cases identified where an inmate was identified as a substantial risk of imminent sexual abuse present at the facility during the onsite audit. I interviewed a random sample of staff as well as the Correctional Administrator/agency head to verify that offenders at imminent risk of sexual abuse would be protected to prevent the abuse from happening.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.07, Sexual Assault and Sexual Harassment
	There were no notifications from Administrators to Administrators of Sexual Abuse Incidents to review
	2. Interviews:
	Agency Head
	Correctional Administrator
	PREA Compliance Manager
	Finding:
	Agency policy 8.07, page 3, requires that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Operations Administrator, head of the facility, must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. Notification is to be made as soon as possible not to exceed 72 hours and the Operations Supervisor must make the notification to the Superintendent/facility head of the other
	facility. There were no cases reported at MCCC that required reporting to another facility in the past 12 months. Interviews with the Correctional Administrator confirm that the agency's policy requires them to notify the other superintendent/facility head directly to report an incident. There were no cases reported to the MCCC in the past 12 months from another facility.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.09, Coordinated Response
	2. Interviews:
	<ul><li>First Reponders</li><li>Random Sample of Staff</li></ul>
	Finding:
	Agency policy 8.09, Coordinated Response, details the protocols for responding to allegations of sexual abuse. The policy and protocols require that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to follow universal precautions, separate the alleged victim and abuser, instruct the inmates to separate, face the wall or get on the floor, preserve and protect any potential crime scene until appropriate steps can be taken to collect evidence; restricting access, escort inmates to a dry cell, and request inmates not to take any action that could destroy physical evidence including, as appropriate, washing, brushing teeth, changing clothes, smoking, eating, or drinking until forensic evidence has been gathered if the alleged abuse occurred within the past 120 hours. Staff interviews indicate that the majority of staff are familiar with securing the scene, separating the inmates, and contacting their supervisor. There were no cases reported in the past twelve months. The agency does not staff any non-security positions, therefore, they do not have a policy that requires that if the first staff responder is not a security staff member, the responder is required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

There are no non-security staff at the facility. There were no sexual abuse incidents to review over the past three years.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.09, Coordinated Response</li> <li>Coordinated Response Plan</li> </ul>
	2. Interviews:
	Correctional Administrator
	Finding:
	The facility has a written institutional response plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, investigators, and facility leadership. I have secured and reviewed the coordinated response plan. The coordinated response plan coordinates the actions of staff first responders, medical and mental health practitioners, investigators, and facility leadership when responding to an incident of sexual abuse. Interviews with the Operations Supervisor, investigators, PREA Coordinator, and PREA Compliance Manager confirm that there is a coordinated response plan for the facility. There are no full or part-time medical and Mental health staff at the facility to include in the response plan.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	• None
	2. Interviews:
	Correctional Administrator     Agency Head/Correctional Administrator
	Finding:
	This facility does not participate in any collective bargaining. The facility maintains its 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. Interviews with the Correctional Administrator confirm that there is no collective bargaining at this facility and in fact, North Dakota is a right-to-work state.

### 115.67 Agency protection against retaliation Auditor Overall Determination: Meets Standard Auditor Discussion

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.07, Reporting Sexual Assault and Sexual Harassment
  - There were no examples of retaliation monitoring to review
- 2. Interviews:
  - · Agency Head
  - · Correctional Administrator
  - · Staff Charged with Retaliation Monitoring

