PREA Facility Audit Report: Final

Name of Facility: Central Cell Block Unit
Facility Type: Lockups
Date Interim Report Submitted: 11/12/2025
Date Final Report Submitted: 06/11/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☑
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☑
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☑
Auditor Full Name as Signed: DeShane Reed	**Date of Signature:** 06/11/2026

AUDITOR INFORMATION	
Auditor name:	Reed, DeShane
Email:	dreed@drbconsultinggroup.com
Start Date of On-Site Audit:	08/27/2025
End Date of On-Site Audit:	08/29/2025

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

Primary Contact

Name:	Cordelia Cowan
Email Address:	cordelia.cowan@dc.gov
Telephone Number:	202-285-2842

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

Facility PREA Compliance Manager	
Name:	Cortney Savage
Email Address:	cortney.savage@dc.gov
Telephone Number:	(202) 431-9844

Facility Characteristics	
Designed facility capacity:	111
Current population of facility:	0
Average daily population for the past 12 months:	58
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys
Age range of population:	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	32

facility who may have contact with detainees:	
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 PREA Coordinator Information			
Name:	Cordelia Cowan	**Email Address:**	cordelia.cowan@dc.gov

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:	
0	
Number of standards met:	
35	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

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

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-08-27
2. End date of the onsite portion of the audit:	2025-08-29

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	This auditor contacted “Medstar Washington Hospital” regarding SANE/SAFE for CCBU detainees. Additionally, this auditor interviewed DC-DOC’s Victim Advocacy Services Coordinator regarding SANE/SAFE and victim advocacy access for CCBU detainees.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	110
15. Average daily population for the past 12 months:	60
16. Number of inmate/resident/detainee housing units:	0

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	○ Yes ◉ No ○ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

23. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	50
25. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
26. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1
27. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
28. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1

29. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	2
30. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
31. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
32. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
33. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	1
34. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	31
37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	5
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	12

41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☑ Age ☑ Race ☑ Ethnicity (e.g., Hispanic, Non-Hispanic) ☑ Length of time in the facility ☑ Housing assignment ☑ Gender ☑ Other ☐ None
If "Other," describe:	This auditor also attempted to identify and interview CCBU detainees who fit the target group per the PREA Auditor's Handbook.
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	This auditor requested to view the Master Population Roster, which contains detainee demographic and ethnic information. This auditor also conversed and reviewed medical documentation to identify targeted groups and establish a diverse sample of random detainee interviews.
43. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	◉ Yes ○ No
44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	6

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2

52. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	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).	This auditor also requested to view the Master Population Roster, which contains detainee demographic and ethnic information. This auditor also conversed and reviewed intake documentation to identify targeted groups and establish a diverse sample of random detainee interviews. There were no detainees residing at CCBU fitting the targeted population criteria. This was confirmed when this auditor interviewed a selection of random CCBU detainees and asked if there were current detainees who fit any of the targeted categories.
53. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	This auditor also requested to view the Master Population Roster, which contains detainee demographic and ethnic information. This auditor also conversed and reviewed intake documentation to identify targeted groups and establish a diverse sample of random detainee interviews. There were no detainees residing at CCBU fitting the targeted population criteria. This was confirmed when this auditor interviewed a selection of random CCBU detainees and asked if there were current detainees who fit any of the targeted categories.
54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	This auditor also requested to view the Master Population Roster, which contains detainee demographic and ethnic information. This auditor also conversed and reviewed intake documentation to identify targeted groups and establish a diverse sample of random detainee interviews. There were no detainees residing at CCBU fitting the targeted population criteria. This was confirmed when this auditor interviewed a selection of random CCBU detainees and asked if there were current detainees who fit any of the targeted categories.

55. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	1
56. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	CCBU does not utilize or contain segregated housing.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	19

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☑ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☑ Rank (or equivalent) ☑ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
If "Other," describe:	This auditor also interviewed based on the required specialized staff criteria per the PREA Auditor's Handbook. These 19 interviewed staff include security staff, specialized staff and contracted medical professional staff.
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	This auditor also interviewed based on the required specialized staff criteria per the PREA Auditor's Handbook.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	10
63. Were you able to interview the Agency Head?	◉ Yes ○ No

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

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

	☐ Other
68. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	○ Yes ◉ No
69. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☑ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

71. Did you have access to all areas of the facility?	(●) Yes ( ) No
Was the site review an active, inquiring process that included the following:	
72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	(●) Yes ( ) No
73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	(●) Yes ( ) No
74. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	(●) Yes ( ) No
75. Informal conversations with staff during the site review (encouraged, not required)?	(●) Yes ( ) No

76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	While onsite, this auditor requested my own samples of documents, reviewed files while onsite, and other verification to determine compliance. This auditor also contacted “Medstar Washington Hospital” regarding SANE/SAFE for CCBU detainees. Additionally, this auditor interviewed and reviewed CCBU’s specialized trained “ Victim Advocate Services coordinator” regarding victim advocacy access for CCBU detainees.

Documentation Sampling

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

77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	(●) Yes ( ) No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	While onsite, this auditor requested my own samples of documents, reviewed files while onsite, and other verification to determine compliance. This auditor also contacted “Medstar Washington Hospital” regarding SANE/SAFE for CCBU detainees. Additionally, this auditor interviewed and reviewed CCBU’s specialized trained “Victim Advocate Services coordinator” regarding victim advocacy access for CCBU detainees.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0

a. Explain why you were unable to review any sexual abuse investigation files:	DC-DOC’s PREA Coordinator and assigned PREA Compliance Manager shared that there have not been investigations in this category of investigation in the past 12 months (or more). This auditor also interviewed DC-DOC investigators and reviewed DC-DOC's investigation files through their "Office of Investigative Services" (OIS) and requested to review investigation files while onsite. None were present. This was also affirmed when this auditor interviewed a selection of random CCBU detainees and asked if any sexual abuse or sexual harassment has been reported at CCBU.
86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	○ Yes ○ No ◉ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	DC-DOC’s PREA Coordinator and assigned PREA Compliance Manager shared that there have not been investigations in this category of investigation in the past 12 months (or more). This auditor also interviewed DC-DOC investigators and reviewed DC-DOC's investigation files through their "Office of Investigative Services" (OIS) and requested to review investigation files while onsite. None were present. This was also affirmed when this auditor interviewed a selection of random CCBU detainees and asked if any sexual abuse or sexual harassment has been reported at CCBU.

94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	○ Yes ○ No ◉ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

Non-certified Support Staff

103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	◉ Yes ○ No
a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:	1

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?	(●) The audited facility or its parent agency ( ) My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ( ) A third-party auditing entity (e.g., accreditation body, consulting firm) ( ) Other

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

115.111	Zero tolerance of sexual abuse and sexual harassment
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.111. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted "District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.111. An excerpt states, *"DOC has a zero-tolerance policy toward all forms of sexual abuse, sexual assault, and sexual misconduct against any person who works, visits, or is confined in any of its facilities or contractor operated facilities. DOC shall respond to, investigate, and support the prosecution of all sexual abuse within all facilities operated by the agency and its contractors.* *DOC strictly prohibits sexual assault, sexual abuse, sexual acts, and sexual contact between detainees, arrestees, and halfway house detainees, to include that of a*

	consensual nature. Sexual assault and/or sexual abuse initiated by an detainee, arrestee, or detainee, shall be referred for criminal prosecution, and DOC shall impose disciplinary sanctions when an detainee, arrestee, or detainee engages in consensual sexual acts and/or sexual contact." This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.111. While onsite, this PREA auditor observed, interacted with, and interviewed DC-DOC's PREA Coordinator (PC) who provides oversight monitoring to all DC-DOC facilities. During the interview, DC-DOC's PREA Coordinator explained that her role is a full-time position dedicated to developing, implementing, overseeing, and monitoring their agencies' PREA efforts. She also shared that she did have enough time and authority. She further shared that she receives support from DC-DOC's Chief of Investigative Services and DC-DOC's Director. Additionally, this PREA Standard states, *"(b) An agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its lockups."* This auditor discussed with DC-DOC's PREA Coordinator (PC), and her supervisor, the standard's requirement for the DC-DOC's PC oversees agency efforts to ensure that PREA standards are compliant within DC-DOC's lock up facility. PREA Coordinator shared that she understood that she is responsible for ensuring that compliance monitoring is conducted at CCB. DC-DOC's PREA Coordinator just began in her role in May 2025. She continues to get acclimated and established within this role. Finally, DC-DOC's PREA Coordinator produced DC-DOC's Organizational Chart with the PREA Coordinator's role being an upper-level agency-wide role which reports to the Chief of Investigative Services, who is under the agency's DC-DOC Director. This auditor also interviewed DC-DOC's Chief of Investigative Services who shared that he and the DC-DOC's Director are in full support of the PREA efforts within CCB. Finally, this auditor reviewed DC-DOC's website/webpage, which has their *"Zero-Tolerance"* policy posted. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.111.

115.112	**Contracting with other entities for the confinement of detainees**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also

relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.112. District of Columbia Department of Corrections (DC-DOC) contracts with "Reynolds and Associates," namely Fairview Residential Reentry Center to provide Pre-Release Community Correctional Services for female detainees. USDOJ PREA Standard 115.112 states, *"(a) A public agency that contracts for the confinement of its detainees with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.*

(b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards."

This auditor noted that CCB is a *Washington DC, Metropolitan Police Department (MPD)* facility managed by DC-DOC. This is a non-contractual collaborative agreement to ensure the safety and security of those detainees held within the facility, due to the limited staff resources within MPD.

Additionally, though this auditor confirmed that the Reynolds and Associates, namely Fairview Residential Reentry Center currently contracted with DC-DOC is a PREA compliant facility as of February 2025, the DC Department of Corrections Halfway Housing for Females (Fairview Residential Reentry Center) original contract (executed on September 30, 2024), does not align with this standard. This auditor noted that that the only PREA language in the contract is in section C.5.1.17 which states, *"The Contract shall ensure all employees complete DOC In-Service training sessions for Prison Rape Elimination (PREA) on an annual basis to comply with PREA Standard 115.131."* This PREA language does not align with the contractual language required by this PREA Standard.

When this auditor reviewed the previously executed contract between DC-DOC and *"Reynolds and Associates, namely Fairview Residential Reentry Center,*" there was an *"Amendment of Solicitation/Modification of Contract (M0010)"* (executed 9/7/ 2022) which stated in the addendum section C.5.1.17 to "Reynolds and Associates, namely Fairview Residential Reentry Center, *"The contractor shall adopt and comply with all PREA Standards."* This 9/7/2022 amendment/addendum had the necessary language that met the requirements that complied with PREA Standard 115.112.

