

# PREA AUDIT: Final Report



Original date completed: 1/31/2016
Dates revised:
Completed by: Gerald Grogan
Title: Certified PREA Auditor
Date of last agency PREA audit (if applicable): N/A
Date of last facility PREA audit: N/A

## AGENCY INFORMATION (IF APPLICABLE)

<b>Name of agency:</b> Passaic County Sheriff's Office	
<b>Governing authority or parent agency:</b> County of Passaic - Board of Chosen Freeholders	
<b>Physical address:</b> 401 Grand St. Paterson, NJ 07505	
<b>Mailing address:</b> (if different from above)	
<b>Telephone number:</b> 973-881-4000	
<b>The agency is:</b>	<input type="checkbox"/> Military <input checked="" type="checkbox"/> County <input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit <input type="checkbox"/> Municipal <input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit
<a href="#">Agency mission</a>	
<b>Agency Chief Executive Officer</b>	
<b>Name:</b> Richard H. Berdnik	<b>Title:</b> Sheriff
<b>Email address:</b> rberdnik@pcsheriff.org	<b>Telephone number:</b> 973-389-5900
<b>Agency-Wide PREA Coordinator</b>	
<b>Name:</b> Christopher Baker	<b>Title:</b> Officer
<b>Email address:</b> cbaker@pcsheriff.org	<b>Telephone number:</b> 973-881-4592
<b>PREA coordinator reports to:</b> Warden Michael Tolerico	
<b>Number of compliance managers who report to PREA coordinator:</b> 0	
<b>Agency website with PREA information:</b> www.pcsheriff.org	
<b>Is the agency accredited by any other organization?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

# PREA AUDIT: Final Report

## FACILITY INFORMATION

Name of Facility: Passaic County Jail

Physical Address: 11 Marshall St. Paterson, NJ 07501

Mailing address: (if different from above)

Telephone Number: 973-881-2400

The facility is:	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input checked="" type="checkbox"/> Jail	<input type="checkbox"/> Prison	

**Facility mission:** The mission of the Passaic County Sheriff's Office is to serve and safeguard all persons in Passaic County, insuring the quality of life for all, through effective and efficient delivery of crime prevention, law enforcement, court services, and detention.

Have there been any internal or external audits and/or accreditations for this facility  Yes  No *UPLOAD ANY RELEVANT REPORTS*

**Warden/Superintendent:**

Name of Warden/Superintendent: Michael Tolerico	Title: Warden
Email address: mtolerico@pcsheriff.org	Telephone number: 973-881-4619

**Facility PREA Compliance Manager**

Name of PREA Compliance Manager:	Title:
Email address:	Telephone number:

**Facility Health Service Administrator:**

Name of health service administrator: Robert Taylor	Title: Health Services Administrator
Email address: Robert.taylor@corizonhealth.com	Telephone number: 973-881-4623

**Facility Characteristics**

Designed Facility Capacity: 896	Current population of facility: 862	<b>Population reports</b>
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Number of inmates admitted to facility during the past 12 months : 6474

Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more

Number of inmates admitted to facility during the past 12 months whose length of stay was for 72 hours or more

Number of inmates on date of audit who were admitted to facility prior to August 20, 2012

Age range of population  Adults (range 18-70)  Youthful inmates (under 18) **N/A**

Are youthful inmates housed separately from the adult population?  Yes  No  N/A

Number of youthful inmates housed at this facility during the past 12 months: 0

Average length of stay or time under supervision: 48 days

Facility security levels/inmate custody levels: non-sentenced (minimum, medium, maximum), state sentenced, county sentenced

Number of staff assigned to the facility (including current staff and new hires) during the past 12 months: 336

Number of staff hired by the facility during the past 12 months who may have contact with inmates: 45

Number of staff assigned to the facility (including current and new hires) since the last audit: N/A

# PREA AUDIT: Final Report

<b>Number of contracts in the past 12 months for services with contractors who might have contact with inmates:</b> approximately 3	
<b>Physical Plant</b>	
<b>Number of buildings:</b> 1	<b>Number of single cell housing units:</b> 0
<b>Number of multiple occupancy cells housing units:</b> 19	
<b>Number of open bay/dorms housing units:</b> 31	
<b>Number of segregation cells (administrative and disciplinary):</b> 35	
<b>UPLOAD SCHEMATIC OF FACILITY LAYOUT</b>	
<b>Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):</b> Cameras are placed in every inmate housing dormitory. Video footage is retained for up to 90 days and copied to disc where necessary.	
<b>Medical</b>	
<b>Type of medical facility:</b>	
<b>Forensic sexual assault medical exams are conducted at:</b> off-site hospital	
<b>Other</b>	
<b>Number of volunteers and individual contractors currently authorized to enter the facility:</b> 221	
<b>Number of investigators the agency currently employs to investigate allegations of sexual abuse:</b> 5	