### Finding:

Agency policy 8.07, states that it is the task of the Correctional Administrator and Director of Security to protect inmates and staff from retaliation efforts of others. Interviews with a random sample of staff ensured familiarity with this standard. The facility has designated the Director of Security, as the Retaliation Monitor for MCCC. The agency employs multiple protective measures, to protect victims from abusers to include housing changes, transfers for inmate victim or abuser, 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. Interviews with the Agency Head, Correctional Administrator, PREA Coordinator, PREA Compliance Manager, and Retaliation Monitors all conclude that the facility will take a variety of measures to protect the victim from their abuser. I reviewed one case where it was necessary to monitor retaliation. The individual was monitored for more than 90 days at MCCC before being released. Agency policy mandates that for at least 90 days following a report of sexual abuse, the facility shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. The facility monitors inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need. Interviews with the Retaliation Monitors indicate that monitoring may continue as needed to protect the victim. There was no documentation of retaliation monitoring in the prior years to review as the agency has not had any incidents that warranted monitoring retaliation.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.12, Housing
	2. Interviews:
	<ul> <li>Correctional Administrator</li> <li>Staff who Supervise Segregated Housing</li> </ul>
	Finding:
	Agency policy 8.12, states that "involuntary placement into segregated housing is NOT permitted simply because an inmate is at high risk for victimization. The shift supervisor with the assistance of the Administrator and Director of Security will assess all available alternatives and segregated housing will only be issued if all alternatives are deemed inappropriate or pose a direct threat to the well-being of the inmate." Typically, if segregation housing is used it would only be for 24 hours. If the case required the use of segregated housing, a review would be conducted every 30 days. During the past 12 months, there were no victims placed in involuntary segregation housing. This facility does not have a dedicated segregation-housing unit. I was unable to locate any offender victims that had been placed in segregation housing. I did tour the facility and speak with offenders of all units at this facility.

### 115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.08, Investigations
  - There are no completed Investigative reports to review

### 2. Interviews:

- PREA Compliance Manager
- · Investigative Staff
- Correctional Administrator (Warden Interview Protocol)
- Agency Head
- There are no Inmates who have reported sexual abuse

### Finding:

The MCCC has the policy to investigate all crimes related to sexual abuse and sexual harassment in their facilities. Policy 8.08, Investigations, states that when MCCC conducts administrative investigations into allegations of sexual abuse and sexual harassment, it shall initiate a thorough and objective investigation for all allegations promptly, including third-party and anonymous reports. MCCC conducts all administrative investigations and forwards all criminal investigations to the North Dakota Bureau of Criminal Investigations (BCI) for investigation. When conducting an investigation in-house, the MCCC uses training investigators who have received Department of Justice approved sexual abuse investigation training. Investigators gather and preserve direct and circumstantial evidence, including available physical and DNA evidence and available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; videotaping all interviews, and review prior complaints and reports of sexual abuse involving the suspected perpetrator. The MCCC responds, investigates, and supports the prosecution of sexual abuse within their facility and externally in partnership with law enforcement. Interviews with investigative staff indicate that all incidents are taken seriously and investigated according to policy and procedure. Investigations are conducted promptly, thoroughly, and objectively. Reports received from third parties or anonymous sources would be investigated. The MCCC policy state that Administrative investigations will be conducted by the facility investigators and all criminal cases are investigated BCI. MCCC has three trained investigators to conduct PREA investigations. These investigators have received the required specialized training for conducting investigations in a confinement setting. I interviewed a sampling of the investigators and reviewed their training records and curriculum for compliance with this standard. Investigators are trained to gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; they can interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. Once an incident appears to be criminal in nature, the case is forwarded to the BCI for investigation. The BCI will refer cases for prosecution. The facility will not conduct compelled interviews. These interviews would be conducted by the BCI. Investigators access the credibility of the witness on an individual basis. Investigators use the standard preponderance of the evidence when considering or weighing the evidence in a case. MCCC does not utilize polygraph or other truth-telling devices in PREA investigations. I was unable to locate any inmates who stated that they had reported a case of sexual abuse in the facility. The agency Investigations policy prohibits the use of any polygraph or other truth-telling device examinations. All administrative investigations would be documented and include an analysis of whether staff actions or failure to act contributed to the incident. All criminal investigations are 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. All substantiated allegations of conduct that appear to be criminal are referred for prosecution by the BCI. All written reports referenced in paragraphs (f) and (g) of this section are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Interviews with investigative staff confirmed that investigations would continue even upon the departure of the alleged abuser or victim from the employment or control of the facility or agency. Agency staff, including the Agency Head, PREA Coordinator, and Investigative Staff all confirmed in interviews that when BCI is investigating on their behalf, they will cooperate fully to ensure the investigative entity has access as needed and attempt to remain informed about the progress and status of the investigation.

The Investigations policy states that all case records associated with claims of sexual abuse, and sexual harassment including incident reports, investigation reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and counseling will be retained in accordance with North Dakota statute. MCCC will retain all administrative and criminal written reports referenced for as long as the alleged abuse is incarcerated or employed by the agency, plus 5 years. There were no sexual abuse or sexual harassment investigative files to review. The facility has not had any incidents to investigate.

