# **PREA Facility Audit Report: Final**

Name of Facility: Central Cell Block Unit

Facility Type: Lockups

**Date Interim Report Submitted:** NA **Date Final Report Submitted:** 01/10/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	
Auditor Full Name as Signed: Bruce Kuennen	Date of Signature: 01/10/2023

AUDITOR INFORMATION	
Auditor name:	Kuennen, Bruce
Email:	kuennennw@gmail.com
Start Date of On- Site Audit:	11/29/2022
End Date of On-Site Audit:	11/30/2022

FACILITY INFORMATION	
Facility name:	Central Cell Block Unit
Facility physical address:	300 Indiana Avenue Northwest, Washington, Dist. Columbia - 20001
Facility mailing address:	

<b>Primary Contact</b>	
Name:	Cortney Savage
Email Address:	cortney.savage@dc.gov
Telephone Number:	202-431-9844

Sheriff/Chief/Director	
Name:	Thomas Faust
Email Address:	thomas.faust@dc.gov
Telephone Number:	202-671-2134

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Characteristics		
Designed facility capacity:	111	
Current population of facility:	16	
current population of facility.		
Average daily population for the past 12 months:	34	
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:	18-83	
Facility security levels/detainee custody levels:	minimum, medium, maximum	
Does the facility hold juveniles or youthful detainees?	No	
Number of staff currently employed at the facility who may have contact with detainees:	36	
Number of individual contractors who have contact with detainees, currently authorized to enter the facility:	4	
Number of volunteers who have contact with detainees, currently authorized to enter the facility:	0	

AGENCY INFORMATION	
Name of agency:	District of Columbia Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	2000 14th Street Northwest, Washington, Dist. Columbia - 20009
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:			
Name:			
Email Address:			
Telephone Number:			
Agency-Wide PRE	A Coordinator Infor	mation	
Name:	Cicily Harrington	Email Address:	cicily.harrington@dc.gov
SUMMARY OF AUD	IT FINDINGS		
The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.			
Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.			
Number of standards exceeded:			
0			
Number of standards met:			
35			
Number of standards not met:			
	0		

#### POST-AUDIT REPORTING INFORMATION GENERAL AUDIT INFORMATION **On-site Audit Dates** 1. Start date of the onsite portion of the 2022-11-29 audit: 2. End date of the onsite portion of the 2022-11-30 audit: Outreach O Yes 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide ( No services to this facility and/or who may have insight into relevant conditions in the facility? AUDITED FACILITY INFORMATION 14. Designated facility capacity: 111 34 15. Average daily population for the past 12 months: 16. Number of inmate/resident/detainee 2 housing units: Yes 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? ( No Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

# **Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit**

#### Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	33
38. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0

43. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0	
44. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0	
45. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0	
46. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	0	
47. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0	
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. Only one had a functional mental disability. She was extremely agitated and combative, so the auditor was unable to interview her. No detainees of the other targeted groups were identified in the screening.	
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit		
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	36	

50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0		
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	4		
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	Staff were very stable; none had been hired within the last year.		
INTERVIEWS			
Inmate/Resident/Detainee Interviews			
Random Inmate/Resident/Detain	Random Inmate/Resident/Detainee Interviews		
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	10		
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	Age Race Ethnicity (e.g., Hispanic, Non-Hispanic) Length of time in the facility		

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Two units - male and female - were both represented. The auditor attempted to get a representative sample of men and women.
56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	<ul><li>Yes</li><li>No</li></ul>
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Audit was scheduled to begin at 9:00 a.m. on Day One (a Tuesday). By the time detainee interviews were organized, and the first three detainees interviewed, all of the other detainees had been released. On day two, Wednesday, the auditor arranged to begin at 6:00 a.m., so that the minimum total number of detainees could be interviewed.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	0
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/ resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/ residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
60. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. No detainees of this targeted group were identified in the screening.
61. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. Only one had a functional mental disability. She was extremely agitated and combative, so the auditor was unable to interview her. No detainees of the other targeted groups were identified in the screening.

62. Enter the total number of interviews conducted with inmates/residents/ detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. No detainees of this targeted group were identified in the screening.
63. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. No detainees of this targeted group were identified in the screening.

64. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. No detainees of this targeted group were identified in the screening.
65. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. No detainees of this targeted group were identified in the screening.

66. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted sategory declined to be interviewed.
	targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. No detainees of this targeted group were identified in the screening.
67. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. No detainees of this targeted group were identified in the screening.

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68. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Auditor reviewed all 65 screening forms for detainees present on day 1 and day 2 of the audit. No detainees of this targeted group were identified in the screening.
69. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	No segregation unit.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	If the auditor had been advised of the extremely short lengths of stay, he would have scheduled the audit to begin late on a weekday evening, perhaps as late as 7:00 p.m. and/or on a Sunday.
Staff, Volunteer, and Con	tractor Interviews
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	12
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	■ Length of tenure in the facility  ■ Shift assignment  ■ Work assignment  ■ Rank (or equivalent)  ■ Other (e.g., gender, race, ethnicity, languages spoken)  ■ None
If "Other," describe:	Interviewed staff of both genders.
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<ul><li>Yes</li><li>No</li></ul>

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):

One shift ran from 9:00 p.m. to 5:00 a.m. The facility made a correctional office who was normally assigned to that shift available for an interview during the 5:00 a.m. to 1:00 p.m. shift.

#### Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	7
76. Were you able to interview the Agency Head?	<ul><li>Yes</li><li>No</li></ul>
a. Explain why it was not possible to interview the Agency Head:	The Director designated the Deputy Director of Operations, who reports to the Agency Director.
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	Yes No
78. Were you able to interview the PREA Coordinator?	<ul><li>Yes</li><li>No</li></ul>
79. Were you able to interview the PREA Compliance Manager?	No  NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this	Agency contract administrator
audit from the list below: (select all that apply)	Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
	Line staff who supervise youthful inmates (if applicable)
	Education and program staff who work with youthful inmates (if applicable)
	■ Medical staff
	Mental health staff
	Non-medical staff involved in cross-gender strip or visual searches
	Administrative (human resources) staff
	Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
	Investigative staff responsible for conducting administrative investigations
	Investigative staff responsible for conducting criminal investigations
	Staff who perform screening for risk of victimization and abusiveness
	Staff who supervise inmates in segregated housing/residents in isolation
	Staff on the sexual abuse incident review team
	Designated staff member charged with monitoring retaliation
	First responders, both security and non- security staff

	■ Intake staff
	Other
81. Did you interview VOLUNTEERS who	Yes
may have contact with inmates/ residents/detainees in this facility?	● No
82. Did you interview CONTRACTORS who may have contact with inmates/	● Yes
residents/detainees in this facility?	○ No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this	Security/detention
audit from the list below: (select all that apply)	Education/programming
арріу/	■ Medical/dental
	Food service
	☐ Maintenance/construction
	Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	None

# SITE REVIEW AND DOCUMENTATION SAMPLING

#### **Site Review**

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

Audit Reporting Information.	
84. Did you have access to all areas of the facility?	<ul><li>Yes</li><li>No</li></ul>
Was the site review an active, in the following:	quiring process that included
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, crossgender viewing and searches)?	
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<ul><li>Yes</li><li>No</li></ul>
a. Explain which critical functions you were unable to test per the site review component of the audit instrument and why:	No detainees were brought into the facility during the scheduled audit hours, all were released - i.e., the facility had no persons detained for more than half the time that the auditor was onsite.

87. Informal conversations with inmates/residents/detainees during the site	Yes
review (encouraged, not required)?	● No
88. Informal conversations with staff during the site review (encouraged, not required)?	● Yes ○ No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	None.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Used a random letter of the alphabet to determine which background check, training records, and similar documentation checks.  No randomization was used for intake or investigation files. All intake records of those housed were reviewed. There was only one investigation completed during the year preceding the audit (completing an investigation of an incident reported more

# SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

# Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	
Inmate-on- inmate sexual harassment	0	0	0	0
Staff-on- inmate sexual harassment	0	0	0	0
Total	0	0	0	0

# Sexual Abuse and Sexual Harassment Investigation Outcomes

#### **Sexual Abuse Investigation Outcomes**

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on- inmate sexual abuse	0	0	1	0	0
Staff-on- inmate sexual abuse	0	0	0	0	0
Total	0	0	1	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	1
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	1

#### **Sexual Harassment Investigation Outcomes**

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

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

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

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

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

# Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

#### **Sexual Abuse Investigation Files Selected for Review**

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

1
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99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<ul><li>Yes</li><li>No</li><li>NA (NA if you were unable to review any</li></ul>
	sexual abuse investigation files)
Inmate-on-inmate sexual abuse i	nvestigation files
100. Enter the total number of INMATE- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation	● Yes
files include criminal investigations?	No
	NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative	<ul><li>Yes</li><li>No</li></ul>
investigations?	NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse inv	estigation files
103. Enter the total number of STAFF- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	Yes  No
	NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	No  NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation	Files Selected for Review
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There were no cases.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	No  NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harass	ment investigation files
108. Enter the total number of INMATE- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	Yes  No  NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	No  NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassme	ent investigation files
111. Enter the total number of STAFF- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	No  NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	No  NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	There was only one investigation, filed in 2021, completed in 2022, It was investigated both administratively and criminally. The court dismissed the charge "with prejudice" . The administrative finding was that it was substantiated.

### SUPPORT STAFF INFORMATION **DOJ-certified PREA Auditors Support Staff** O Yes 115. Did you receive assistance from any **DOJ-CERTIFIED PREA AUDITORS at any** point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. Non-certified Support Staff O Yes 116. Did you receive assistance from any **NON-CERTIFIED SUPPORT STAFF at any** point during this audit? REMEMBER: the ( No audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. **AUDITING ARRANGEMENTS AND** COMPENSATION 121. Who paid you to conduct this audit? • The audited facility or its parent agency My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

#### **Standards**

#### **Auditor Overall Determination Definitions**

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

#### **Auditor Discussion Instructions**

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

#### 115.111 Zero tolerance of sexual abuse and sexual harassment

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2l, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct, January 2, 2017
- CCB Operations Manual, Directives Number 5009.1A, effective June 20, 2017
- DOC Organizational Chart
- PREA Information Flyer for CCB

#### **Interviews**

- Email response to Interview Questions, Deputy Director of Operations (Agency Head Designee)
- · Interview with Captain
- Interview with Agency PREA Coordinator
- Staff interviews
- Detainee interviews

#### **Site Review Observations**

- Posted signs.
- Observation of staffing levels

The agency's primary document, DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct, states its commitment to zero tolerance and outlines in detail the policies, procedures, and approach to prevent, detect, and respond to sexual abuse and sexual harassment. The CCB Operations Manual further describes the specific procedures required at the CCB

These policies, PREA informational pamphlets, posted signs, and staff interviews support the conclusion that a culture of zero tolerance is established at the facility. Inmate interviews were less than convincing on this subject, but every person interviewed had been at the facility less than 24 hours, and most less than 12 hours. Every interviewed detained person had been just arrested and many appeared to be under the influence of drugs or alcohol.