# **PREA AUDIT: Final Report**

## **Executive Summary**

### **NARRATIVE:**

#### **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The Passaic County Jail provides custodial services to those persons committed to its care and custody by the criminal justice system operating within the County of Passaic. Custody is provided for males and females who are awaiting trial in Municipal or Superior Court, pending community supervision violations, county sentenced, state sentenced, or awaiting transfer to other facilities.

The county jail is a linear style supervision facility that was originally constructed in 1954 with a State rated capacity of 240 inmates. In 1982, a fourth floor was added to the facility increasing inmate capacity by 170 beds. In 1988, a new wing was added increasing the capacity by 469 beds. In 2005, 14 medical beds were added and in 2007 an additional 28 beds were added to the fourth floor.

The facility employs sworn correction officers that oversee security, custody, and control of the facility. The facility also employs civilian staff whose duties include but are not limited to providing Medical and Mental Health care, commissary services, food service, and record-keeping.

Civilian and sworn staff both provide various services to the inmate population and the Passaic County community.

# PREA AUDIT: Final Report

## SUMMARY OF AUDIT FINDINGS:

### Agency Policies, procedures or written directives:

- ✚ Agency policy did not allow for transgender inmates to specify which gender staff could conduct searches of their person. (The policy has been updated and now meets compliance).
- ✚ Staffing Plan did not address all elements of the standard. (Revised staffing plan submitted and reviewed. The revised staffing plan meets compliance.)

### Documentation required by the standards:

- ✚ The PREA Coordinator was able to provide all necessary documents, training material, reports, etc. to demonstrate compliance with the Prison Rape Elimination Act.

### Facility Tour/Auditor observations:

- ✚ The auditor was given a tour of the facility and allowed to observe all housing areas.

### Personnel Interviews:

- ✚ Custody staff from all shifts were interviewed. All displayed excellent knowledge of their responsibilities and knowledge of the PREA standards.
- ✚ Specialty staff were equally knowledgeable and maintained logs and records required by the standards.
- ✚ Facility leadership is committed to maintaining a zero tolerance standard.

### Inmate Interviews:

41 inmates were interviewed.

The majority of inmates interviewed stated that they would report sexual abuse or harassment directly to staff.

All inmates interviewed, confirmed timely receipt of services.

Number of standards exceeded: 0

Number of standards met: 40

Number of standards not met: 0

Number of standards Not Applicable: 3

# PREA AUDIT: Final Report

**Standard number:** § 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment.**

**The facility has a policy outlining how it will implement the agency's zero-tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment. (Agency Policy: 2:5.2.3)**

**The policy includes definitions of prohibited behaviors regarding sexual assault and sexual harassment.**

**The policy includes sanctions for those found to have participated in prohibited behaviors. Section G of the agency's policy refers criminal cases to the county prosecutor. The policy includes a description of agency strategies and ways to reduce and prevent sexual abuse and sexual harassment of inmates.**

**The agency has an upper-level, agency-wide PREA coordinator.**

**The PREA coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. This was confirmed during an interview with the PREA Coordinator and the Warden.**

# PREA AUDIT: Final Report

**Standard number:** §115.12 Contracting with other entities for the confinement of inmates

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments:**

**Agency has no contracts with other agencies.**

# PREA AUDIT: Final Report

Standard number: [§ 115.13 Supervision and monitoring](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments

The agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring to protect inmates against abuse.

The agency uses the Staffing Analysis Plan published by the National Institute of Corrections. The plan calculates for the necessary amount of full time employees needed to operate the facility. The staffing plan did not include the 11 items mentioned in the standard; used in determining adequate staffing. After a brief corrective action period; the PREA Coordinator provided me with a revised staffing plan that included all the elements of the standard.

The agency reports that there were no deviations from the staffing plan in the last 12 months.

The facility requires that intermediate-level and higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The facility documents each unannounced round. The unannounced rounds cover all shifts and all areas of the facility. The facility prohibits staff from alerting other staff of the conduct of such rounds. Supervisor rounds were confirmed by reviewing log entries of rounds conducted, interviews with staff, supervisors, the PREA Coordinator and the Warden.