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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.08, Investigations
	2. Interviews:
	Investigative Staff
	Finding:
	Agency policy 8.08, states MCCC may not impose a standard higher than a preponderance (>50%) of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. This was confirmed in interviews with Investigative Staff. I was unable to review any investigative files as there have not been any complaints to date. Interviews with investigative employees confirm the facility imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. All completed investigative files were reviewed and found to comply.

115.73	Reporting to inmates	
	Auditor Overall Determination: Meets Standard	
	Auditor Discussion	
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)	
	Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.08, Investigations	

- 2. Interviews:
  - Investigative Staff
  - Correctional Administrator
  - There were no inmates who had reported sexual abuse to interview.

### Finding:

The facility policy states that following an investigation, the PREA coordinator or designee will inform the inmate or inmates verbally whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The PREA coordinator will deliver in person a statement of findings which will require the signature of the inmate(s). If the inmate(s) refuse to sign the findings form, the PREA coordinator will document the refusal and have a staff member witness and sign the refusal. There are no investigative files to review if alleged victims had been notified of the status of their cases. When the agency does not conduct the investigation themselves, they do request that the investigative agency notify them of the outcome or status of the case. When the agency does not conduct the investigation into an inmate's allegation of sexual abuse in the facility, the agency requests the relevant information from the investigative agency to inform the inmate. The agency investigation policy requires that inmates be notified if following an inmate's allegation that a staff member has committed sexual abuse against the inmate, (unless the agency has determined that the allegation is unfounded) whenever the staff member is no longer posted within the inmate's unit; The staff member is no longer employed at the facility; The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility, or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. There were no investigative files that required notice in this category. There are no sexual harassment cases to review. Agency policy, requires that following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently must 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, or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. In cases where an offender refuses to acknowledge notice, the facility would document the refusal.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center Policies and Procedures Manual 8.05, Training and Volunteer Contractors</li> <li>There were no disciplinary files to review</li> </ul>
	2. Interviews:
	PREA Compliance Manager
	Finding:
	According to agency policy 8.05, agency staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff that has engaged in sexual abuse with an inmate or ward of the state of North Dakota. There were no disciplinary actions to review of staff related to an incident of sexual abuse. All disciplinary sanctions imposed for violations of agency policies relating to sexual abuse or sexual harassment (other than 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. 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, are reported to law enforcement agencies unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, there have been no cases at this facility that required staff to be reported to law enforcement or to the relevant licensing body.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center Policies and Procedures Manual 8.05, Training and Volunteer Contractors</li> <li>There were no disciplinary files to review</li> </ul>
	2. Interviews:
	Correctional Administrator (Warden Interview Protocol)
	Finding:
	Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates is reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Contractors and volunteers who engage in sexual abuse are prohibited from future contact with inmates. Agency policy 8.05 requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. There were no incidents reported involving a contractor in the past 12 months at this facility. An interview with the Correctional Administrator revealed that it is well ingrained that volunteers or contractors would be banished from the facility for egregious violations such as a violation related to sexual harassment or sexual abuse and prosecuted to the fullest extent of the law.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Mountrail County Correctional Center Policies and Procedures Manual 8.08, Investigations</li> <li>There are no files to review</li> </ul>
	2. Interviews:
	Correctional Administrator     There was no Medical and Mental Health Staff to interview

### Finding:

Agency policy 8.08 govern inmate discipline. The policy states Inmates shall be subject to disciplinary sanctions pursuant to the MCCC disciplinary process following an administrative or criminal finding of guilt that the inmate engaged in inmate-on-inmate sexual abuse. In the past twelve months, there were no administrative disciplinary cases for engaging in inmate-on-inmate sexual abuse. There were no criminal cases of inmate-on-inmate sexual abuse. A review of investigative and disciplinary reports indicates sanctions are commensurate with the nature and circumstances of the abuse committed. The facility takes into consideration the offender's disciplinary history and sanctions for comparable offenses committed by other inmates with similar histories. An inmate's mental disability would be considered when determining what sanctions to impose. The facility does not offer any therapeutic services to abusers to address and correct underlying reasons or motivations for the abuse. The facility may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. There were no inmate disciplinary actions to review where inmates sexually abused staff without consent. The policy states that if an offender files a report in good faith the offender will not be disciplined for falsely reporting the incident. The agency does not deem the activity to constitute sexual abuse if it determines that the activity is not coerced.