This auditor noted/assessed that the above-mentioned most current contract (executed on September 30, 2024), between DC-DOC and "Reynolds and Associates, namely Fairview Residential Reentry Center, went back to the original incorrectly aligned contractual language stating, *"The Contract shall ensure all employees complete DOC In-Service training sessions for Prison Rape Elimination (PREA) on an annual basis to comply with PREA Standard 115.231,"* rather remaining with the amended/addendum language which correctly stated, *"The contractor shall adopt and comply with all PREA Standards."*

While onsite, this auditor interviewed DC-DOC's PREA Coordinator and DC-DOC's PREA Compliance Specialist (PCM). They shared that the PREA Coordinator is responsible for ensuring that walkthrough monitoring is conducted at all current and

	future contracted community confinement centers. This auditor recommended that DC-DOC revise their contract language with Reynolds and Associates, namely Fairview Residential Reentry Center, to clearly align with PREA Standard 115.112. The contractual language should include the entity's obligation to adopt and comply with the PREA Standards (which includes receiving PREA facility audits every 3 years), as well as DC-DOC conducting contract monitoring to ensure that the contractor is complying with the PREA standards. Finally, this contractual language should apply to any new contracts or contract renewal signed between DC-DOC and other entities DC-DOC is contracting for the confinement of their detainees. This PREA auditor concluded that the Central Cell Block (CCB) was not in compliance with PREA Standard 115.112. Corrective Action was required. During Central Cell Block's (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC's PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC's PREA Coordinator submitted their executed contract with its addendum, as evidence of compliance with PREA Standard 115.112, for contracting for confinement. The reviewed contract addendum (Section C.5.1.21) to *"Reynolds and Associates,*" namely FRRC which states, *"The contractor shall adopt and comply with all PREA Standards."* This auditor concludes that the amended contract has the necessary language within, which identifies the requirements to adopt and comply with PREA Standards. Finally, the "*Reynolds and Associates*" facility who contracts for confinement of DC-DOC inmates has completed their PREA facility audit in 2025 and is currently in compliance with the PREA Standards. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.112.

115.113	**Supervision and monitoring**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.113. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. Central Cell Block (CCB) submitted their *FY2025 Staffing Plan/Staffing Plan Review*, where the components within their staffing plan were discussed and documented.

	This auditor reviewed CCB's *FY2025 Staffing Plan/Staffing Plan Review*. It addressed some of the considerations but not all. This auditor observed that the content within CCB's *FY2025 Staffing Plan* did not address the following considerations as required by this standard: *115.113 (3) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and 115.113 (b) In circumstances where the staffing plan is not complied with, the lockup shall document and justify all deviations from the plan.* The staffing plan without the above-mentioned documented/discussed subsection of considerations does not align with PREA Standard 115.113's goal of ensuring that CCB is providing adequate staffing and video monitoring to protect detainees from sexual abuse. This auditor also noted from reviewing CCB's *FY2025 Staffing Plan/Staffing Plan Review* that CCB did not have language which identifies a deviation protocol that discusses a detailed plan of action when staff shortages, call-offs and time-offs occur how coverage is provided. Additionally, DC-DOC did not submit any deviation documentation (completed deviation forms, blank example deviation form, deviation protocol written in staffing plan, etc.). This auditor inquired about the frequency of rounds for each ranking officer on duty during a shift. Corporals and Sergeants complete rounds on the tier every 15 minutes and document it once completed. A Lieutenant completes rounds four times daily or every hour. CCB's Captain completes rounds four times daily. This auditor recommended CCB review and revise the content within their *FY2025 Staffing Plan* to address the following considerations as required by this standard: *115.113 (3) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; 115.113 (b) In circumstances where the staffing plan is not complied with, the lockup shall document and justify all deviations from the plan and (d) If vulnerable detainees are identified pursuant to the screening required by § 115.141, security staff shall provide such detainees with heightened protection, to include continuous direct sight and sound supervision, 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.* This auditor also recommended CCB document in their Staffing Plan, how coverage is provided when staff shortages, call-offs and time-offs occur. CCB should also document their deviation protocol/plan of action and how deviations are documented if/when staff shortages, call-offs and time-offs occur and proper coverage cannot be provided (on a temporary basis). Lastly, CCB should provide language to address how CCB would provide heightened protection to vulnerable detainees. This PREA auditor concluded that the Central Cell Block (CCB) was not in compliance with PREA Standard 115.113. Corrective Action was required. During Central Cell Block's (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC's PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC's PREA Coordinator submitted their updated and revised

	"Staffing Plan" (dated 2/23/2026), which contained the required considerations within this PREA Standard. DC-DOC's PC also submitted DC-DOC's *"Request for Deviation from Approved Staffing Plan"* form utilized when requesting a temporary deviation from their *"Staffing Plan."* Additionally, DC-DOC's PREA Coordinator and their PREA Compliance Team revised their *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* as recommended, to ensure that CCB detainees are accurately screened to keep all detainees safe from harm. This auditor reviewed the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)."* The screening tool had all the components to align with this PREA Standard's considerations in assessing risk of victimization and abusiveness. The screening tools has recommended cell assignments based on risk level, if PREA information was received by the detainee, and if CCB's PREA information pamphlet was "accepted" or "refused" by the detainee. DC-DOC's PREA Coordinator also submitted a *"PREA Zero-Tolerance and Detainee Rights Audio,"* which is an audio played on CCB's speakers when each detainee individually goes through their CCB intake process. This submitted audio has an English and Spanish version. This auditor also conducted a final corrective action follow-up meeting with DC-DOC's PC (prior to the conclusion of this corrective action period). She affirmed that CCB's revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* is currently going through their agency's formal final approval process with their legal department. Once approval is complete, the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* will be implemented, alongside relevant staff training. DC-DOC's PC also submitted a *"Memo,"* from DC-DOC's Office of Investigation Services Chief (agency head's designee), affirming the implementation. The Chief's *"Memo"* states the following below: ***MEMORANDUM*** ***TO:*** *DCDOC Chief Office of Investigative Services* ***FROM:*** *DCDOC PREA Coordinator* ***DATE:*** *June 8, 2026* ***SUBJECT:*** *Affirming Memo for PREA Standard 115.141* *This memo is to affirm that upon formal approval and incorporated into agency policy, the updated PREA Intake Screening Booking Questions-Central Cell Block Unit (CCB) will be utilized by all CCB personnel in accordance with applicable Prison Rape Elimination Act (PREA) Standards.* *The updated questionnaire is designed to strengthen our screening process, support accurate risk assessments, and assist staff in identifying potential PREA-related risk factors among arrested persons and detainees processed through the CCB. The intake and screening functions performed by CCB personnel remains essential to promoting safety, ensuring compliance with PREA standards, and supporting the*

	appropriate management of detainees while housed in the facility. *Upon policy approval, CCB personnel will be expected to:* • *Implement the revised questionnaire during the intake process as directed.* • *Follow all related PREA requirements and agency procedures.* • *Ensure all screening documentation is completed accurately, thoroughly, and in a timely manner.* • *Maintain confidentiality and handle sensitive information in accordance with PREA standards and agency policy.* *Additional guidance and training will be provided prior to implementation to support a smooth transition and consistent application of the revised screening process."* Finally, DC-DOC's PREA Coordinator submitted 43 most recent completed current/old CCB *"PREA Screening Forms"* (CCB's current/old *"PREA Screening Form"* still being used until approval for the new screening tool's implementation), as "good faith evidence" that CCB is consistently conducting PREA Screenings on all intake detainees. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.113.

115.114	**Juveniles and youthful detainees**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.114. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. This PREA auditor reviewed multiple randomly selected dates of CCB's rosters and counts while onsite. No youthful detainees were present on the rosters. DC-DOC's PREA Coordinator and PREA Compliance Specialist (PCM) shared that CCB did not hold youthful detainees. The daily counts while this auditor was onsite did not show youthful detainees being held at CCB. This auditor also interviewed a random selection of 19 specialized, contracted, and direct supervision staff, as well as volunteers. Each responded that youthful detainees are not held at CCB. This auditor also interviewed a random selection of 12 detainees, selected from CCB's daily detainee roster. All 19 interviewed detainees shared they had not witnessed

	any youthful detainees at CCB. During this auditor's exhaustive site review/tour, this auditor did not observe any youthful detainees under 18 years of age at CCB. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.114.

115.115	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.115. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding limits to cross-gender viewing captured in their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA Standard. CCB houses both males and females within this facility. Based on their detainment at CCB, detainees may stay overnight. While on-site, this PREA auditor interviewed 12 randomly selected detainees. Each detainee verified that pat searches are conducted by officers according to the detainee's gender and in a professional manner. CCB did not have any transgender detainees during this onsite audit. They shared that female detainees are searched by female officers only. Male Officers search male detainees, and the transgender detainee is given the opportunity to identify the gender of staff they feel most comfortable being searched. This auditor interviewed a random selection of 8 CCB direct supervision staff and asked, *"Which gender staff pat searches a transgender or intersex?"* Eight out of 8 direct supervision staff were aware of the appropriate procedures regarding transgender searches. All staff interviewed had knowledge of pat search procedures. Finally, this auditor observed two CCB intakes. Each intake entailed same gender staff pat down search of intake detainee, followed by having the intake detainee walk through a metal detector, and wanded using a *"Garrett Wand."* Lastly, the detainee is required to sit in a *"BOSS Chair"* to ensure a secure transfer of custody. Additionally, while onsite, this auditor interviewed a random selection of 12 CCB detainees. There were 12 of the 12 randomly selected interviewed detainees who shared that they do feel that they have enough privacy to use the toilet and perform bodily functions without being viewed by non-medical staff of the opposite gender. This auditor conducted a site review/tour and observed that there were adequate

	privacy barriers within the holding cell. All bathrooms are located within the holding cells which provide the necessary privacy coverage for detainees who are using the toilet. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.115.

115.116	Detainees with disabilities and detainees who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.116. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.116. An excerpt states, *"DOC shall take appropriate steps to ensure that detainees, arrestees, and detainees who are limited in English proficiency, deaf or hard of hearing, visually impaired, who have limited reading skills, or who are disabled, have equal opportunity to participate in or benefit from all aspects of DOC's efforts to prevent, detect, and respond to sexual abuse, assault and misconduct.* *DOC shall provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.* *DOC provides written materials in formats or through methods that ensure effective communication with all detainees, arrestees, and detainees with disabilities.* *DOC shall not rely on detainee interpreters, detainee readers, or other types of detainee assistants except in exigent where an extended delay in obtaining an effective interpreter could compromise the detainee's, arrestee's, or detainee's safety or the performance of first-response duties, or the investigation of the detainee's, arrestee's, or detainee's allegations."* This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.116. While on site, this auditor interviewed DC-DOC's PREA Coordinator who shared that CCB provides translation/interpretation to non-English speaking detainees through

	“Language Line Solutions.” This auditor contacted the *“Language Line Solutions”* number (1-866-874-3972), provided CCB’s customer code, and was allowed to speak to an operator who was readily available to provide me with interpreter or ASL service direction. Additionally, this auditor interviewed DOC’s PREA Coordinator who shared that their DOC policy provides guidance and procedures to CCB staff for providing meaningful access for those detainees with disabilities. Additionally, while on site, this auditor interviewed DC-DOC’s Victim Advocacy Services Coordinator (VASC), who shared and verified that she was fluent in Spanish and can be utilized as a resource for detainees whose primary language is Spanish. Furthermore, *Unity Healthcare*, the medical contractor for CCB, utilizes "*Language Line Solutions*" as well. CCB has access to *“Next Talk”* as an access resource for the hearing impaired. During this auditor’s site review/tour, this auditor identified PREA posting on the walls in English and Spanish. This auditor tested the PREA Hotline number posted on the walls throughout CCB (1-844-443-5732) and one of the prompts were to identify English or Spanish language options. This auditor also observed PREA detainee orientation forms in English, Spanish. This auditor interviewed a random selection of 8 CCB staff who work with detainees. Each staff interviewed shared that there is a language service for interpretation, and all knew where and how to access the *“Language Line Solutions”* telephone number/information in case it was needed. Also, all the above-mentioned interviewed staff knew that there were additional services providing access to interpretation for the blind or hearing-impaired detainees. They further stated that the use of other detainees to translate is only in exigent circumstances. Finally, this auditor interviewed 1 randomly selected LEP detainee. He shared that CCB made an effort to ensure that he understand CCB’s Zero-Tolerance for sexual abuse and sexual harassment, as well as how to report. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.116.