# PREA AUDIT: Final Report

Standard number: § 115.14 Youthful inmates

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments

Agency does not hold youthful offenders.

# PREA AUDIT: Final Report

Standard number: [§ 115.15 Limits to cross-gender viewing and searches](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

The facility does not conduct cross-gender strip and visual body cavity searches of inmates. Section 13 F 2 of the agency policy is not consistent with PRC training in reference to transgender strip-searches. Inmate preference is not allowed.

New Jersey law prohibits cross-gender searches.

After an exchange of e-mails with the PRC and a meeting with the PREA Coordinator and the Warden, the policy was revised to take inmate preference into consideration. The Warden informed me that transgender searches is currently under review for updating by the New Jersey Department of Corrections and New Jersey County Jail Warden's Association.

After reviewing the policy revision; I have determined that the agency is in compliance with the standard.

The facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances.

The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. Confirmed by interviews with staff and inmates.

Facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented.

The facility has implemented policies and procedures that enable inmates 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 checks (this includes viewing via video camera). Observed during onsite tour. All shower areas and toilets had curtains. Transgender or intersex inmates could be taken to a separate shower area if necessary.

Policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit. Observed during onsite tour and confirmed by inmate interviews.

The facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

All custody staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

# PREA AUDIT: Final Report

**Standard number:** § 115.16 Inmates with disabilities and inmates who are limited English proficient

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency has established procedures to provide disabled inmates 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.

The agency has established procedures to provide inmates with limited English proficiency 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.

Agency policy prohibits 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 responder duties under §115.64, or the investigation of the inmate's allegations.

The agency uses an interpreter service. The inmate handbook is also available in Spanish. Posted PREA information is also translated into Spanish.

# PREA AUDIT: Final Report

Standard number: § 115.17 Hiring and promotion decisions

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

Agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who:

(1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997);

(2) 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; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

Agency policy requires that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes 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. Confirmed by reviewing record check log provided by the PREA Coordinator.

Agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates.

Agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates or that a system is in place for otherwise capturing such information for current employees. Confirmed by reviewing record check log provided by the PREA Coordinator.

All employees must sign a document about previous misconduct when hired. They must also sign this affirmation during annual evaluations and when submitting documents for promotion.

Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

# PREA AUDIT: Final Report

Standard number: [§ 115.18 Upgrades to facilities and technologies](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

The facility has not acquired any new facilities or made any substantial expansions or modifications of existing facilities since August 20, 2012, or since the last PREA audit.

The 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.

# PREA AUDIT: Final Report

**Standard number:** § 115.21 Evidence protocol and forensic medical examinations

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

The agency/facility is responsible for conducting administrative or criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). All investigations are handled by an internal affairs division referred to as the Special Investigation Division (SID). All criminal cases are referred to the County Prosecutor's office.

The agency investigators follow a uniform evidence protocol. The protocol was adapted from or otherwise based on the most recent edition of the DOJ'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. This was confirmed during interviews with SID investigators.

The facility offers all victims of sexual abuse access to forensic medical examinations at an outside facility.

St. Joseph's Regional Medical Center in Paterson, NJ (this is the site of preference due to its proximity to the Passaic County Jail)

St. Mary's Hospital in Passaic, NJ;

Chilton Memorial Hospital in Pompton Plains, NJ.

Forensic medical examinations are offered without financial cost to the victim. (stated in policy)

Confirmed during an interview with the Medical Supervisor (HSA)

Examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).

The Agency is a member of the county's SART. (Sexual Assault Response Team)

The SART MOU provides all the necessary services to victims required by the standard including victim support at the hospital during forensic exams.

# PREA AUDIT: Final Report

**Standard number:** § 115.22 Policies to ensure referrals of allegations for investigations

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse or staff sexual misconduct).

The agency reported three (3) allegations of inmate-on-inmate sexual abuse and no allegations of sexual harassment within the last 12 months. One allegation was unsubstantiated and two were unfounded. None of the allegations involved penetration. All three allegations were administratively investigated. None were referred for criminal investigation. This was confirmed during the interview with SID (Special Investigations Division) investigators.

The agency has a policy that requires allegations of sexual abuse or sexual harassment be referred for investigation to SID. The agency conducts its own investigations.