### 115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

Mountrail County Correctional Center Policies and Procedures Manual 8.10, Medical and Mental Health

### 2. Interviews:

- · Staff Responsible for Risk Screening
- There were no Inmates who Disclosed Sexual Abuse
- There is no Medical and Mental Health Staff at this facility

### Finding:

The MCCC provides for Medical and Mental Health Services. During the intake process, staff are required to ask questions and document the inmate's response completing the Sexual Violence Screening tool. Staff reviews the screening instrument and if an offender indicates that they have experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, the staff ensures that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. The facility does not have Medical or Mental Health staff under their employment but does contract with providers in the community. Inmates are seen by these practitioners as needed.

Discussion around sexual violence is part of the intake process. There were no inmates identified as having revealed prior sexual victimization in the facility at the time of the audit.

There is no Medical or Mental Health staff at the facility. If inmates disclose prior victimization, the facility would provide a follow-up meeting with Medical and/or Mental health within fourteen days to provide support for the offender. The staff that conducts the screening indicated that a follow-up meeting would be requested immediately. The Intake officers complete the Risk Screening Instrument at the facility. Information related to sexual victimization or abusiveness that occurred in an institutional setting is not limited to medical and mental health practitioners, since they do not employ them. Security staff members have access to this information on a need-to-know basis to assist in determining housing assignments, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

## Access to emergency medical and mental health services Auditor Overall Determination: Meets Standard Auditor Discussion 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

• Mountrail County Correctional Center Policies and Procedures Manual 8.10, Medical and Mental Health

- 2. Interviews:
  - Staff Responsible for Risk Screening
  - There were no Inmates who Disclosed Sexual Abuse
  - · There is no Medical and Mental Health Staff at this facility
  - Staff First Responders
  - · Correctional Administrator

### Finding:

According to the Correctional Administrator, inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are according to their professional judgment determine. The MCCC has established a working relationship with local medical facilities to provide timely, unimpeded access to emergency medical treatment and crisis intervention services. MCCC staff coordinate with receiving hospital in advance to ensure a SANE will be made available and to request a victim's advocate be provided upon arrival. The SANE nurses in Stanley or Minot work closely with other members of an extended team that include doctors, law enforcement, forensic interviewers, advocates, and crime victims service providers. Facility protocols for responding to a sexual abuse incident mandate that security staff first responders immediately notify the appropriate medical and mental health practitioners. Inmate victims of sexual abuse, while incarcerated, would be 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. This service is provided at the local hospital when the inmate victims go in to see the SANE Nurse. All inmate victims receive medical services without incurring any expense whether they cooperate in the investigation or not. These requirements are covered in the Medical and Mental Health Policy, 8.10. There were no inmates to interview that required medical services.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center Policies and Procedures Manual 8.10, Medical and Mental Health
	2. Interviews:

- There is no Medical and Mental Health Staff to interview
- There are no Inmates that disclosed Prior Victimization of Sexual Abuse in the facility

### Finding:

The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Collaborated through observation of facility resources made available to inmate victims. The evaluation and treatment of 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. These services are consistent with the community level of care. This facility houses both male and female offenders. Victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate, timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services, and female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests. All treatment services are 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. The facility is a jail and is not required to conduct a mental health evaluation of all known inmates-on-inmate abusers with 60 days of learning of the sexual abuse history of the offender. Medical and Mental Health professionals from the community are contracted to ensure inmate victims receive the care required within this standard. There are no investigations or interviews with inmate victims to confirm that these services are provided without cost to the inmate.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.11, Incident Reviews

### 2. Interviews:

- · Correctional Administrator
- PREA Compliance Manager
- Incident Review Team

### Finding:

The agency policy 8.1 requires the facility to conduct a sexual abuse incident review after every criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded. MCCC completes an incident Review for each substantiated or unsubstantiated sexual abuse case. There were no cases of sexual abuse in 2019 or 2020 to review. The facility has the policy to conduct the Incident Review within 30 days of the close of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. There were no files available to review. The Incident Review Team includes the required team members. The agency has created an Incident Review Form to ensure the required elements are being reviewed. The elements include (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d) (5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager. The facility would implement recommendations for improvement or document their reason(s) for not making the suggested improvements. To determine compliance with this standard, I interviewed the PREA Coordinator, Medical, Mental Health Staff, a member of the Incident Review Team, and the Correctional Administrator. There were no PREA related Investigative files to review.