115.117	**Hiring and promotion decisions**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.117. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding hiring, promotions, and background checking procedures captured in their District of Columbia Department

of Correction “Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA Standard.

This PREA auditor interviewed DC-DOC’s Office of Investigative Services Background Investigators. They shared that background checks are conducted on all employees and contractors. They further shared that background screenings include W.A.L.E. (Washington Area Law Enforcement), NCIC (National Crime Information Center), Metropolitan Police Department fingerprinting, Triple I (International Check), Social Media Review, and Employee reference Checks. When this auditor asked about conducting 5-year background checks (on employees and contractors) and *“PREA Affirming Acknowledgement Disclosures”* for employees, they shared that they conduct background checks annually for every employee. Furthermore, this auditor noted inconsistencies with who administers DC-DOC’s *“PREA Affirming Acknowledgement Disclosures”* to all employees at hire, and who administers affirmations thereafter (upon promotion, or as a part of performance reviews, or annually). This auditor discussed administering this affirmation during employee annual in-service to ensure that a streamlined and organized process is established and all employees have it completed.

While onsite, this auditor randomly selected 22 CCB employee background files from OIS. This auditor reviewed the randomly selected files and observed that only 6 out of 22 reviewed files had complete records of all background checks conducted. Nineteen out of 22 files had annual background checks present. All files had initial background checks present. This auditor noted that there were only 11 out of 22 fingerprints within the selected files to verify that such checks were ran as a standard part of the onboarding process. This auditor also noted that DC-DOC’s OIS electronic files were not cohesive, causing long delays of locating certain necessary documents. Additionally, this auditor verified that only 9 out of 22 CCB staff completed *“PREA Affirming Acknowledgement Disclosures.”*

This auditor recommended that OIS develop an electronic *“PREA Folder”* for each DC-DOC’s personnel file to upload completed background checks for new hires, fingerprint checks, promotion background checks, annual background checks as well as references, and new hire *“PREA Affirming Acknowledgement Disclosures.”* Additionally, this auditor recommended identifying who will administer the *“PREA Affirming Acknowledgement Disclosures”* annually. This auditor discussed DC-DOC training department administering this affirmation during employee annual in-service to ensure that a streamlined and organized process is established and all employees have it completed annually. This PREA auditor concluded that Central Cell Block (CCB) was not in compliance with PREA Standard 115.117. Corrective Action was required.

During Central Cell Block’s (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC’s PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC’s PREA Coordinator submitted their newly revised and

	executed “Policy 3500.1” (Dated 5/19/26) (Supersedes 3350-21/January 2, 2019). This new policy clearly spells out DC-DOC hiring procedures to ensure that the Affirmative Duty to Disclose Form is completed be all new hires complete, as well as annually for current employees (at annual in-person staff refresher training). An excerpt from the DC-DOC’s “Policy 3500.1” states, *“DOC shall not knowingly hire, promote, or retain any individual who has engaged in sexual abuse or sexual misconduct in an institutional setting.* *a. Background Investigations. Applicants, employees considered for promotion, contractors, and volunteers shall undergo background investigations consistent with DOC PP 3040.61 Personnel Security and Suitability Investigations. Applicants shall complete:* 1. *PREA Acknowledgment and Understanding Form (Attachment 1)* 2. *Affirmative Duty to Disclose Form (Attachment 2)* *b. Affirmative Duty to Disclose* 1. *All employees, part-time employees, per-diem staff, interns, contractors, and individual contract personnel shall read and sign the Affirmative Duty to Disclose Form (Attachment 2).* 2. *Signed forms shall be maintained in the personnel file or appropriate contractor/volunteer file.* 3. *All DOC employees have a continuing affirmative duty to disclose:* *a. Any substantiated finding of sexual abuse or sexual harassment.* *b. Any criminal conviction related to sexual misconduct.* *c. Any administrative finding related to sexual misconduct*." Additionally, DC-DOC’s PC submitted a sample of their new *“Affirmative Duty to Disclose Sexual Abuse and Sexual Harassment”* form that has been implemented to administer as a component of pre-hire, and as a component of annual staff training. Finally, DC-DOC’s PC submitted 2 example electronic PREA folders that have been established for OIS to place documents that will be relevant to meet compliance with this PREA Standard 115.117 (completed background checks for new hires, fingerprint checks, promotion background checks, annual background checks as well as references, and new hire *“PREA Affirming Acknowledgement Disclosures”*). This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.117.

115.118	**Upgrades to facilities and technologies**
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.118. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding upgrades to the CCB's facility physical plant and technologies captured in their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA Standard. While on site, this auditor interviewed CCB's Captain and CCB's PREA Compliance Specialist (PCM), who shared that there were no physical plant adjustments and no substantial expansion to existing facilities since their last PREA Audit. They shared that in 2022 all officers began wearing body cameras when interacting with detainees. The body worn cameras have a recording capacity of 60 days and thereafter footage would be transferred to a cloud. Finally, CCB's Captain shared that CCB considers their ability to protect detainees from sexual abuse when coordinating video monitoring implementation and placement. Finally, this PREA auditor's site review will assist CCB in identifying blind spot locations and additional needs for video monitoring. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.118.

115.121	**Evidence protocol and forensic medical examinations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.121. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.121. An excerpt states, *"a) Administrative investigations will only be conducted for sexual misconduct and all other allegations of sexual abuse will be investigated by the*

	Metropolitan Police Department (MPD), *b) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and* *c) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.*" This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.121. While on site, this auditor interviewed 2 Office of Investigative Services (OIS) DC-DOC specialized trained PREA Administrative Investigators. During the interview, the PREA Administrative Investigators shared that they conduct all PREA administrative investigations at CCB. They further shared that *Metropolitan Police Department (MPD)* conduct CCB's sexual abuse criminal investigations. Additionally, this auditor interviewed DC-DOC's PREA Compliance Specialist (PCM) who shared that CCB detainees would be transported to *Medstar Washington Hospital Center* for SANE/ SAFE. Additionally, while onsite, this auditor interviewed a random selection of 19 specialized staff, security staff, Administration, and contractors. This auditor shared a scenario of a sexual assault occurring in the holding cell and the victim immediately yells out and reports the assault to the interviewed staff. There were 19 of 19 interviewed staff who knew their first responder duties from their initial response of separating and calling for assistance to secure and preserve the crime scene, requesting/ensuring detainees do not change clothing, use the toilet, or shower. Finally, this auditor interviewed DC-DOC's PREA Victim Advocacy Services Coordinator (VASC). She shared that she is available to facilitate emotional support and victim advocacy for CCB detainees. This auditor did observe PREA-related postings throughout CCB, in English and Spanish, and displaying CCB's zero-tolerance and a DC Hotline for emotional support and victim advocacy services (1-844-443-5732). DC-DOC's PC also submitted DC-DOC's Memorandum of Agreement (MOA) with the *National Center for Victims of Crime (NCVC)*, who provides victim advocacy and counseling services to CCB detainees (signed 5/24/ 23). This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.121.

115.122	**Policies to ensure referrals of allegations for investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.122. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.122. An excerpt states, *"When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.*

2) Where sexual abuse is alleged, DOC shall use investigators who have received specialized investigation training as mandated in this policy.

3) Investigators shall conduct a thorough and objective investigation of each complaint.

4) Criminal Investigations Investigators conducting a criminal investigation shall:

- *Gather and preserve direct evidence, including any available physical DNA evidence, photographs, and any available electronic monitoring data;*
- *Utilize recording devices to interview alleged victims, suspected perpetrators, and witnesses;*
- *Review prior complaints and reports of sexual abuse involving the suspected perpetrator.*
- *When the quality of evidence appears to support criminal prosecution, DOC shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.*
- *Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.*

5) Administrative Investigations:

- *Administrative investigations will only be conducted for sexual misconduct and all other allegations of sexual abuse will be investigated by the Metropolitan Police Department (MPD);*
- *Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and*
- *Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings."*

This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the

	necessary language to align with PREA Standard 115.122. While on site, this auditor interviewed DC-DOC's PREA Coordinator (PC) and DC-DOC's 2 specialized trained PREA Investigators. During the interview with DC-DOC's PREA Investigators, they shared that they are assigned to conduct all PREA administrative investigations at CCB. They further shared that CCB utilizes DC's *Metropolitan Police Department (MPD)* to conduct CCB's sexual abuse criminal investigations. The DC-DOC PREA Investigator's trainings were provided through the National Institute of Corrections (NIC) and titled *"PREA Investigations for Allegations of Sexual Abuse: Specialized Training.*" Additionally, this auditor reviewed DC-DOC's PC/PREA Investigator's training course description. This training was in addition to the required CCB staff comprehensive PREA training/refresher training. During this interview with DC-DOC's 2 PREA Investigator, this auditor asked about their PREA investigative understanding. Both shared with this auditor their knowledge and responsibilities in evidence collection, Miranda/Garrity rights, interviewing procedures, understanding victim trauma, and investigation report-writing protocols. This auditor reviewed DC-DOC's website link to PREA page: ***DOC PREA, Safety, and Security Reports | doc.*** DC-DOC's webpage had their *Zero-Tolerance* and *Investigation Policies*, as well as avenues to report PREA, annual reports, and previous PREA facility/contracted facility audits therein. This auditor requested completed investigations within the past 12 months, to gain insight into CCB's PREA Investigator reporting style and investigation content. CCB's Captain shared that there have been no PREA investigations within the last 12 months. DC-DOC's Administrative PREA Investigators submitted completed PREA Investigations from another facility to give perspective as to how investigations are completed. The investigation files submitted were neatly organized, had detailed and robust content from initial incident, interviews, and evidence identification. Furthermore, the investigation reports had a detailed summary of the investigations, sources and interviews used to make determinations, policy violations and investigator recommendations. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.122.