# PREA AUDIT: Final Report

**Standard number:** § 115.31 Employee training

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency trains all employees who have contact with inmates on the following matters (check all that apply and indicate where in training curriculum this information is covered):

- ✓ Agency's zero-tolerance policy for sexual abuse and sexual harassment.
- ✓ How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.
- ✓ The right of inmates to be free from sexual abuse and sexual harassment.
- ✓ The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.
- ✓ The dynamics of sexual abuse and sexual harassment in confinement.
- ✓ 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.
- ✓ How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Training is tailored to the gender of the inmates at the facility.

Between trainings the agency provides employees with information about current policies regarding sexual abuse and harassment through a document management service. (PowerDMS) Employees receive refresher training on PREA requirements annually.

The agency documents that employees understand the training they have received through employee signature and electronic verification through PowerDMS.



# PREA AUDIT: Final Report

**Standard number:** [§ 115.32 Volunteer and contractor training](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments

All volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response. This was confirmed by reviewing training records and during interviews with contractors and volunteers.

The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. This was confirmed during review of the training material. (Lesson plans and power points)

All volunteers and contractors who have contact with inmates have at least been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The agency maintains documentation confirming that the volunteers/contractors understand the training they have received. Reviewed documentation with signatures and confirmed during interviews

# PREA AUDIT: Final Report

**Standard number:** § 115.33 Inmate education

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**Inmates receive information at time of intake (booking) about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment.**

**Inmates receive comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents. During the intake process; inmates receive an inmate handbook which includes the information mentioned above. The inmates also watch a PREA video in their housing units as scheduled by the agency.**

**Inmate PREA education is available in accessible formats for all inmates including those who are:**

- ✓ Limited English proficient (translator service is available)
- ✓ Deaf (available in written format)
- ✓ Visually impaired
- ✓ Otherwise disabled
- ✓ Limited in their reading skills (mental health assists with mentally challenged inmates)

**The agency maintains documentation of inmate participation in PREA education sessions and retains this information in the inmates file.**

**The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks. Each housing unit has PREA information posted. Telephones are readily available to all inmates.**

# PREA AUDIT: Final Report

**Standard number:** § 115.34 [Specialized training: Investigations](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency conducts its own investigations of allegations of sexual abuse, the agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. The agency maintains documentation showing that investigators have completed the required training.

Confirmed by reviewing training certificates from NIC and interviews with SID investigators.

# PREA AUDIT: Final Report

**Standard number:** § 115.35 Specialized training: Medical and mental health care

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

All full and part-time medical and mental health care practitioners who work regularly in the facility have been trained in:

How to detect and assess signs of sexual abuse and sexual harassment;

How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and

How and to whom to report allegations or suspicions of sexual abuse and sexual harassment

Agency medical staff at this facility do not conduct forensic exams.

The agency maintains documentation pertaining to the training referenced above.

Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency.

Confirmed by reviewing training records and interviews with the HSA, medical and mental health staff.

# PREA AUDIT: Final Report

**Standard number:** § 115.41 Screening for risk of victimization and abusiveness

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

The agency has a policy that requires screening (upon admission to a facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates. The policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. All inmates that were interviewed stated that this screening process was completed within the first hour after arriving at the facility.

The risk assessment is conducted using an objective screening instrument. The screening instrument contains all of the necessary questions and observations required by the standard. The screening instrument is used in determining the inmate's housing assignment. I interviewed an inmate that stated, during the screening process, that he felt he was vulnerable. The inmate told me, "I feel safe because they asked me those questions and gave me a choice to be housed alone or in a cell block with only a few people."

The policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.

The policy requires that the inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

The policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) the following questions:

Whether the inmate has a mental, physical, or developmental disability.

Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming.

Whether the inmate has previously experienced sexual victimization.

The inmate's own perception of vulnerability.

# PREA AUDIT: Final Report

**Standard number:** § 115.42 Use of screening information

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The facility uses information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. All information is reviewed by the classification section to make individualized determinations about how to ensure the safety of each inmate. This was confirmed during interviews with classification officers and reviewing inmate records.

The facility makes housing and program assignments for transgender or intersex inmates in a facility on a case-by-case basis.

# PREA AUDIT: Final Report

Standard number: § 115.43 Protective custody

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

The agency has a policy prohibiting the placing of 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. The agency reports that no inmates were placed in involuntary segregation. I observed during the on-site tour, the facility had plenty of available space to accommodate potentially vulnerable inmates without placing them in segregation.

If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.

# PREA AUDIT: Final Report

**Standard number:** § 115.51 [Inmate reporting](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about:

- Sexual abuse or sexual harassment;
- Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; AND
- Staff neglect or violation of responsibilities that may have contributed to such incidents.