### 115.87 Data collection Auditor Overall Determination: Meets Standard Auditor Discussion 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.13, Data Collection
- · Agency Website
- Annual Report 2019
- Annual Report 2020
- 2. Interviews:
  - PREA Compliance Manager

### Finding:

The MCCC policy 8.13, Data Collection, details the standardized definitions on pages 1&2. The facility compiles all uniform data of each allegation within the facility. The policy addresses quality assurance and accurately tracking data for the agency using a standardized instrument and set of definitions. While the MCCC follows the SSV as guidance for the collection of appropriate data. All PREA data is preserved and tracked by the PREA Coordinator and PREA Compliance Manager. All of the data is aggregated annually and a report is generated from the data. A review of the investigations reveals that the required data is tracked to answer all questions on the Survey of Sexual Violence by the Department of Justice. The PREA Coordinator reviews all PREA related data and confirms that all of the data is retained. This data is gleaned from available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. I reviewed 2019, and 2020 aggregated annual reports generated by the MCCC. The annual reports contain all of the information required in the Department of Justice, Bureau of Justice Statistics, Survey of Sexual Violence. The primary data regarding the number of cases and dispositions are present as are the types of allegations and their dispositions by category. The number of inmates in the facility at the end of the year, by gender; the number of inmates admitted, average daily populations are not reported.

### **Corrective Action Recommendation:**

Revise the annual reports to include the number of inmates in the facility at the end of the year, by gender; the number of inmates admitted, and average daily populations.

On August 13, 2021, the auditor confirmed that the reports have been updated to show the number of inmates at the end of the year by gender, the number of inmates admitted, and the average daily population.

### 115.88 Data review for corrective action Auditor Overall Determination: Meets Standard **Auditor Discussion** 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.) • Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.13, Data Collection

- Agency Website (http://www.co.mountrail.nd.us/pages/mountrail-county-correctional-cen ter)
- 2019 Annual Report
- 2020 Annual Report
- 2. Interviews:
  - · Agency Head
  - PREA Coordinator
  - PREA Compliance Manager

### Finding:

Interviews with the PREA Coordinator, PREA Compliance Manager, and the agency head confirmed that the agency collects and aggregates all data from the facilities where they house inmates. The MCCC has compiled annual reports for 2019 and 2020, but it does did not compare the data from year to year. The agency has not had any reported incidents of sexual abuse or sexual harassment but should show the raw data. The data is specifically reviewed to determine if there are any problem areas within the facilities that should be addressed to curtail abuse, if corrective action is warranted, and reviewing each facility's aggregated data as well as the agency as a whole on an annual basis. Once the annual aggregated reports are complete, the agency head approves the report before the reports are posted on the agency website:

http://www.co.mountrail.nd.us/pages/mountrail-county-correctional-cent

er. The facility has not had to redact any material from an annual report but would if necessary in order to curtail any threat to the safety and security of a facility. I have reviewed all reports posed on the MCCC webpage from 2019-2020. The 2020 report had already been completed and posted at the time of this audit.

### Correction Action Recommendation:

The annual report should include a comparison of the current year's data and corrective actions with those from prior years. Revise the annual reports to indicate a comparison of historical data.

Update: On August 13, 2021, the auditor confirmed that the annual reports have been updated to show a comparison of the current year's data and corrective action with those from prior years.