115.131	**Employee and volunteer training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also

relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.131. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction “Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.131. An excerpt states, *“1. Mandatory Pre-Service and annual In-Service Training on the Prison Rape Elimination Act, DC Code Title 22 Chapter 30, and this directive shall be conducted for all DOC employees, volunteers, interns, and contract employees.*

2. This directive shall be made readily available to all DOC employees, contract employees, and volunteers at all times.

3. DOC training staff shall conduct the training for prevention of sexual assault, sexual abuse, and sexual misconduct.

4. Contractors shall ensure that their employees are similarly trained."

This auditor reviewed DC-DOC’s Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.131.

While onsite, this PREA auditor interviewed DC-DOC’s Training Specialist/Acting Administrator, who provides the PREA training section of staff new hire orientation/ training. DC-DOC’s Training Specialist/Acting Administrator shared that all new staff receive their initial training in-person, which includes a comprehensive PowerPoint and discussion, then followed the employee completing the *“PREA Knowledge and Understanding”* form. DC-DOC’s Training Specialist/Acting Administrator further shared that CCB staff also receive annual in-person refresher training at DC-DOC’s Academy Training. Additionally, while onsite, this auditor received a copy of DC-DOC’s New hire Power Point training. This training included 25-30 slides discussing PREA and its implementation within DC-DOC. This auditor recommended that the PREA team and Training Academy work together in adding additional training slides that more closely align with the required components identified in PREA Standard 115.131 (a) (1-10). DC-DOC’s PREA Coordinator submitted the revised Pre-service and In-service PREA training PowerPoint on 9/9/2025 which included 39 total slides discussing the history of PREA, PREA’s components of prevention/detection/ responding, and how PREA should be implemented through procedure and practice throughout DC-DOC. This auditor observed that the components required in PREA Standard 115.131 are present.

This PREA also interviewed 19 randomly selected specialized staff, contractors, and security staff. Each acknowledged receiving Mandatory PREA training at hire or prior to contact with detainees. They also acknowledged receiving annual PREA refresher training. Additionally, each were able to communicate to this auditor their responsibilities to prevent, detect, their first responders, and coordinated response duties. Additionally, while onsite, this auditor also requested to view the training files of all 19 randomly selected specialized staff, security staff and contractors, to verify up-to-date annual PREA training. DC-DOC’s PREA Coordinator (PC) submitted in OAS, *“DC-DOC Academy Training*" curriculum, signed documentation and

	transcripts of requested staff. Finally, this auditor noted that CCB does not have volunteers within their facility. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.131.

115.132	Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.132. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. An excerpt states, *"1. During the intake process, employees shall notify in writing arrestees in lockup of DOC's zero-tolerance policy regarding sexual abuse, sexual assault, and sexual misconduct. 2. The agency shall ensure that upon entering CCB, contractors and any detainees who work in CCB are informed in writing of the agency's zero tolerance policy regarding sexual abuse and sexual harassment."* This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.132. While onsite, this PREA auditor interviewed 1 CCB contractor. This auditor was unable to interview volunteers as the PREA Compliance Specialist (PCM) shared that volunteers are not utilized at CCB. During an interview with *Unity Healthcare's* Nurse on duty contractor, this auditor inquired about their initial and ongoing PREA training. They shared that PREA training is provided through the DC-DOC training academy upon hire and annually. Each interviewed contractor could recall receiving an annual refresher. This auditor posed a question during the contractor's interview stating, *"How would you respond to a detainee informing you or if you received a note from a detainee stating that they were sexually abused by another detainee last night?"* The Nurse on duty interviewed contractor was able to communicate to this auditor her knowledge of PREA and her coordinated responsibilities to respond and report. Additionally, while onsite, this auditor observed the intake process which did not include a formal offering of the DC-DOC pamphlet. This auditor noted that CCB did not have a consistent practice established to explain CCB's Zero tolerance for sexual abuse and sexual harassment, detainees' rights to be free from sexual abuse

and sexual harassment, professional boundaries, and contractor responsibilities if sexual abuse or sexual harassment is reported to them) at the point of entry or prior to entering CCB to detainees or contractors.

This auditor recommended that CCB establish a consistency of their practice of giving intake detainees the *"PREA Breaking the Chains of Silence"* pamphlet. This auditor also recommended that CCB utilize the current PREA Risk Screening form to capture a detainee's "receipt" or "refusal" of the "*PREA Breaking the Chains of Silence"* pamphlet through having them sign an acknowledgement that can be captured within the PREA Risk Screening form. Additionally, this auditor recommended CCB adding *"Arrestee Received PREA Breaking the Chains of Silence"* pamphlet to the PREA Risk Screening form. Finally, this auditor recommended CCB establish a consistency in practice of the above-mentioned recommendations before compliance can be determined. This PREA auditor concluded that the Central Cell Block (CCB) was not in compliance with PREA Standard 115.132. Corrective Action was required.

During Central Cell Block's (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC's PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC's PREA Coordinator and their PREA Compliance Team revised their *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* as recommended, to ensure that CCB detainees are accurately screened to keep all detainees safe from harm. This auditor reviewed the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)."* The screening tool had all the components to align with this PREA Standard's considerations in assessing risk of victimization and abusiveness. The screening tools has recommended cell assignments based on risk level, if PREA information was received by the detainee, and if CCB's PREA information pamphlet was "accepted" or "refused" by the detainee. DC-DOC's PREA Coordinator also submitted a *"PREA Zero-Tolerance and Detainee Rights Audio,"* which is an audio played on CCB's speakers when each detainee individually goes through their CCB intake process. This submitted audio has an English and Spanish version.

This auditor also conducted a final corrective action follow-up meeting with DC-DOC's PC (prior to the conclusion of this corrective action period). She affirmed that CCB's revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* is currently going through their agency's formal final approval process with their legal department. Once approval is complete, the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* will be implemented, alongside relevant staff training. DC-DOC's PC also submitted a *"Memo,"* from DC-DOC's Office of Investigation Services Chief (agency head's designee), affirming the implementation. The Chief's *"Memo"* states the following below:

MEMORANDUM

TO: *DCDOC Chief Office of Investigative Services*

FROM: *DCDOC PREA Coordinator*

DATE: *June 8, 2026*

SUBJECT: *Affirming Memo for PREA Standard 115.141*

This memo is to affirm that upon formal approval and incorporated into agency policy, the updated PREA Intake Screening Booking Questions-Central Cell Block Unit (CCB) will be utilized by all CCB personnel in accordance with applicable Prison Rape Elimination Act (PREA) Standards.

The updated questionnaire is designed to strengthen our screening process, support accurate risk assessments, and assist staff in identifying potential PREA-related risk factors among arrested persons and detainees processed through the CCB. The intake and screening functions performed by CCB personnel remains essential to promoting safety, ensuring compliance with PREA standards, and supporting the appropriate management of detainees while housed in the facility.

Upon policy approval, CCB personnel will be expected to:

- *Implement the revised questionnaire during the intake process as directed.*
- *Follow all related PREA requirements and agency procedures.*
- *Ensure all screening documentation is completed accurately, thoroughly, and in a timely manner.*
- *Maintain confidentiality and handle sensitive information in accordance with PREA standards and agency policy.*

Additional guidance and training will be provided prior to implementation to support a smooth transition and consistent application of the revised screening process."

Finally, DC-DOC's PREA Coordinator submitted 43 most recent completed current/old CCB *"PREA Screening Forms"* (CCB's current/old *"PREA Screening Form"* still being used until approval for the new screening tool's implementation), as "good faith evidence" that CCB is consistently conducting PREA Screenings on all intake detainees.

This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.132.

115.134	**Specialized training: Investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well

	as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.134. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction “Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.134. An excerpt states, *“1) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.* *2) Where sexual abuse is alleged, DOC shall use investigators who have received specialized investigation training as mandated in this policy.* *3) Investigators shall conduct a thorough and objective investigation of each complaint.”* This auditor reviewed DC-DOC’s Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.134. While on site, this auditor interviewed DC-DOC’s PREA Coordinator (PC) and DC-DOC’s 2 specialized trained OIS PREA Investigators. During the interview with DC-DOC’s PREA Investigators, they shared that they are assigned to conduct all PREA administrative investigations at CCB. This auditor asked about their PREA investigative understanding. Both shared with this auditor their knowledge and responsibilities in evidence collection, Miranda/Garrity rights, interviewing procedures, understanding victim trauma, and investigation report-writing protocols. They further shared that CCB utilizes DC’s *Metropolitan Police Department (MPD)* to conduct CCB’s sexual abuse criminal investigations. Furthermore, this auditor reviewed DC-DOC PREA Investigator’s trainings provided through the National Institute of Corrections (NIC) and titled *“PREA Investigations for Allegations of Sexual Abuse: Specialized Training.*" Additionally, this auditor reviewed DC-DOC’s PC/PREA Investigator’s training course description. The training was broken down into modules and appeared to contain the components required in this PREA Standard 115.134. This training was in addition to their required CCB staff comprehensive PREA training/refresher training. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.134.

115.141	**Screening for risk of victimization and abusiveness**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.141. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding upgrades to the CCB's facility physical plant and technologies captured in their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA Standard.

While on site, this auditor interviewed United Healthcare's Nurse on duty. This auditor asked about the untitled form utilized to complete PREA Risk Screenings for incoming detainees. She stated that when she receives the form, she doesn't complete the untitled form. Instead, the nurse stated that she uses the form to obtain the detainee's name and their arrestee number solely. She further stated that she hasn't been informed or directed to administer the screening questions on the untitled form. When this auditor asked other CCB staff, there was no concise response regarding the person who's responsible for completing the untitled screening form.

This auditor interviewed a total of 12 CCB detainees. This auditor asked each detainee if they recalled being asked specific screening questions when they arrived (this auditor detailed the specific questions that were asked). There were only 3 out of the 12 interviewed detainees who shared that they recalled being asked those specific screening questions. This auditor also requested to review the completed PREA Screening forms of the 12 detainees currently residing at CCB during this onsite audit. Zero out of 12 detainees had their PREA Screening completed. This auditor reviewed the untitled screening form and concluded that CCB would be able to better align with this PREA Standard if their untitled screening form was recalibrated/restructured for maximum functionality.

This auditor recommended that CCB restructure/recalibrate their current form to include a title (i.e. *"DC-DOC CCB PREA Intake Screening"*) and update it in the following manner:

1) Number all questions on the form

2) Add a *"Recommendation"* section which identifies cell placement based on the information gathered on the screening form.