Of the ten detainees interviewed, only three indicated any knowledge of PREA and only those three had a reasonable understanding of the concept of zero tolerance. Five of the interviewed detainees indicated that they had been advised of the PREA hotline via signs posted throughout the facility.

All interviewed staff exhibited a strong knowledge of the PREA standards and of the agency's commitment to zero tolerance.

The Agency's PREA Coordinator position is full-time, dedicated to overseeing the agency's efforts to comply with PREA standards. She reports to the Chief of the Office of Investigative Services.

The primary evidence that the PREA Coordinator has sufficient time and authority to complete her job is the achievement of compliance with 100% of the standards reviewed in this report.

Analyzing the overall evidence against the negative interview responses of the persons detained leads the auditor to a judgment that the facility complies with this standard in all material ways.

115.112	Contracting with other entities for the confinement of detainees
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	Facility responses to Pre-Onsite Audit Questionnaire (PAQ)
	Interviews
	Interview with Agency PREA Coordinator
	The DC Department of Corrections has one current contract with a private agency, Reynolds and Associates, to house its inmates at a community confinement facility. It does not, however, have any contracts with other law enforcement agencies for the confinement of its lockup detainees.
	Based on this information, the auditor determined that the agency is in compliance with this standard.

#### 115.113 Supervision and monitoring

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- DC DOC Policy and Procedure 5010.8G, Staffing and Manpower Utilization, Dated October 15, 2019
- Master Staffing Analysis 2019

#### Interviews

- Interview with Agency PREA Coordinator
- Supervisory staff interviews
- · Detainee interviews

#### **Site Review Observations**

Observation and discussion of staffing levels

The facility provided a detailed staffing plan that outlines the minimum staffing levels for both line and supervisory staff and a recent plan review. The plan review outlines how each of the requirements – (a) (1) through (4) was met in setting the minimum staffing levels. In addition, the facility provided documentation of a formal staffing plan review for 2022.

The auditor confirmed that the minimum staffing levels for the facility as recommended by the staffing plan were in fact met. The facility provided documentation of how deviations from the staffing plan would be documented, but in practice this documentation has not been necessary.

The standard requires "heightened protection" for detainees who are identified by screening as vulnerable. The facility's cells are primarily two-person cells and population levels allow for the separation of these identified vulnerable detainees from detainees identified as predatory. Two cells are equipped with cameras inside the cells to allow additional monitoring of detainees who may need that level of supervision. Detainees are not allowed out of their cells without staff escort and there are no dayroom or other common areas where a predatory detainee might have direct contact with a vulnerable detainee.

The facility is equipped with internal security cameras, and the camera data is stored for possible use to support or contradict allegations of sexual abuse or harassment. These cameras are deployed in a manner which provides additional observation of detainees without compromising privacy concerns.

The low levels of substantiated reports of sexual abuse and sexual harassment for the one-year period prior to the on-site visit is further evidence of the adequacy of staffing levels.

Based on this evidence, the auditor finds that the facility meets this standard in all material aspects.

115 124	luveniles and venthful detains as
115.114	Juveniles and youthful detainees
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	Pre-audit Questionnaire (PAQ)
	Interviews
	<ul> <li>Detainee interviews</li> <li>Site Review Observations</li> <li>Observation of apparent age of detainees</li> </ul>
	The facility reported that no detainees under the age of 18 are held. Site review observations and detainee interviews supported the idea that the facility does not house detainees under the age of 18. On the site review (tour) the auditor observed no detainees whose youthful appearance required him to ask for verification of age.
	Documents were reviewed which contained the ages of all detainees held during the onsite audit. None of these interviews or records indicated that a detainee was under the age of 18.
	All evidence leads to a finding of compliance with standard 115.114.

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

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- CCB Operations Manual, Directives Number 5009.1A
- Individual staff training records

#### Interviews

- · Staff interviews
- Detainee interviews

#### **Site Review**

- Observation of opposite gender announcements
- Observation of posted signs

Statements of facts, staff interviews, and auditor observations consistently indicated that the facility does not conduct cross-gender visual body searches. One hundred percent of detainee interviews indicated that they had not been subject to such searches.

DC Department of Corrections policy requires that correctional officers make their best efforts to allow offenders to shower, perform bodily functions, and change clothing without 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. The facility's showers are inoperable; detainees are not allowed to shower during their brief stays at the facility.

Policy requires that staff of the opposite gender announce their presence when entering an offender housing area. The auditor verified that this occurred consistently during the site review. Staff and most detainee interviews indicated that this occurs in regular practice. In addition, signs posted at appropriate places in the facility serve to remind detainees and staff about opposite gender announcements.

The auditor confirmed that proper means of conducting detainee pat searches were a part of both preservice and in-service training. Interviewed staff confirmed that they had received this training.

Upon review of this evidence, the auditor concluded that the facility does fully comply with all provisions of this standard.

# Detainees with disabilities and detainees who are limited English proficient

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

#### **Documents**

DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct

CCB Operations Manual, Directives Number 5009.1A DC Office of Human Rights Language Access Program

#### Interviews

- · Staff interviews
- Resident interviews

#### **Site Review**

Observations

DC DOC Policy and Procedure 3350.2I and the CCB Operations Manual, Directives Number 5009.1A outline the agency's requirements to effectively communicate with residents with disabilities.

Staff and resident interviews indicated that the facility does not rely solely on printed materials in English to communicate with residents; intake, education, acceptance of complaints and reports of abuse or harassment, and investigations all involve face-to-face staff/resident contact so that an assessment can be made of the resident's understanding of the communication.

Policy statements, resident and staff interviews, all indicate compliance with this standard.