### 115.89 Data storage, publication, and destruction Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

- 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
  - Mountrail County Correctional Center (MCCC) Policies and Procedures Manual 8.13, Data Collection
  - Agency Website (http://www.co.mountrail.nd.us/pages/mountrail-county-correctional-center)
  - 2019 Annual Report
  - 2020 Annual Report
- 2. Interviews:
  - PREA Coordinator

### Finding:

The MCCC has a number of safeguards in place to securely retain PREA related data. All case records associated with claims of sexual abuse, and sexual harassment including incident reports, investigation reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and counseling are retained in accordance with the North Dakota statute. The North Dakota statute requires retention for 50 years. This far exceeds the standard imposed. Hard copy records are retained in a locked file cabinet, behind a locked door. All records are electronically preserved and backed up for safe retention. Any clinical information related to the investigation is merged immediately within the PREA Investigation file. The agency makes available the aggregated data to the public on their website. All personal identifiers are removed from the aggregated reports prior to publication. Interviews with the PREA Coordinator reveal that all PREA related data would be maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. The facility has provided annual reports for 2019 and 2020. They need to add 2017 and 2018 to the website. The facility opened in 2017, therefore they will not have reports from 2012-2016.

### Corrective Action Recommendation:

Add 2017, and 2018 Annual Reports to the website.

Update: On August 13, 2021, the auditor confirmed that the 2017 and 2018 reports have been added to the agency website.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	<ul> <li>Photographic evidence of Postings of Notice of Audit</li> <li>Agency Records</li> <li>Mountrail County Correctional Center (MCCC) Website</li> </ul>
	2. Interviews:
	PREA Compliance Manager
	Finding:
	The MCCC operates one facility. The MCCC opened in 2017. The MCCC was initially audited in 2018. I was provided full access to the facility for the purposes of the tour review. The security escorts unlocked all secured access doors to allow me to visually observe all areas of the facility. This included all areas within the facility to include the inmate housing areas, gym, storage, kitchen, classroom, programs area, etc. I was provided with copies of all policies and granted access to review documentation of inmate records. I was permitted to copy or to request copies of all documents needed to conduct a thorough audit. Offenders were able to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. I did not receive any letters from offenders at this facility. I was provided a private setting to offenders without interruption. Inmates and Staff interviewed were informed of the confidentiality of the audit. The facility provided me with photographic proof that the Notice of Audits was posted. The audit was completed in year two of cycle three due to COVID-19 related restrictions in 2020.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)
	Mountrail County Correctional Center (MCCC) Website: http://www.co.mountrail.nd.us/pages/mountrail-county-correctional-cent er
	2. Interviews:
	• None
	Finding:
	I have observed that the previous auditor's PREA Final report has been posted on the agency's public webpage. The posting for the MCCC can be reviewed at http://www.co.mountrail.nd.us/pages/mountrail-county-correctional-cent er.

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
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.)	na
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 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.)	na

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 consideration: Any applicable State or local laws, regulations, or standards?	yes
	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.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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 facility does not have female inmates.)	yes
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	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 agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	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

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
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).)	yes
Employee training	
Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
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
	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?  Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Does the agency document all such referrals?  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).)  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?  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?  Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment  Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retatiation for reporting sexual abuse and sexual harassment?  Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment victims?  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?  Does the agency train all employees who may have contact with inmates on how to communicate effectively and profes

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.)	na	
	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.)	па	
	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.)	na	
	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.)	na	
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.)	па	
115.35 (c)	Specialized training: Medical and mental health care		
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	na	
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.)	na	
	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.)	na	
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		

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) 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	<u> </u>
	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 being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

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115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	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 can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (a)	Inmate reporting  Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?  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?  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

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.	no
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, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, 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.)	па
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual 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 confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in 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 with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of 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 evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (I)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

Following an investigation into an immate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the immate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  It she approy did not conduct the investigation into an immate'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 immate? (NA if the agency/facility is responsible for conducting administrative and criminal investigations.)  It should be a should be agency to the agency subsequently inform 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 immate sural?  Following an inmate's allegation that a staff member has committed sexual abuse against the resident than 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 makes the agency has determined that the allegation is unfounded, or unless the resident makes the agency has determined that the allegation is unfounded, or unless the resident makes the agency has that the staff member has committed sexual abuse against 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 against the resident makes a leagual or that a staff member has been indicted on a charge related to sexual abuse against the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the allegation is unfounded, or unless the resident has been released from custody, does the	115.72 (a)	Evidentiary standard for administrative investigations	
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sexual abuse or sexual harassment policies?  Disciplinary sanctions for staff	115.76 (a)	Disciplinary sanctions for staff	
			yes
Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	115.76 (b)	Disciplinary sanctions for staff	
		Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish 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.)	na
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 § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual 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
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	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 where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

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