3) If questions 5, 9, 11, and 13 are "yes," identify the best fit cell arrangement in the *"Recommendation"* section, using one of the following selections below:

- Assign to Cell Alone
- Assign to Cell with Camera
- See Medical (for further evaluation)

- Return back to District
- General Cell Assignment

This auditor also recommended CCB utilize the restructured/recalibrated PREA Risk Screening form to also capture a detainee's "receipt" or "refusal" of the "*PREA Breaking the Chains of Silence"* pamphlet through having them sign an acknowledgement that can be captured within the PREA Risk Screening form. This auditor recommended CCB add a section which states,

******Detainee was* **"*INFORMED*"** *that CCB has a "Zero Tolerance for Sexual Abuse and Sexual Harassment YES NO*

******Detainee was* **"*OFFERED*"** *the "PREA Breaking the Chains of Silence" pamphlet YES NO*

******Detainee* ***"RECEIVED"*** *the PREA "Breaking the Chains of Silence" pamphlet YES NO*

******Detainee* ***"REFUSED"*** *the PREA "Breaking the Chains of Silence" pamphlet YES NO*

5) Add 2 date and signature lines for the person completing the form to date/sign and the detainee to date/sign.

Moreover, this auditor recommended CCB assign Medical Nurse to administer the recommended revised/recalibrated PREA Risk Screening form to every detainee who comes through CCB's intake. The medical nurse should also be the person who offer the "*PREA Breaking the Chains of Silence"* pamphlet. Finally, this auditor recommended CCB establish consistency in practice of the above-mentioned recommendations and conducting PREA Risk Screenings for every intake that enters CCB, before compliance can be concluded. This PREA auditor concluded that the Central Cell Block (CCB) was not in compliance with PREA Standard 115.141. Corrective Action required.

During Central Cell Block's (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC's PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC's PREA Coordinator and their PREA Compliance Team revised their *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* as recommended, to ensure that CCB detainees are accurately screened to keep all detainees safe from harm. This auditor reviewed the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)."* The screening tool had all the components to align with this PREA Standard's considerations in assessing risk of victimization and abusiveness. The screening tools has recommended cell assignments based on risk level, if PREA information was received by the detainee, and if CCB's PREA information pamphlet was "accepted" or "refused" by the detainee. DC-DOC's PREA Coordinator also submitted a *"PREA*

Zero-Tolerance and Detainee Rights Audio," which is an audio played on CCB's speakers when each detainee individually goes through their CCB intake process. This submitted audio has an English and Spanish version.

This auditor also conducted a final corrective action follow-up meeting with DC-DOC's PC (prior to the conclusion of this corrective action period). She affirmed that CCB's revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* is currently going through their agency's formal final approval process with their legal department. Once approval is complete, the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* will be implemented, alongside relevant staff training. DC-DOC's PC also submitted a *"Memo,"* from DC-DOC's Office of Investigation Services Chief (agency head's designee), affirming the implementation. The Chief's "*Memo"* states the following below:

MEMORANDUM

TO: *DCDOC Chief Office of Investigative Services*

FROM: *DCDOC PREA Coordinator*

DATE: *June 8, 2026*

SUBJECT: *Affirming Memo for PREA Standard 115.141*

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The updated questionnaire is designed to strengthen our screening process, support accurate risk assessments, and assist staff in identifying potential PREA-related risk factors among arrested persons and detainees processed through the CCB. The intake and screening functions performed by CCB personnel remains essential to promoting safety, ensuring compliance with PREA standards, and supporting the appropriate management of detainees while housed in the facility.

Upon policy approval, CCB personnel will be expected to:

- *Implement the revised questionnaire during the intake process as directed.*
- *Follow all related PREA requirements and agency procedures.*
- *Ensure all screening documentation is completed accurately, thoroughly, and in a timely manner.*
- *Maintain confidentiality and handle sensitive information in accordance with PREA standards and agency policy.*

Additional guidance and training will be provided prior to implementation to support a smooth transition and consistent application of the revised screening process."

Finally, DC-DOC's PREA Coordinator submitted 43 most recent completed current/

	old CCB *“PREA Screening Forms”* (CCB’s current/old *“PREA Screening Form”* still being used until approval for the new screening tool’s implementation), as “good faith evidence” that CCB is consistently conducting PREA Screenings on all intake detainees. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.141.

115.151	**Detainee reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.151. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction “Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.151. An excerpt states, *“Detainees, arrestees, and residents shall have the opportunity to report sexual abuse, assault, misconduct, retaliation by other detainees, arrestees, and residents or staff, and staff neglect or violation of responsibilities that may have contributed to such incidents.* *They can report to any employee anonymously and will not be required to report only to the immediate officer on duty.* *Detainees, arrestees, and residents are encouraged to report all allegations of sexual abuse, assault, and misconduct. An detainee may report such incidents to any employee, including chaplains, medical, mental health or counseling staff, security staff, or administrators, by informing the employee in any manner available.* *All such reports will be investigated subject to the limitations of information provided, and the willingness of detainees, arrestees, residents and/or others to provide information.* ***Confidential Hot Line.*** *Any detainee, arrestee, resident, or third party on behalf of an detainee, arrestee, or resident, may make a confidential report of sexual assault, sexual abuse or sexual misconduct through the 24-hour (24) DC Victim Hotline at 1-844-443-5732 or 1-844-4HELPDC. The phone line is staffed by a member of the National Center for*

Victims of Crime.

Verbal Complaint.

A detainee, resident, or arrestee may verbally inform any staff employee when the detainee, resident, or arrestee has been subject to acts or attempted acts of sexual assault, sexual abuse, or sexual misconduct. The verbal report is formal notification, and the employee shall proceed as directed in Sections 14 and 15 of this directive and shall not require the detainee, arrestee, or detainee to submit a written report.

Written Complaint

1. *A detainee, arrestee, or resident may file a written complaint of sexual assault, sexual abuse, or sexual misconduct directly to any staff member.*
2. *A detainee, arrestee, or resident may file a written complaint of sexual misconduct (e.g. sexual harassment or failure to announce) through the detainee grievance system…"*

This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.151.

While onsite, this PREA auditor interviewed CCB's 12 detainees asking, *"Please share with me at least three different ways a detainee can report an incident of sexual abuse or sexual harassment?"* There were 2 of the 12 detainees who could share 2 ways, 7 out of 9 detainees shared 1 way to report, and 2 out of 9 detainees shared 0 ways to report at CCB. The most common way was reporting to staff. Two out of 12 detainees knew that they could report to someone who could report on their behalf. One out of the 12 detainees shared that they could report through the posted hotline number. There were only 2 out of 12 detainees who knew that they could report to someone who could report on their behalf (3rd party reporting).

This auditor asked detainees how many were offered a pamphlet during intake. Nine out of the 12 interviewed detainees stated they were not offered the PREA pamphlet during the intake process. Additionally, while onsite, this auditor observed CCB's intake process. The 2 two intakes observed did not include a formal offering of DC-DOC's "*PREA Breaking the Chains of Silence"* pamphlet. This auditor also noted that CCB did not have a consistent practice established to explain CCB's Zero tolerance for sexual abuse and sexual harassment, as well as detainee's rights to be free from sexual abuse and sexual harassment.

Furthermore, this auditor interviewed DC-DOC's PREA Coordinator who shared that CCB provides translation/interpretation to non-English speaking detainees through *"Language Line Solutions."* This auditor contacted the *"Language Line Solutions"* number (1-866-874-3972), provided CCB's customer code, and was allowed to speak to an operator who was readily available to provide me with interpreter or ASL service direction. Additionally, this auditor interviewed DOC's PREA Coordinator who shared that their DOC policy provides guidance and procedures to CCB staff for providing meaningful access for those detainees with disabilities.

	Lastly, while onsite, this auditor tested the hotline number posted on the facility PREA postings. This auditor was able to make contact with the representative. She shared and confirmed her role in the reporting process. She allowed this auditor to leave a message on the reporting line. The DC-DOC's PREA Coordinator received the message and showed this auditor verification of receipt. Moreover, this auditor observed PREA detainee orientation forms in English and Spanish. When this auditor conducted an onsite site review/tour, this auditor observed that CCB had PREA zero-tolerance and reported signage throughout the facility. The signage was in English and Spanish as well as in color for easy visibility on the facility's walls. This auditor recommended that CCB establish a consistency of their practice of formally informing intake detainees of CCB's zero-tolerance for sexual abuse and sexual harassment, as well as formally offering each detainee the *"PREA Breaking the Chains of Silence"* pamphlet which identifies various reporting avenues at CCB (staff, hotline, 3rd Party, etc.). This PREA auditor concluded that the Central Cell Block (CCB) was not in compliance with PREA Standard 115.151. Corrective Action was required. During Central Cell Block's (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC's PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC's PREA Coordinator and their PREA Compliance Team revised their *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* as recommended, to ensure that CCB detainees are accurately screened to keep all detainees safe from harm. This auditor reviewed the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)."* The screening tool had all the components to align with this PREA Standard's considerations in assessing risk of victimization and abusiveness. The screening tools have recommended cell assignments based on risk level, if PREA information was received by the detainee, and if CCB's "*PREA Breaking the Chains of Silence"* pamphlet was "accepted" or "refused" by the detainee. DC-DOC's PREA Coordinator also submitted a *"PREA Zero-Tolerance and Detainee Rights Audio,"* which is an audio played on CCB's speakers when each detainee individually goes through their CCB intake process. This submitted audio has an English and Spanish version. This auditor also conducted a final corrective action follow-up meeting with DC-DOC's PC (prior to the conclusion of this corrective action period). She affirmed that CCB's revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* is currently going through their agency's formal final approval process with their legal department. Once approval is complete, the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* will be implemented, alongside relevant staff training. DC-DOC's PC also submitted a *"Memo,"* from DC-DOC's Office of Investigation Services Chief (agency head's designee), affirming the implementation. The Chief's *"Memo"* states the following below: ***MEMORANDUM***

TO: *DCDOC Chief Office of Investigative Services*

FROM: *DCDOC PREA Coordinator*

DATE: *June 8, 2026*

SUBJECT: *Affirming Memo for PREA Standard 115.141*

This memo is to affirm that upon formal approval and incorporated into agency policy, the updated PREA Intake Screening Booking Questions-Central Cell Block Unit (CCB) will be utilized by all CCB personnel in accordance with applicable Prison Rape Elimination Act (PREA) Standards.

The updated questionnaire is designed to strengthen our screening process, support accurate risk assessments, and assist staff in identifying potential PREA-related risk factors among arrested persons and detainees processed through the CCB. The intake and screening functions performed by CCB personnel remains essential to promoting safety, ensuring compliance with PREA standards, and supporting the appropriate management of detainees while housed in the facility.

Upon policy approval, CCB personnel will be expected to:

- *Implement the revised questionnaire during the intake process as directed.*
- *Follow all related PREA requirements and agency procedures.*
- *Ensure all screening documentation is completed accurately, thoroughly, and in a timely manner.*
- *Maintain confidentiality and handle sensitive information in accordance with PREA standards and agency policy.*

Additional guidance and training will be provided prior to implementation to support a smooth transition and consistent application of the revised screening process."

This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.151.

115.154	**Third-party reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.154. Central Cell Block (CCB) follows the District of Columbia Department of Corrections

(DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction “Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.154. An excerpt states, *“Third party reporting includes reporting by other detainees, arrestees, or detainees, employees, family members, attorneys, and outside advocates. Third parties shall be permitted to assist detainees, arrestees, and detainees in filing requests for administrative remedies relating to allegations of sexual abuse, sexual assault, and sexual misconduct and shall also be permitted to file such request on behalf of the detainee, arrestee, or detainee by the following methods:*

Confidential Hot Line.