### 115.117 Hiring and promotion decisions

**Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- DC DOC Policy and Procedure 3040.6H Personnel Security and Suitability Investigations
- Facility responses to PREA Pre-Audit Questionnaire
- Employment Applications
- Background Investigation Worksheets

#### Interviews

- Interview with Agency PREA Coordinator
- Interviews with supervisory staff

Review of documents and staff interviews indicate that the facility ensures that it does not hire or promote anyone who will have contact with detainees who has engaged in prior sexual abuse or harassment at a correctional facility by the following means:

- Criminal background checks
- Signed staff acknowledgment of affirmative duty to disclose such behavior.
- Criminal background checks of all staff upon third anniversary of hire

The auditor requested and reviewed the evidence provided by the facility for randomly chosen employees had passed the background check process before they began work at the facility and those that had been there longer than three years had been checked, and passed, within the last three years.

These same procedures are followed for contractors who have contact with detainees. The facility does not use volunteers. Supervisory staff interviews verified that this practice is followed in practice.

The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.118	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	Facility responses to PREA Pre-Audit Questionnaire
	Interviews
	PREA Compliance Manager Interview
	Site Review
	<ul><li>Observation of apparent age of camera system</li><li>View of camera locations</li></ul>
	Although the camera system at the CCB is more than three years old, the department installed video cameras and upgraded existing cameras at both of their other facilities. These facilities are jails, not lockups. Factors related to the prevention of sexual abuse were considered in those projects and the designs paid particular attention to blind spots and privacy.
	The provisions of the standard are confirmed to be not applicable to this lockup facility, so that In the auditor's judgment, the agency complies with this standard.

### 115.121 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

#### **Documents**

- Facility responses to Pre-Audit Questionnaire
- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- Memorandum of Understanding SANE Program / Medstar Washington Hospital Program

#### **Interviews**

- Agency PREA Coordinator interview
- Investigator interview
- Staff interviews

DC DOC Policy and Procedure 3350.2l requires appropriate procedural steps for an investigation. The facility tracks the procedural steps required by this standard:

- Access to forensic medical examinations
- Examination by SAFE or SANE practitioners where available
- Access to a victim advocate where available

Criminal investigations are handled by the DC Metropolitan Police. The department has requested that the agency follow the protocols required by the standard. The department does not employ SAFE or SANE staff. Forensic examinations are provided at local hospitals, including the Medstar Washington Hospital Program, which has an MOU with the District of Columbia SANE Program.

The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

## 115.122 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

#### **Documents**

- Facility responses to Pre-Audit Questionnaire
- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct

#### **Interviews**

Agency PREA Coordinator interview

#### Website review

The agency has the above-listed policy and procedure which requires administrative and criminal investigations in the event of detainee or third-party allegations of sexual abuse or harassment. The department's website clearly specifies the methods of making a third-party report of sexual abuse or sexual harassment.

The policies clearly delineate the responsibilities of facility's Office of Professional Responsibility and that of the outside investigative agency, the District of Columbia Metropolitan Police. This policy delineation of responsibility is made available to the public via the agency's website as required by the standard.

The auditor's review of this evidence leads him to the conclusion that this standard was fully met in policy, procedure, and practice at the time of the on-site audit.

### 115.131 Employee and volunteer training

**Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- Facility responses to PREA Pre-Audit Questionnaire
- All Staff PREA Training Report
- Detailed Outline (RELIAS Learning) PREA
- Detailed Outline (RELIAS Learning) Dynamics of Sexual Abuse in Correctional Systems
- Detailed Outline (RELIAS Learning) Reporting Obligations and Retaliation Protections
- Individual Records Pat Search Training

#### Interviews

- Agency PREA Coordinator interview
- Staff interviews

Department policies and directives require that all staff who have contact with detainees receive PREA training upon hire (before being assigned to work on a unit), and annually thereafter. The training includes:

- Zero tolerance
- Prevention, detection, reporting, and response
- Detainees' rights
- Retaliation
- · Sexual abuse and harassment in confinement
- Common reactions of victims
- Detection and response to threatened or actual abuse
- Inappropriate relationships with detainees
- · Communication with LGBTI detainees
- · Mandatory reporting

Department policies require, and auditor interviews and document review indicate that all staff receive this training and understand its content. The training records for randomly selected corrections staff provided evidence that all had completed and signed off as understanding the relevant initial or annual training. Twelve facility line staff (privates and corporals) were interviewed, and all demonstrated a good understanding of their responsibilities regarding the prevention, detection, and response to incidents of sexual abuse and harassment.

The auditor's review of this evidence leads him to the conclusion that this standard

is met in policy, procedure, and practice.

# Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

#### **Documents**

- Facility responses to PREA Pre-Audit Questionnaire
- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- Training Outline Contract Employees

#### Interviews

Agency PREA Coordinator interview

Department policies and directives require that all contract employees and all volunteers who have contact with detainees receive PREA training upon engagement (before being assigned to volunteer on a unit), and annually thereafter. The training includes:

- Zero tolerance
- Prevention, detection, reporting, and response
- Detainees' rights
- Retaliation
- Sexual abuse and harassment in confinement
- Common reactions of victims
- Detection and response to threatened or actual abuse
- Inappropriate relationships with detainees
- · Communication with LGBTI detainees
- Mandatory reporting

Contractors receive the same training as employees. No contract staff or volunteers were in service at the time of the onsite audit. Staff interviews indicated that these procedures are followed when contractors or volunteers are used at the facility.

The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.134	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>Facility responses to PREA Pre-Audit Questionnaire</li> <li>Training certificates for investigators</li> <li>Training Records</li> </ul>
	The department requires agency investigators to complete training relating to investigating sexual abuse in a confinement setting. The facility provided documentation that all members of the Office of Professional Responsibility, including those who would be assigned to investigate an incident at the CCB had received this training.
	Policy statements and document review indicate compliance with this standard.