The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. The information is posted in every unit in the facility and can also be found in the Inmate Handbook. The “hotline number” is toll free.

The agency has a policy requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

The agency has a policy mandating that staff accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously, and from third parties. Confirmed during interviews with staff.

Staff are required to document verbal reports immediately.

The agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates either by reporting to SID or use of the hotline.

Staff are informed of these procedures in the facility policy and in training.

During inmate interviews; the majority of inmates that were interviewed stated that they would tell the officer assigned to their unit or ask to speak with the sergeant. This response is unusual for a linear facility. Its more common in a facility with direct supervision. The staff should be commended for establishing the trust of the inmates.



# PREA AUDIT: Final Report

**Standard number:** § 115.52 Exhaustion of administrative remedies

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse. Agency policy or procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred. Agency policy does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. Agency policy and procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. Agency policy and procedure requires that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. Agency policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. Agency policy and procedure permits 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 and to file such requests on behalf of inmates. Agency policy and procedure requires that if the inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

The facility reports that there were no grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance requiring documentation of the inmate's decision to decline:

The agency has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith.

In the past 12 months, there have been no inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith:

# PREA AUDIT: Final Report

**Standard number:** § 115.53 [Inmate access to outside confidential support services](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by doing the following:**

**Gives inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. Made available in the inmate handbook, information posted in the housing unit or during office visits with mental health. Gives inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes.**

**Enables reasonable communication between inmates and these organizations in as confidential a manner as possible. Outlined by the SART MOU.**

**The facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law. This was confirmed through inmate interviews.**

**The agency or facility maintains memoranda of understanding or other agreements with community service providers that are able to provide inmates with emotional support services related to sexual abuse. Outlined by the SART MOU.**

# PREA AUDIT: Final Report

**Standard number:** § 115.54 [Third-party reporting](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**The facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment through the use of a 'hotline or by reporting directly to SID. The information is made available to all inmates in the inmate handbook and is posted in all housing units. This information is also available on the agency's web site for members of the public to report inmate sexual abuse or sexual harassment on behalf of inmates.**

# PREA AUDIT: Final Report

**Standard number:** § 115.61 Staff and agency reporting duties

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy retaliation against inmates or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Apart from reporting to the designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Confirmed through policy and training review, interviews with staff, the PREA Coordinator and the Warden.

# PREA AUDIT: Final Report

Standard number: § 115.62 Agency protection duties

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

**When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess appropriate protective measures without unreasonable delay). All staff stated during interviews that they would immediately remove the inmate from the housing area and notify their supervisor.**

# PREA AUDIT: Final Report

**Standard number:** § 115.63 [Reporting to other confinement facilities](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**The agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Warden must notify the head of the facility or appropriate office of the agency/facility where sexual abuse is alleged to have occurred.**

**Agency policy requires the Warden to provide such notification as soon as possible, but no later than 72 hours after receiving the allegation.**

**Agency policy requires that allegations received from other facilities/agencies are investigated.**

**The agency reports no occurrences related to this standard. Confirmed during interviews with the Warden and SID investigators.**

# PREA AUDIT: Final Report

**Standard number:** § 115.64 Staff first responder duties

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

The agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to:

- ✓ (1) Separate the alleged victim and abuser.
- ✓ (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
- ✓ (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.
- ✓ (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.

Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to (check all that apply):

- ✓ Request that the alleged victim not take any actions that could destroy physical evidence.
- ✓ (2) Notify security staff.

All staff (custody and non-custody) were knowledgeable of their first responder responsibilities and the agency responded appropriately to allegations.

# PREA AUDIT: Final Report

**Standard number:** § 115.65 Coordinated response

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The facility developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The facility is a member of the county's SART team. The SART MOU describes all stages of the response to include victim advocacy during the forensic medical exam.



# PREA AUDIT: Final Report

**Standard number:** § 115.66 Preservation of ability to protect inmates from contact with abusers

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

**Auditor comments:**

**The Agency's collective bargaining agreement is consistent with this standard. No conflicts exist.**

# PREA AUDIT: Final Report

**Standard number:** § 115.67 [Agency protection against retaliation](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**The agency has 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. The agency designates the PREA Coordinator with monitoring for possible retaliation. The agency reports that no incidents of retaliation occurred in the past 12 months. Confirmed during interviews with the PREA Coordinator, the Warden and staff.**

# PREA AUDIT: Final Report

**Standard number:** § 115.68 [Post-allegation protective custody](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**The agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a de-termination has been made that there is no available alter-native means of separation from likely abusers.**