Third party reporting of sexual assault, sexual abuse, or sexual misconduct of detainees, arrestees, and detainees can be made through the OIG twenty-four (24) hour DC Victim Hotline at 1-844 443-5732 or 1-844-4HELPDC.

Verbal Notification

A third party may report information on behalf of a detainee, resident, or arrestee about acts or attempted acts of sexual assault, sexual abuse or sexual misconduct. The verbal report is formal notification, and the employee shall proceed as directed in Sections 14 and 15 of this directive and shall not require the third party to submit a written report.

Written Notification

A third party may submit a written report on behalf of a detainee, arrestee, or resident by providing any information received or observed that concerns sexual assault, sexual abuse or sexual misconduct to the Warden, CCC Administrator, Office Chief, the PREA Coordinator, or the highest ranking official on duty.

DOC’s public website shall provide information on how to report sexual abuse, sexual assault, and sexual misconduct on behalf of a detainee, arrestee, or detainee.”

This auditor reviewed DC-DOC’s Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.154.

This auditor reviewed DC-DOC’s website link to PREA page: **DOC PREA, Safety, and Security Reports | doc.** DC-DOC's webpage had their zero-tolerance, investigation policies, as well as avenues to report PREA on behalf of a detainee. Guidance for third party reporting on the website noted the following:

Reporting Sexual Harassment or Sexual Abuse

If you or someone you know has experienced sexual harassment or sexual abuse while incarcerated in a DOC facility or in the halfway house, you may:

- *Call the National Center for Victims of Crime (NCVC) by using the DC Victim*

Hotline at (844) 443-5732 or 1-844-4HELPDC. This resource is located outside of the DOC, which also provides referral services, crisis intervention and emotional support services.

- *Report to any DOC staff person, volunteer, or contractor.*
- *Submit a written complaint or Emergency Grievance (if in imminent danger of sexual abuse).*
- *Any person such as a family member, a friend or another inmate may report on an inmate's behalf.*
- *Contact the DOC PREA Coordinator at 202-523-7275.*

While onsite, this PREA auditor interviewed CCB's 12 detainees asking, *"Please share with me at least three different ways a detainee can report an incident of sexual abuse or sexual harassment?"* There were 2 of the 12 detainees who could share 2 ways, 7 out of 9 detainees shared 1 way to report, and 2 out of 9 detainees shared 0 ways to report at CCB. The most common way was reporting to staff. Two out of 12 detainees knew that they could report to someone who could report on their behalf. One out of the 12 detainees shared that they could report through the posted hotline number. There were only 2 out of 12 detainees who knew that they could report to someone who could report on their behalf (3rd party reporting).

This auditor asked detainees how many were offered a pamphlet during intake. Nine out of the 12 interviewed detainees stated they were not offered the PREA pamphlet during the intake process. Additionally, while onsite, this auditor observed CCB's intake process. The 2 two intakes observed did not include a formal offering of DC-DOC's "*PREA Breaking the Chains of Silence"* pamphlet. This auditor also noted that CCB did not have a consistent practice established to explain CCB's Zero tolerance for sexual abuse and sexual harassment, as well as detainee's rights to be free from sexual abuse and sexual harassment.

This auditor recommended that CCB establish a consistency of their practice of formally informing intake detainees of CCB's zero-tolerance for sexual abuse and sexual harassment, as well as formally offering each detainee the *"PREA Breaking the Chains of Silence"* pamphlet, which identifies various reporting avenues at CCB (staff, hotline, 3rd Party, etc.). This PREA auditor concluded that the Central Cell Block (CCB) was not in compliance with PREA Standard 115.154. Corrective Action was required.

During Central Cell Block's (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC's PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC's PREA Coordinator and their PREA Compliance Team revised their *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* as recommended, to ensure that CCB detainees are accurately screened to keep all detainees safe from harm. This auditor reviewed the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)."* The screening tool had all the components to align with this PREA Standard's considerations in

assessing risk of victimization and abusiveness. The screening tools has recommended cell assignments based on risk level, if PREA information was received by the detainee, and if CCB's *"PREA Breaking the Chains of Silence"* pamphlet was "accepted" or "refused" by the detainee. DC-DOC's PREA Coordinator also submitted a *"PREA Zero-Tolerance and Detainee Rights Audio,"* which is an audio played on CCB's speakers when each detainee individually goes through their CCB intake process. This submitted audio has an English and Spanish version.

This auditor also conducted a final corrective action follow-up meeting with DC-DOC's PC (prior to the conclusion of this corrective action period). She affirmed that CCB's revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* is currently going through their agency's formal final approval process with their legal department. Once approval is complete, the revised *"PREA Intake Screening Booking Questions-Central Cell Block Unit (CCBU)"* will be implemented, alongside relevant staff training. DC-DOC's PC also submitted a *"Memo,"* from DC-DOC's Office of Investigation Services Chief (agency head's designee), affirming the implementation. The Chief's *"Memo"* states the following below:

MEMORANDUM

TO: *DCDOC Chief Office of Investigative Services*

FROM: *DCDOC PREA Coordinator*

DATE: *June 8, 2026*

SUBJECT: *Affirming Memo for PREA Standard 115.141*

This memo is to affirm that upon formal approval and incorporated into agency policy, the updated PREA Intake Screening Booking Questions-Central Cell Block Unit (CCB) will be utilized by all CCB personnel in accordance with applicable Prison Rape Elimination Act (PREA) Standards.

The updated questionnaire is designed to strengthen our screening process, support accurate risk assessments, and assist staff in identifying potential PREA-related risk factors among arrested persons and detainees processed through the CCB. The intake and screening functions performed by CCB personnel remains essential to promoting safety, ensuring compliance with PREA standards, and supporting the appropriate management of detainees while housed in the facility.

Upon policy approval, CCB personnel will be expected to:

- *Implement the revised questionnaire during the intake process as directed.*
- *Follow all related PREA requirements and agency procedures.*
- *Ensure all screening documentation is completed accurately, thoroughly, and in a timely manner.*
- *Maintain confidentiality and handle sensitive information in accordance with PREA standards and agency policy.*

	Additional guidance and training will be provided prior to implementation to support a smooth transition and consistent application of the revised screening process." This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.154.

115.161	**Staff and agency reporting duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.161. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.161. An excerpt states, *"Any employee who receives any information, from any source, concerning sexual assault, sexual abuse, or sexual misconduct, or who observes an incident of sexual assault, sexual abuse, or sexual misconduct is required to do the following:* 1. ***Confidential Hot Line.*** *Any staff employee may make a confidential report of sexual assault, sexual abuse, or sexual misconduct of detainees, arrestees, or detainees through the twenty-four (24) hour DC Victim Hotline at 1-844-443-5732 or 1-844-4HELPDC.* 2. ***Verbal Notification.*** *Staff shall immediately report the information or incident directly to their immediate supervisor and the PREA Coordinator. Any allegation of sexual activity as defined in this directive shall be reported as a possible sexual assault, sexual abuse, or sexual misconduct. The employee shall not conduct an investigation into the circumstances related to the allegation.* 3. ***Written Notification.*** *Staff shall submit a written report providing any information received or observed that concerns sexual assault, sexual abuse, or sexual misconduct to the Warden, Community Corrections Center (CCC) Administrator, Office Chief, the PREA Coordinator, or the highest ranking official on duty before the end of his/her workday.* 4. ***Confidentiality.*** *Information related to allegations/incidents of sexual abuse, assault or misconduct is confidential and will only be disclosed when necessary for related reporting, treatment, investigation, and other security and management decisions. Staff who breach confidentiality may be subject to corrective/disciplinary action. This is not intended to affect the*

Department's obligation to gather, review, and potentially produce records of allegations or incidents of sexual misconduct as required by law or DOC reporting policy.

5. *In the event confidentiality comes into question in regards to reporting the allegation to an immediate Supervisor, the staff member may report the incident directly to the PREA Coordinator."*

This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.161.

While onsite, this auditor interviewed a random selection of 19 CCB specialized staff, contractors, and Administration staff, asking, *"How would you respond if you found out or was informed of an incident of a CCB detainee being sexual abused or sexual harassed?"* There were 19 of the 19 staff interviewed who stated that they would immediately separate the victim, and the perpetrator then inform CCB's Administration. Also, the 19 of the 19 staff interviewed knew their coordinated responsibilities if informed, suspects, receive information, or become aware of sexual abuse at CCB.

This PREA auditor also interviewed a random selection of 12 CCB detainees asking, *"If you reported an incident of sexual abuse or sexual harassment to staff, how would they respond?"* Each detainee interviewed stated that CCB staff would immediately respond and/or report.

This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.161.

115.162	**Agency protection duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.162. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding agency protection duties captured in their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA Standard. While onsite, this PREA auditor interviewed 19 randomly selected CCB security staff, specialized staff, contractors and volunteers asking, *"If you learn that a CCB*

	detainee may be at imminent risk of sexual abuse, what steps you would take to protect?" There was a consensus amongst the staff interviewed that they would immediately attempt to mitigate the risk by informing supervisory staff, the PREA Compliance Specialist (PCM) or/and Administration, who would recommend changing cell assignments. Finally, this auditor interviewed 12 randomly selected detainees. Each interviewed detainee shared that staff protect CCB vulnerable detainees, and they immediately respond to any reports of detainee risk of sexual abuse or sexual harassment. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.162.

115.163	**Reporting to other confinement facilities**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.163. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.163. An excerpt states, *"Following an allegation by a detainee, arrestee, or detainee that he or she was abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.* *a) Such notifications shall be provided as soon as possible, but no later than seventy-two (72) hours after receiving the allegation.* *b) The agency shall document that it has provided such notification.* *c) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.*" This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.163. While onsite, this auditor interviewed DC-DOC's PREA Compliance Specialist (PCM) who shared that if a detainee reports sexual abuse stemming from a previous facility, CCB will provide a written notice to the previous facility's Director/Warden which would be sent by certified mail. Though there were no detainee reports of

	sexual abuse from a previous facility within the last 12 months, DC-DOC's PREA Compliance Specialist (PCM) and Captain provided an example letter of a previous detainee report of sexual abuse in OAS. This auditor asked CCB's Captain that since there have been 0 reports from CCB detainees in the past 12 months, what are their procedures when CCB receives a report from a detainee that he/she was sexually abused at a previous facility? CCB's Captain responded that she would generate written notification within 72 hours and that correspondence would be sent to the receiving facility head by certified mail. Additionally, there may be a follow up email or phone conversation regarding the allegation. Finally, CCB's PREA Compliance Specialist (PCM) submitted, in OAS, two *"Facility to other Confinement Facility"* letters to 2 previous facilities which was reported to DC-DOC's Central Detention Facility (CDF) in 2022. This auditor verified that the letter was on DC-DOC letterhead, signed/sent by Warden/Interim Warden, letter was within the 72-hour required timeframe from the time of detainee reporting, detailed the reported allegation from the detainee, and referenced this PREA Standard within the content. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.163.