## 115.141 Screening for risk of victimization and abusiveness

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- CCB Operations Manual, Directives Number 5009.1A
- Completed Screening Forms for detainees booked during onsite audit

#### **Interviews**

- Staff interviews
- Detainee interviews

#### **Site Review Observations**

Posted signs

As required by DC DOC Policies and the CCB Operations Manual all detainees are screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees.

Detainee and staff interviews indicated that staff ask screening questions including a question about his or her own perception of vulnerability. The completed screening forms documented that the required questions and observations of the standard were asked and answered by all detainees housed during the onsite audit..

The screening process also considered the following criteria to screen detainees for risk of sexual victimization:

- Whether the detainee has a mental, physical, or developmental disability
- The age of the detainee
- The physical build and appearance of the detainee
- Whether the detainee has previously been incarcerated
- The nature of the detainee's alleged offense and criminal history

Based on this information, the auditor believes that a finding of full compliance is warranted for this standard.

## 115.151 Detainee reporting

**Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- CCB Operations Manual, Directives Number 5009.1A

#### Interviews

- Staff interviews
- · Detainee interviews

#### **Site Review Observations**

Posted signs – English and Spanish

As required by DC DOC Policies and the CCB Operations Manual, all detainees are advised of multiple means of reporting sexual abuse or harassment verbally and via posted signs. In addition to notifying any staff member, detainees can call the PREA hotline number which is posted on the wall in the booking area and other locations in the facility.

A staff report may be made at any time. As telephone calls are not normally allowed, external confidential reports may have to wait until detainees have access to their attorneys - within 24 hours of their admission to the facility on Sunday through Friday. The courts operate every day of the week except Sundays, regardless of holidays. A person detained on Saturday after 2:00 p.m. or on Sunday may have to wait until the following Monday to have access to his or her attorney and/or a telephone call.

The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.154	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>CCB Operations Manual, Directives Number 5009.1A</li> </ul>
	Interviews
	<ul><li>Staff interviews</li><li>Detainee interviews</li></ul>
	Website Review
	https://doc.dc.gov/publication/doc-prea-safety-and-security-reports
	As required by DC DOC Policies and the CCB Operations Manual, all family members and other third parties may report sexual abuse or harassment to the DC Victim Hotline or directly to the DOC PREA Coordinator.
	The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

## 115.161 Staff and agency reporting duties Auditor Overall Determination: Meets Standard **Auditor Discussion Documents** DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct • CCB Operations Manual, Directives Number 5009.1A Interviews · Staff interviews · Medical Staff interview Department policies and directives, and staff training require immediate reporting of circumstances placing a detainee in immediate risk of sexual abuse, and action to protect the detainee in danger. These same policies require staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in an agency lockup; retaliation against detainees or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Correctional and medical staff interviews consistently demonstrated an

understanding of these requirements. The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.162	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
	CCB Operations Manual, Directives Number 5009.1A
	Interviews
	<ul><li>Agency PREA Coordinator Interview</li><li>Staff interviews</li></ul>
	Department policies and directives, and staff training require an immediate response in the case of a resident. Although no reports or discovery of emergency circumstances occurred in the one-year review period, it appears that all staff have a cleat idea of how to effectively make such an immediate response.
	The auditor's review of this evidence leads him to a finding of full compliance for this standard.

115.163	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>Facility responses to Pre-audit questionnaire</li> </ul>
	Interviews
	Agency PREA Coordinator Interview
	Department policies and staff training require reporting to other facilities within 72 hours in the event of a report of sexual abuse or harassment at another facility. It would be unusual for such a report to be made at this lockup, because virtually all detainees are brought to this facility by local law enforcement subsequent to arrest in the community. Although there have been no such reports at the facility in the past year, staff interviews consistently demonstrated an understanding of these requirements, which are clearly outlined in policy and training materials.
	The auditor's review of this evidence leads him to the conclusion that this standard

is met in policy, procedure, and practice.

115.164	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>Facility responses to Pre-audit questionnaire</li> <li>Training Records</li> </ul>
	Interviews
	<ul><li>Staff interviews</li><li>Contract Medical staff interview</li></ul>
	Department policies and staff training require separation of the alleged victim and abuser by the first responder, and actions to preserve the crime scene and preserve evidence. Policies also require these actions of non-custody staff if they are the first responders to an incident.
	Staff and contractor interviews and training materials consistently supported that staff have an understanding of these requirements. All interviewed staff understood their responsibilities for response, separation of victim from perpetrator, notification of supervisory staff, preservation of evidence, and incident documentation.
	The auditor's review of this evidence leads him to a conclusion of full compliance

with this standard.

115.165	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> </ul>
	Interviews
	<ul> <li>Staff interviews</li> <li>Agency PREA Coordinator</li> <li>Contract Medical staff interview</li> <li>Investigator interview</li> </ul>
	Department policies and staff training require separation of the alleged victim and abuser by the first responder, and actions to preserve the crime scene and preserve evidence. A detailed coordinated response plan has been developed for the main jail, outlining the responsibilities of corrections staff, medical and mental health providers, the Agency PREA Coordinator, supervisory staff, investigators, and the Director.
	Staff and contract staff interviews, and training materials consistently supported that staff understand their roles in this coordinated plan. The auditor's review of this evidence leads him to a conclusion of full compliance with this standard.

## Preservation of ability to protect detainees from contact with 115.166 abusers **Auditor Overall Determination:** Meets Standard **Auditor Discussion Documents** • Facility responses to pre-audit questionnaire · Contract documents **Interviews** Agency PREA Coordinator interview • Interview with Agency Head (designee) • Interview with Captain The auditor's review of the above-listed materials and the listed interviews found no evidence of a clause or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

This standard is in full compliance.