**The agency reports that no inmates have been placed in involuntary segregated housing. Confirmed during interviews with classification officers.**

# PREA AUDIT: Final Report

**Standard number:** § 115.71 Criminal and administrative agency investigations

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**Reviewed agency policy related to criminal and administrative agency investigations; Evidence and Property; Criminal Investigations, substantiated allegations of conduct that appear to be criminal are referred for prosecution.**

**The agency retains all written reports pertaining to administrative or criminal investigation of alleged sexual assault or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.**

**Reports were reviewed during the interview with SID investigators.**

# **PREA AUDIT: Final Report**

**Standard number:** § 115.72 Evidentiary standard for administrative investigations

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**The agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.**

**Confirmed during interview with SID investigators and review of SID case files.**

# PREA AUDIT: Final Report

**Standard number:** § 115.73 Reporting to inmates

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.

Following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs 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. The agency has a policy that all notifications to inmates described under this standard are documented.

# PREA AUDIT: Final Report

**Standard number:** § 115.76 Disciplinary sanctions for staff

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**Agency policy states that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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 turned over to the county prosecutor's office, unless the activity was clearly not criminal, and to any relevant licensing bodies. Confirmed during interview with SID investigators and review of SID case files.**

# PREA AUDIT: Final Report

**Standard number:** [§ 115.77 Corrective action for contractors and volunteers](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to SID and the county prosecutor, unless the activity was clearly not criminal, and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. The facility takes remedial measures and prohibits further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.**



# PREA AUDIT: Final Report

**Standard number:** § 115.78 [Disciplinary sanctions for inmates](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse. Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. The facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for abuse through its mental health department. The facility does not consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.**

**The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.**

**The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.**

**The agency prohibits all sexual activity between inmates and disciplines inmates for such activity. The agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.**

# PREA AUDIT: Final Report

**Standard number:** § 115.81 Medical and mental health screenings; history of sexual abuse

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner. The follow-up meeting was offered in less than 14 days of the intake screening. I interviewed one inmate that disclosed prior victimization in the community. He stated that he has regular visits with mental health. During an interview with mental health, I reviewed the necessary documentation to demonstrate compliance with the above required services.

Information related to sexual victimization or abusiveness that occurred in an institutional setting is not limited to medical and mental health practitioners. The information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.

Reviewed consent documentation/logs obtained from inmates over age 18 by medical/mental health practitioners before reporting information about prior sexual victimization that did not occur in an institutional setting.

# **PREA AUDIT: Final Report**

**Standard number:** [§ 115.82 Access to emergency medical and mental health services](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.**

**Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.**

# PREA AUDIT: Final Report

**Standard number:** § 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

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. Female victims of sexual abuse while incarcerated are offered pregnancy tests. If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. The facility attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health. Confirmed during interviews with mental health.

# PREA AUDIT: Final Report

**Standard number:** § 115.86 Sexual abuse incident reviews

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

**The facility conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. Sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the investigation. The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. The facility implements the recommendations or improvements or documents its reasons for not doing so. Confirmed through interviews with the Warden and PREA Coordinator.**

# PREA AUDIT: Final Report

Standard number: § 115.87 Data collection

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments:

The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The agency aggregates the incident-based sexual abuse data at least annually. The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

The agency provided the Department of Justice data from the previous calendar year.

# PREA AUDIT: Final Report

**Standard number:** § 115.88 [Data review for corrective action](#)

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## Auditor comments

The agency reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including:

- Identifying problem areas;
- Taking corrective action on an ongoing basis; and
- Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.

The annual report includes a comparison of the current year's data and corrective actions with those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse. The agency makes its annual report readily available to the public at least annually through its website. The annual reports are approved by the Warden.

When the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. The agency indicates the nature of material redacted.

# PREA AUDIT: Final Report

**Standard number:** § 115.89 Data storage, publication, and destruction

Exceeds Standard (substantially exceeds requirement of standard)

- ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

## **Auditor comments:**

The agency ensures that the incident-based and aggregate data are securely retained. Agency policy requires that aggregated sexual abuse data from its be made readily available to the public at least annually through its website. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.



# PREA AUDIT: Final Report

## AUDITOR CERTIFICATION:

I certify that the contents of this report are accurate to the best of my knowledge and no conflict of interest exists with respect to my ability to conduct an audit of the agency under review.

*Gerald F Grogan*

Auditor Signature

*01/31/2016*

Date

**Coastal Virginia Correctional Consulting LLC**