115.164	**Staff first responder duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.164. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.164. An excerpt states, *"a) Upon receipt of notification of a sexual assault, sexual abuse, or sexual misconduct complaint or upon observing an incident of sexual assault, sexual abuse, or sexual misconduct, Staff first responder staff shall take the following steps:* 1. *Ensure the victim's safety by separating the victim from alleged abuser.* 2. *Immediately secure the crime scene and ensure it is preserved and protected.* 3. *Preserve any evidence and If the abuse occurred within a time period that*

still allows for the collection of physical evidence, instruct the victim and alleged abuser not to take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating;

4. *If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.*
5. *Ensure the victim is escorted to the facility medical unit as soon as possible to provide appropriate assessment and treatment.*
6. *If there are no qualified medical or mental health practitioners on duty at the time a report is made, security staff first responders shall take preliminary steps to protect the victim, secure the alleged abuser, and shall immediately notify the facilities designated medical and mental health practitioner.*

The responding staff member must submit the sexual abuse or sexual assault report to the supervising officer before the end of his/her tour of duty."

This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.164.

While onsite, this auditor interviewed 12 detainees residing at CCB at the time of this onsite audit. Each detainee shared that they felt comfortable informing staff of any PREA-related incident. The 12 interviewed detainees also shared that staff protect vulnerable detainees, and they immediately respond to any reports of or detainee risk of sexual abuse or sexual harassment.

This auditor also reviewed CCB's Staff training written curriculum, which described all the first responder responsibilities within its content. This auditor also interviewed a random selection of 19 specialized staff, security staff, Administration, and contractors. This auditor shared a scenario of a sexual assault occurring in the holding cell and the victim immediately reports the assault to the interviewed staff. There were 19 of 19 interviewed staff who knew their first responder duties from their initial response of separating the alleged victim and alleged perpetrator, calling for assistance, securing and preserving the crime scene, and requesting/ ensuring detainees do not change clothing, use the toilet, or shower.

This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.164.

115.165	**Coordinated response**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.162. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding coordinated response captured in their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA Standard. While onsite, this auditor interviewed 19 specialized staff (medical, mental health, facility supervisory, PREA Compliance Specialist (PCM), Investigators, etc.) and asked their coordinated responsibilities if a detainee is sexually abused while they are on duty (not the 1st Responder) and an active sexual abuse incident occurred. Each specialized staff and contractor staff knew their coordinated responsibilities. This auditor also reviewed CCB's Staff training written curriculum, which described all the first responder responsibilities within its content. This auditor also interviewed a random selection of 19 security staff, Administration, and contractors. This auditor shared a scenario of a sexual assault occurring in the holding cell and the victim immediately reports the assault to the interviewed staff. There were 8 of 8 interviewed security staff who knew their first responder duties from their initial response of separating the alleged victim and alleged perpetrator, calling for assistance, securing and preserving the crime scene, and requesting/ensuring detainees do not change clothing, use the toilet, or shower. This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.165.

115.166	**Preservation of ability to protect detainees from contact with abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.166. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.166. An excerpt

states, “DOC shall not enter into any collective bargaining agreement or renew any collective bargaining agreement or other agreement that limits DOC’s ability to remove staff accused of sexual abuse, sexual assault, or sexual misconduct from contact with any detainees, arrestees, and detainees pending the outcome of an investigation. The DOC retains the right to determine whether and to what extent discipline is warranted on a case-by-case basis.”

This auditor reviewed DC-DOC’s Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.166.

DC-DOC’s PREA Coordinator shared in OAS, the “District of Columbia Government Department of Corrections and Fraternal Order of Police-Department of Corrections Labor Committee” collective bargaining agreement on their agency’s behalf effective 2016. This auditor also interviewed CCB’s Captain that confirmed the agency has an active collective bargaining agreement in place and confirmed that the collective bargaining agreement does not limit the agency’s ability to remove a correctional officer of post pending the outcome of an investigation based on Article 2 Management Rights which is stated below:

ARTICLE 2: MANAGEMENT RIGHTS

Section A:

The Agency and the Union recognize the Comprehensive Merit Personnel Act, as codified at D.C. Code§ 1-617.08, provides that the Agency shall retain the sole right, in accordance with applicable laws and rules and regulations.

1. *To direct employees of the Agency;*
2. *To hire, promote, transfer, assign, and retain employees in positions within the Agency and to suspend, demote, discharge, or take other disciplinary action against employees for cause;*
3. *To relieve employees of duties because of lack of work or other legitimate reasons;*
4. *To maintain the efficiency of the District government operations entrusted to them;*
5. *To determine the mission of the Agency, its budget, its organization, the number of employees, and to establish the tour of duty; and the number, types, and grades of positions of employees assigned to an organizational unit, work project, or tour of duty, and the technology of performing its work; and its internal security practices; and*
6. *To take whatever actions may be necessary to carry out the mission of the District government in emergency situations.*

Section 8:

All matters shall be deemed negotiable except those that are proscribed herein and by D.C. law. Negotiations concerning compensation are authorized to the extent provided in D.C. Code§ 1-617.16.

	Section C: *The parties recognize that such management rights are beyond the scope of collective bargaining."* This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.166.

115.167	**Agency protection against retaliation**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.167. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.167. An excerpt states, *"All detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be free from retaliation by other detainees or staff.* *For at least ninety (90) days, the PREA Coordinator or designee shall monitor the conduct and treatment of any staff, detainees, arrestees, or detainees who reported sexual abuse, sexual assault, or sexual harassment to see if there are any changes that may suggest possible retaliation by other staff, detainees, arrestees, or detainees. The PREA Coordinator or designee shall continue monitoring beyond ninety (90) days if the initial monitoring indicates a continuing need. An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.* ***Items the PREA Coordinator or designee shall monitor include;*** *1. Disciplinary Reports;* *2. Housing or program changes; or* *3. Negative performance reviews or reassignments of staff.* *4. Periodic status checks on detainees.* ***The Victim Services Coordinator/Advocate shall:***

1. Provide trauma specific individual and group counseling to detainee survivors of sexual abuse, upon the detainee's consent using the PREA Victim Services Disclosure/Consent form (Attachment 5).

2. Develop and implement culturally proficient, victim-centered programs.

3. Collaborate with community partners and internal stakeholders to develop treatment and discharge planning.

4. Refer detainee survivors of sexual abuse to community partners."

This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.167.

While on site, this auditor interviewed 2 CCB Administrative PREA Investigators, who are designated to conduct PREA investigations. Each interviewed investigator knew their responsibilities regarding evidence collection, Miranda/Garrity rights, interviewing procedures, retaliation monitoring, and report-writing protocols, and evidentiary standards for administrative PREA investigations. This auditor requested to see evidence of PREA Investigator's Specialized Training of CCB's assigned PREA Investigators. DC-DOC's PREA Compliance Specialist (PCM) uploaded certificates for 4 current specialized administrative investigators on staff (PCM, Victim Advocate Services Coordinator, and 2 OIS PREA Investigators assigned to CCB).

This auditor also interviewed DC-DOC's Victim Advocacy Services Coordinator (VASC) who shared that she is primarily responsible for completing and documenting 30-, 60-, and 90-day retaliation monitoring in DC-DOC facilities. This auditor noted that currently initial retaliation monitoring specifically within 24 hours of the alleged incident is not occurring. Additionally, the Victim Advocacy Services Coordinator does not have another person identified to assign retaliation monitoring to in the event of her absence.

This auditor requested completed investigations within the past 12 months, to gain insight into CCB's PREA Investigator reporting style and investigation content. The CCB Captain shared that no investigations occurred within the past 12 months. The DC-DOC Administrative PREA Investigators submitted example investigations completed at another facility. While reviewing each completed investigation packet, this auditor identified that 9 of 16 of both harassment and sexual abuse investigation files had *"Initial Retaliation Monitoring"* completed/documented. In reviewing DC Department of Corrections' Retaliation Monitoring form, it included: date, week of monitoring, disciplinary report review, documentation of program reviews and retaliation monitor name, but did not have a place for initial retaliation monitoring check, face-to-face check-ins (with detainee signature) and status check monitoring. Alleged victims and alleged perpetrators should be given an opportunity to speak to mental health and an opportunity to sign the retaliation form.

Finally, this auditor interviewed 12 randomly selected CCB detainees asking, *"Have you reported or has there been any reports of sexual abuse of sexual harassment at CCB since you've been here?"* Twelve out of 12 detainees stated that they had not

reported sexual abuse while at CCB.

This auditor recommended that the Victim Advocacy Services Coordinator (VASC) identify an additional retaliation monitor staff to assist in her absence. Additionally, this auditor recommended DC-DOC restructure their *"Retaliation Monitoring"* form to also contain status check updates, which allows for the inmate to sign upon completion of a face-to-face retaliation monitoring check in. This would allow for better verification and fidelity of retaliation monitoring being conducted. Moreover, this auditor recommended that all *"Initial Retaliation Monitoring"* checks (first check) occur within the first 24 hours from the time of the incident/allegation, as most sexual harassment investigations conclude within 72-96 hours. Finally, the *"Retaliation Monitoring Forms"* should be submitted in a DC-DOC electronic management system where DCDOC's PREA Coordinator and other relevant personnel have access to review such documents. This PREA auditor concluded that the Central Cell Block (CCB) was not in compliance with PREA Standard 115.167. Corrective Action was required.

During Central Cell Block's (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC's PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC's PREA Coordinator submitted a blank sample and an actual completed DC-DOC *"PREA Retaliation Monitoring Form."* DCDOC's revised *"PREA Retaliation Monitoring Form"* contained status check updates, housing assignment updates, program adjustments, disciplinary, and a section which allows for the inmate to sign upon completion of a face-to-face retaliation monitoring check in. The *"PREA Retaliation Monitoring Form"* is a 12-week monitoring form, which aligns with this PREA Standard's 90-day sexual abuse retaliation monitoring period (minimum). This auditor also conducted a follow-up interview with DC-DOC's PC. She shared that she has access to review *"Retaliation Monitoring,"* as needed.