## 115.167 Agency protection against retaliation **Auditor Overall Determination: Meets Standard Auditor Discussion Documents** • DC DOC Policy and Procedure 3350.2l, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct • Facility responses to Pre-audit questionnaire Example of PREA 90-day Review and Tracking Form Interviews Agency PREA Coordinator interview DC DOC Policy and Procedure 3350.2I outlines the plan to monitor a detainee's housing, program, and disciplinary status for 90 days following the investigation of an incident of sexual abuse. Policies dictate the prohibitions against retaliation and the disciplinary consequences for those who do so. The Agency PREA Compliance Manager is required by policy to designate who is to perform this monitoring. The department has developed a form to document the monitoring of the required areas every 30 days, for a period of 90 days. While there were no cases to review, the facility's policies and paperwork demonstrated that there is an active documented process for monitoring retaliation.

The auditor's review of this evidence leads him to the conclusion that this standard

is met in policy, procedure, and in practice.

## 115.171 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- · Facility responses to Pre-audit questionnaire
- Training records of staff investigators
- Records of one completed investigation

#### Interviews

- Agency PREA Coordinator
- Staff interviews
- Investigator interview

Department policies and procedures require the following:

- Prompt, thorough, and objective investigations
- Investigation of all allegations, including those from third parties
- Use of available physical and DNA evidence and available electronic monitoring data (video)
- Interviews of alleged victims, suspected perpetrators, and witnesses
- Review of prior reports and complaints of sexual abuse involving the suspected perpetrator
- Assessment of the credibility of an alleged victim, suspect, or witness on an individual basis
- Efforts to determine whether staff actions or failures to act contributed to the abuse

Further, department policies and procedures require

- Investigations performed by persons who have received specialized training to conduct such investigations
- Written reports which contain a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings
- That the departure of an alleged abuser or victim from the employment or custody of the agency does not provide a basis for terminating an investigation

While no reports or allegations were received within the last 12 months, one investigation of an incident occurring in the previous 12 month period was

completed. The auditor reviewed this file and determined that all appropriate steps were taken by an appropriately trained investigator and well-documented in the file.

Staff interviews, and review of the one completed investigation from the last 12 months indicate that these policies and procedures are consistently followed. Records retention policies require that such records must be retained.

The auditor's review of this evidence leads him to the conclusion that this standard is met in all substantial ways in policy, procedure, and practice.

115.172	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>Facility responses to Pre-Audit Questionnaire</li> <li>Completed investigative file</li> </ul>
	Interviews
	Investigative staff interview
	Department policies and the investigative staff interview indicate that the standard determining whether allegations of sexual abuse or sexual harassment are substantiated is a preponderance of the evidence. A review of one completed investigation revealed no instances of applying a higher standard.
	The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.176	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>Facility responses to Pre-Audit Questionnaire</li> </ul>
	Interviews
	<ul><li>Agency PREA Coordinator</li><li>Staff interviews</li></ul>
	The language of the standard is repeated DC DOC Policy and Procedure 3350.2I. No instances of staff violations of agency sexual abuse or sexual harassment policies have occurred in the past 12 months.
	The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.177	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>Contract Employees Orientation Materials</li> <li>Training Outline - Volunteers</li> <li>Facility responses to PREA Pre-Audit Questionnaire</li> </ul> Interviews
	Agency PREA Compliance Coordinator interview
	The language of the standard is repeated in DC DOC Policy and Procedure 3350.2I.  No instances of contractor or volunteer violations of agency sexual abuse or sexual harassment policies have occurred in the past 12 months.
	The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.178	Referral for prosecution for detainee-on-detainee sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>Facility responses to PREA Pre-Audit Questionnaire</li> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>Completed investigation file</li> </ul>
	Interviews
	Investigator interview  Department policies and procedures require that:
	<ul> <li>When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, the agency shall refer the matter to the appropriate prosecuting authority.</li> <li>To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall inform the investigating entity of this policy.</li> </ul>
	The investigator interview and review of the one completed investigative record indicate that these policies are followed in practice. The auditor's review of this

evidence leads him to the conclusion that this standard is met in policy, procedure,

and practice.

115.182	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>Facility responses to PREA Pre-Audit Questionnaire</li> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> </ul>
	Interviews
	<ul><li>Staff interviews</li><li>Detainee interviews</li><li>Medical staff interview</li></ul>
	DC DOC Policy and Procedure 3350.2I require:
	<ul> <li>Detainee victims of sexual abuse in lockups shall receive timely, unimpeded access to emergency medical treatment.</li> <li>Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</li> </ul>
	Review of detainee records and staff, medical, and detainee interviews indicate that these policies are followed in practice. The auditor's review of this evidence leads

him to the conclusion that this standard is met in policy, procedure, and practice.

#### 115.186 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

#### **Documents**

- DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct
- Minutes of Sexual Abuse Incident Review Team (SAIRT), January 26, 2022

#### **Interviews**

- Agency PREA Coordinator interview
- Facility Manager interview

DC DOC Policies require an administrative review of all alleged sexual abuse and sexual harassment incidents, unless determined unfounded. The facility manager is required to obtain input from supervisory staff, investigators, and medical or mental health practitioners when completing the review. The review team includes upper-level management, with input from line supervisors, investigators, and medical or mental health practitioners. The facility is required to implement recommendations that result from the review, or to document the reasons for not doing so.

Department policy requires the facility manager or designee to conduct a prompt, thorough investigation, after reporting a serious or unusual incident and to complete an Administrative Incident Review. The review is required to include:

- A review of the circumstances of the incident
- The name(s) of the person(s) involved
- · Events leading up to and following the incident
- A consideration of whether the actions taken were consistent with policies and procedures
- A review of whether lesser alternative means of managing the situation were available
- An identification of actions, if any, that could be taken to avoid future incidents of a similar nature and identification of training needs
- A determination of whether employee action or inaction was a factor

The case for which the investigation was completed within the last year required a special incident review. It was appropriately reviewed at a SAIRT meeting held within 30 days of the completion of the investigation. The SAIRT team included the persons required. It determined that the actions taken by staff were consistent with policies and procedures. It also determined that lesser alternative means of managing the situation were not available. It determined that the incident did not point to any actions necessary, or training required to avoid future incidents of a

similar nature. Finally, the committee found that employee action or inaction was not a factor in this unsubstantiated incident.

In the auditor's view, this evidence is sufficient to demonstrate that these policies and the requirements of the standard are followed in practice. The auditor's review of the evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.187	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>PREA Annual Report – 2021</li> </ul>
	Completed Surveys of Sexual Victimization, 2018, 2019, 2020
	Interviews
	Agency PREA Coordinator interview
	Policies and Procedures require these statistics to be collected in accordance with Bureau of Justice Statistics (BJS) guidelines. The most recent statistical report and annual report at the time of the on-site audit was for calendar year 2021. The reports included the required statistics and analysis. The facility reported that the Department of Justice (DOJ) did not request this data for 2021, the most recent full calendar year prior to the audit.
	In the auditor's judgment, this documentation demonstrates that the agency complies in all material ways with the standard for the relevant review period. The auditor's review of this evidence leads him to the conclusion that this standard is

met in policy, procedure, and practice.

115.188	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	<ul> <li>DC DOC Policy and Procedure 3350.2I, Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct</li> <li>PREA Annual Reports – 2019, 2020, 2021</li> </ul>
	Interviews
	Agency PREA Coordinator interview
	Website Review
	DC DOC Web Pages
	Policies and Procedures require these statistics to be used to evaluate and improve operations to enhance detainee safety. The most recent statistical information contained in the 2021 annual report compared the data from the previous year and discussed changes considered and made to address issues suggested by the data.
	In the auditor's judgment, this documentation demonstrates that the agency complies in all material ways with the standard for the relevant review period.

115.189	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	PREA Annual Reports
	Interviews
	Agency PREA Coordinator interview
	Policy requires the maintenance of a retention schedule. That schedule requires PREA related data to be maintained for 10 years. No personally identifiable data is included in the information made available to the public. The recent annual reports include all aggregated sexual abuse data.
	In the auditor's judgment, this documentation demonstrates that the agency complies in all material ways with the standard for the relevant review period.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents
	Email attachments, notably time-stamped photographs of signs posted prior to audit
	Interviews
	<ul><li>Staff interviews</li><li>Detainee interviews</li></ul>
	The auditor had access to, and the ability to observe all areas of the audited facility. The auditor was given access to documents sufficient to make determinations of compliance; copies of all relevant documents were provided. Private interviews were conducted with the required number and categories of detainees.
	Detainees were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. No letters were received.
	The auditor was permitted to request and receive copies of all relevant documents (including electronically stored information). Staff assigned to work all three shifts were made available for interviews.
	The auditor's review of this evidence leads him to the conclusion that this standard is met in policy, procedure, and practice.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Website Review
	<ul> <li>https://doc.dc.gov/publication/doc-prea-safety-and-security-re ports</li> </ul>
	Interview
	Agency PREA Coordinator interview
	The auditor verified that the Final Report for facilities audited prior to this audit were posted to the website. This evidence supports the conclusion that the agency complies with this standard.

Appendix:	Appendix: Provision Findings		
115.111 (a)	Zero tolerance of sexual abuse and sexual harassment		
	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	
115.111 (b)	Zero tolerance of sexual abuse and sexual harassment		
	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 lockups?	yes	
115.112 (a)	Contracting with other entities for the confinement of detainees		
	If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.)	na	
115.112 (b)	Contracting with other entities for the confinement o detainees	f	
	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 law enforcement agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".)	na	

115.113 (a)	Supervision and monitoring	
	Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the detainee population?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.113 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na

115.113 (c)	Supervision and monitoring	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: 1. The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The lockup's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The resources the lockup has available to commit to ensure adequate staffing levels?	yes
115.113 (d)	Supervision and monitoring	
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Continuous direct sight and sound supervision?	yes
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Single-cell housing or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible?	yes
115.114 (a)	Juveniles and youthful detainees	
	Are juveniles and youthful detainees held separately from adult detainees? (N/A if the facility does not hold juveniles or youthful detainees (detainees <18 years old).)	na
115.115 (a)	Limits to cross-gender viewing and searches	
	Does the lockup always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.115 (b)	Limits to cross-gender viewing and searches	
	Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
115.115 (c)	Limits to cross-gender viewing and searches	
	Does the lockup implement policies and procedures that enable detainees 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 lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing?	yes
115.115 (d)	Limits to cross-gender viewing and searches	
	Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status?	yes
	If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.115 (e)	Limits to cross-gender viewing and searches	
	Does the agency train law enforcement 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 agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.116 (a)	Detainees with disabilities and detainees who are limited English proficient	
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees 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 the overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with detainees 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	yes

	Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations?	yes
115.116 (c)	Detainees with disabilities and detainees who are limenters. English proficient	nited
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	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 detainees who are limited English proficient?	yes
115.116 (b)	Detainees with disabilities and detainees who are limental English proficient	nited
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: are blind or have low vision?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have limited reading skills?	yes
	formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have intellectual disabilities?	

115.117 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees 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 detainees 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 detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: o 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 detainees 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 detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
115.117 (b)	Hiring and promotion decisions	
	Does the agency consider 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 detainees?	yes

115.117 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with detainees, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with detainees, 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
115.117 (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 detainees?	yes
115.117 (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 detainees or have in place a system for otherwise capturing such information for current employees?	yes
115.117 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with detainees 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 detainees 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

115.117 (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
115.117 (h)	Hiring and promotion decisions	
	Unless prohibited by law, 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
115.118 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new lockup or planned any substantial expansion or modification of existing lockups, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees 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
115.118 (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 detainees 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

115.121 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse in its lockups, 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
115.121 (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
115.121 (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

115.121 (d)	Evidence protocol and forensic medical examinations	
	If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs?	yes
115.121 (e)	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 entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.122 (a)	Policies to ensure referrals of allegations for investig	ations
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.122 (b)	Policies to ensure referrals of allegations for investig	ations
	If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	yes
	Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	yes
	Does the agency document all such referrals? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	yes

115.131 (a)	Employee and volunteer training	
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.131 (b)	Employee and volunteer training	
	Have all current employees and volunteers who may have contact with detainees received such training?	yes
	Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
115.131 (c)	Employee and volunteer training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.132 (a)	Detainee, contractor, and inmate worker notification agency's zero-tolerance policy	of the
	During the intake process, do employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
115.132 (b)	Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy	
	Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
115.134 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees and volunteers pursuant to §115.131, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received 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 115.121(a).)	yes

115.134 (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 115.121(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 115.121(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 115.121(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 115.121(a).)	yes
115.134 (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 115.121(a).)	yes
115.141 (a)	Screening for risk of victimization and abusiveness	
	If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.)	na
	When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.)	na

115.141 (b)	Screening for risk of victimization and abusiveness	
	If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.)	yes
115.141 (c)	Screening for risk of victimization and abusiveness	

115.141 (d)	Screening for risk of victimization and abusiveness	
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability. (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense and criminal history? (N/A if lockup is NOT used to house detainees overnight.)	yes

115.151 (a)	Detainee reporting	
	Does the agency provide multiple ways for detainees to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.151 (b)	Detainee reporting	
	Does the agency also provide at least one way for idetainees 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 entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the detainee to remain anonymous upon request?	yes
115.151 (c)	Detainee reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment ?	yes
115.151 (d)	Detainee reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees?	yes

115.154 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee?	yes
115.161 (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 an agency lockup?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident?	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
115.161 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do 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, and investigation decisions?	yes
115.161 (c)	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

115.161 (d)	Staff and agency reporting duties	
	Does the agency report all allegations of sexual abuse, including third-party and anonymous reports, to the agency's designated investigators?	yes
115.162 (a)	Agency protection duties	
	When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee?	yes
115.163 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a detainee 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
115.163 (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
115.163 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.163 (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

115.164 (a)	Staff first responder duties	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement 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 a detainee was sexually abused, is the first law enforcement 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 a detainee was sexually abused, is the first law enforcement 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
115.164 (b)	Staff first responder duties	
	If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff?	yes

115.165 (a)	Coordinated response	
	Has the agency 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 a lockup incident of sexual abuse?	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim's potential need for medical or social services?	yes
115.165 (b)	Coordinated response	
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the victim¹s potential need for medical or social services unless the victim requests otherwise?  (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	yes
115.166 (a)	Preservation of ability to protect detainees from contabusers	tact with
	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 limits the agency's ability to remove alleged staff sexual abusers from contact with detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.167 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.167 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.167 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation?	yes
115.167 (d)	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

115.171 (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 115.121(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 115.121(a).)	yes
115.171 (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 115.134?	yes
115.171 (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
115.171 (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

115.171 (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 detainee or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.171 (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
115.171 (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
115.171 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.171 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.171(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.171 (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 lockup or agency does not provide a basis for terminating an investigation?	yes

115.171 (I)	Criminal and administrative agency investigations	
	When outside agencies investigate sexual abuse, does the agency 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 115.121(a).)	yes
115.172 (a)	Evidentiary standard for administrative investigation	S
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.176 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.176 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.176 (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

115.176 (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: o 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
115.177 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees?	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
115.177 (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 detainees?	yes
115.178 (a)	Referral for prosecution for detainee-on-detainee sex	cual abuse
	When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?	yes

115.178 (b)	Referral for prosecution for detainee-on-detainee sexual abuse	
	If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See 115.121(a).)	yes
115.182 (a)	Access to emergency medical and mental health serv	rices
	Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment?	yes
115.182 (b)	Access to emergency medical and mental health serv	rices
	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
115.186 (a)	Sexual abuse incident reviews	
	Does the lockup 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
115.186 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.186 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors and investigators?	yes

115.186 (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 was motivated or otherwise caused by other group dynamics at the lockup?	yes
	Does the review team: Examine the area in the lockup 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 §§ 115.186(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator?	yes
115.186 (e)	Sexual abuse incident reviews	
	Does the lockup implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.187 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions?	yes
115.187 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.187 (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 Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups?	yes
115.187 (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
115.187 (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 detainees? (N/A if the agency does not contract for the confinement of its detainees.)	yes
115.187 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.188 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.187 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 § 115.187 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 § 115.187 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 lockup, as well as the agency as a whole?	yes
115.188 (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
115.188 (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
115.188 (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 lockup?	yes
115.189 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.187 are securely retained?	yes

115.189 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from lockups under its direct control and any private agencies 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
115.189 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.189 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by 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)	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