Finally, DC-DOC's PREA Coordinator submitted to this auditor a detailed "*Corrective Response*" to this auditor's recommendations for this standard. The "*Corrective Response*" states the following:

Responsible Person(s): *PREA Coordinator; PREA Victim Services Coordinator and PREA Compliance Specialist;*

Corrective Action #1: *Designate Additional Retaliation Monitor for CCB*

- *The agency will identify and assign an additional staff member to serve as a retaliation monitor specifically for the Central Cell Block (CCB).*
- *This staff member must ensure that a face-to-face Initial Retaliation Monitoring interview is completed the same day the allegation or incident is reported, due to detainees remaining in CCB for 24 hours or less.*

Due Date: *Immediately*

	Verification Method: *Documentation review; confirmation memo; training record; assignment letter.* ***Corrective Action #2:*** *Establish Backup Structure for Retaliation Monitoring* • *The PREA Coordinator (Ms. _____) will serve as the backup to the PREA Victim Services Coordinator for retaliation monitoring.* • *If both primary and secondary staff are unavailable, the PREA Compliance Specialist (Ms. _____) will serve as the additional backup to ensure no lapse in service delivery.* ***Due Date:*** *Immediately* ***Corrective Action #3:*** *Centralize Retaliation Documentation in Electronic System* • *All retaliation monitoring forms—including initial, 30-day, 60-day, and 90-day reviews—will be uploaded into a DC-DOC PREA electronic management system that grants access to the PREA Coordinator and other relevant personnel.* • *This system will be used for real-time tracking, quality assurance, and audit readiness.* ***Due Date:*** *Immediately* ***Expected Outcome:*** *These corrective actions will ensure prompt retaliation monitoring for CCB detainees, maintain compliance with PREA Standard 115.167, establish reliable staff coverage, and centralize documentation for accountability and oversight.* *DC-DOC's, PREA Coordinator* This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.167.

115.171	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.171. Central Cell Block (CCB) follows the District of Columbia Department of Corrections

(DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.171. An excerpt states, *"When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.*

2) Where sexual abuse is alleged, DOC shall use investigators who have received specialized investigation training as mandated in this policy.

3) Investigators shall conduct a thorough and objective investigation of each complaint.

4) Criminal Investigations Investigators conducting a criminal investigation shall:

- *Gather and preserve direct evidence, including any available physical DNA evidence, photographs, and any available electronic monitoring data;*
- *Utilize recording devices to interview alleged victims, suspected perpetrators, and witnesses;*
- *Review prior complaints and reports of sexual abuse involving the suspected perpetrator.*
- *When the quality of evidence appears to support criminal prosecution, DOC shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.*
- *Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.*

5) Administrative Investigations:

- *Administrative investigations will only be conducted for sexual misconduct and all other allegations of sexual abuse will be investigated by the Metropolitan Police Department (MPD);*
- *Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and*
- *Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings."*

This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.171.

While on site, this auditor interviewed DC-DOC's PREA Coordinator (PC) and DC-DOC's 2 specialized trained PREA Investigators. During the interview with DC-DOC's PREA Investigators, they shared that they are assigned to conduct all PREA administrative investigations at CCB. They further shared that CCB utilizes DC's

	Metropolitan Police Department (MPD) to conduct CCB's sexual abuse criminal investigations. The DC-DOC PREA Investigator's trainings were provided through the National Institute of Corrections (NIC) and titled *"PREA Investigations for Allegations of Sexual Abuse: Specialized Training."* Additionally, this auditor reviewed DC-DOC's PC/PREA Investigator's training course description. The training was broken down into modules and appeared to contain the components required in this PREA Standard 115.134. This training was in addition to the required CCB staff comprehensive PREA training/refresher training. During this interview with DC-DOC's 2 PREA Investigator, this auditor asked about their PREA investigative understanding. Both shared with this auditor their knowledge and responsibilities in evidence collection, Miranda/Garrity rights, interviewing procedures, understanding victim trauma, and investigation report-writing protocols. This auditor requested completed investigations within the past 12 months, to gain insight into CCB's PREA Investigator reporting style and investigation content. CCB's Captain shared that there have been no PREA investigations within the last 12 months. DC-DOC's Administrative PREA Investigators submitted completed PREA Investigations from another facility to give perspective as to how investigations are completed. The investigation files submitted were neatly organized, had detailed and robust content from initial incident, interviews, and evidence identification. Furthermore, the investigation reports had a detailed summary of the investigations, sources and interviews used to make determinations, policy violations and investigator recommendations. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.171.

115.172	**Evidentiary standard for administrative investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.172. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.172. An excerpt states, *"The Investigator shall submit the final written report to the OIS Supervisor within ninety (90) business days (i.e., excluding Saturdays, Sundays, and legal*

	holidays) of the incident being reported. The report shall include the Investigator's factual findings on whether the charges were substantiated, unsubstantiated, or unfounded." This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.172. While on site, this auditor interviewed DC-DOC's PREA Coordinator (PC) and DC-DOC's 2 specialized trained PREA Investigators. During the interview with DC-DOC's PREA Investigators, they shared that they are assigned to conduct all PREA administrative investigations at CCB. They further shared that CCB utilizes DC's Metropolitan Police Department (MPD) to conduct CCB's sexual abuse criminal investigations. The DC-DOC PREA Investigator's trainings were provided through the *National Institute of Corrections (NIC)* and titled *"PREA Investigations for Allegations of Sexual Abuse: Specialized Training."* Additionally, this auditor reviewed DC-DOC's PC/PREA Investigator's training course description. The training was broken down into modules and contained the components required in PREA Standard 115.134. This training was in addition to the required CCB staff comprehensive PREA training/ refresher training. During this interview with DC-DOC's 2 PREA Investigator, this auditor asked about their PREA investigative understanding. Both shared with this auditor their knowledge and responsibilities in evidence collection, Miranda/Garrity rights, interviewing procedures, understanding victim trauma, and investigation report-writing protocols. This auditor requested completed investigations within the past 12 months, to gain insight into CCB's PREA Investigator reporting style and investigation content. CCB's Captain shared that there have been no PREA investigations within the last 12 months. DC-DOC's Administrative PREA Investigators submitted completed PREA Investigations from another facility to give perspective as to how investigations are completed. The investigation files submitted were neatly organized, had detailed and robust content from initial incident, interviews, and evidence identification. Furthermore, the investigation reports had a detailed summary of the investigations, sources and interviews used to make determinations, policy violations and investigator recommendations. However, this auditor observed inconsistencies regarding the use of preponderance of evidence conclusions (substantiated, unsubstantiated, or unfounded) for 6 out of 16 reports. This auditor reviewed conclusions such as, "No Known Victim, Within Policy, PREA Complaint Withdrawn, and Withdrew complaint due to retaliation," which do not align with this PREA Standards. This auditor recommended that CCB utilize the appropriate preponderance of evidence outcome as the concluding determination for all PREA Administrative Investigations. The following concluding determinations below align with this PREA standard and can be applied to CCB's PREA Administrative investigation concluding determinations:

- *Investigated and determined **not meet the PREA definition** of (Sexual Abuse or Sexual Harassment) as identified in PREA Standard 115.6*
- *Investigated and determined to be **Unfounded***
- *Investigated and determined to be **Substantiated***
- *Investigated and determined to be **Unsubstantiated***

This auditor also recommended that CCB establish a period of consistency in practice of following/adhering to the above-mentioned revised practice regarding the appropriate utilization of Preponderance of Evidence for investigations before compliance with this PREA standard can be determined. This PREA auditor concluded that Central Cell Block (CCB) was not in compliance with PREA Standard 115.172. Corrective Action was required.

During Central Cell Block's (CCB) Corrective Action Period (CAP), this auditor conducted and engaged in a series of meetings and correspondence with DC-DOC's PREA Coordinator (PC). The goal was to discuss the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, DC-DOC's PREA Coordinator submitted DC-DOC *"Investigations Spreadsheet"* of 86 sexual abuse and sexual abuse and sexual harassment investigations (between 9/2025 through 4/2026) assigned to DC-DOC's Office of Investigative Services (OIS) specialized trained PREA administrative investigators. Each of the 53 concluded investigations on the *"Investigations Spreadsheet"* had the appropriate preponderance of evidence outcome determination (substantiated, unsubstantiated, unfounded). The remaining 33 investigations were still active (not yet concluded).

This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.172.

115.176	**Disciplinary sanctions for staff**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.176. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.176. An excerpt states, *"In cases where there is a finding of probable cause that an allegation of*

	sexual assault, sexual abuse, sexual misconduct, breach of confidentiality, or retaliation against staff and/or an detainee, arrestee, or resident occurred, the appropriate manager or supervisor shall ensure that disciplinary action is proposed in accordance with the regulations outlined in Chapter 16 of the District Personnel Manual. *The manager or supervisor shall inform OIS in writing of disciplinary action taken against the employee. He/she shall also advise the OIS in writing of actions taken as a result of other recommendations resulting from the OIS investigation.* *Managers and supervisors who fail to report or take appropriate action when sexual assault, sexual abuse, or sexual misconduct against detainees, arrestees, or detainees is alleged or has been brought to their attention, or who fail to initiate disciplinary action, shall also be subject to disciplinary action.* *Refusal by any employee to answer questions during an official investigation may also be grounds to charge the employee for cause under Chapter 16 of the DPM.* *DOC shall impose discipline based on a determination of probable cause that sexual assault, sexual abuse, or sexual misconduct has occurred. The DOC may take separate and distinct disciplinary action against an employee who has later, under separate proceedings, been found to have acted in violation of the laws of the District of Columbia or Chapter16 of the DPM by the Office of Employee of Appeals, the Office of Human Rights, the Commission of Human Rights, or a court of competent jurisdiction in the District of Columbia.* *DOC shall notify the supervisor of any individual who is not employed by the DOC of probable cause findings so that appropriate disciplinary action may be initiated against those individuals."* This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.176. While onsite, this PREA auditor interviewed DC-DOC's PREA Coordinator and CCB's Captain. Both shared that CCB follows *DC-DOC's District Personnel Manual* and *DC-DOC PREA Policies*. CCB's Captain further shared that CCB's responses to substantiated outcomes of staff sexual abuse investigations can range in various forms of disciplinary actions, up to termination and criminal referral. This auditor interviewed Office of Investigative Services Chief. He confirmed DC-DOC's "*Zero Tolerance*" policy for sexual abuse and sexual harassment, as well as the information shared by DC-DOC's PREA Coordinator and CCB's Captain. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.176.

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

	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.177. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.177. An excerpt states, *"Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with detainees, arrestees, and residents, and shall be reported to law enforcement agencies and their respective licensing bodies unless the activity was clearly not criminal and determined not to be sexual abuse but within the scope of their job duties."* This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.177. While onsite, this PREA auditor interviewed DC-DOC's PREA Coordinator and CCB's Captain. Both shared that they follow DC-DOC PREA policies regarding contractors substantiated sexual abuse. CCB's Captain and DC-DOC's PREA Coordinator further shared that substantiated outcomes from sexual abuse investigations result in denied access ("lock out") to all DC-DOC facilities as well as a range of various forms of disciplinary measures, up to notifying licensing bodies and criminal referral. This auditor interviewed Office of Investigative Services Chief. He confirmed DC-DOC's "Zero Tolerance" policy for sexual abuse and sexual harassment regarding contractors, as well as the information shared by DC-DOC's PREA Coordinator and CCB's Captain. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.177.

115.178	**Referral for prosecution for detainee-on-detainee sexual abuse**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.178. Central Cell Block (CCB) follows the District of Columbia Department of Corrections

	(DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction “Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.178. An excerpt states, *“Detainees, arrestees, and residents who engage in the sexual assault, sexual abuse, or sexual misconduct of another individual may be referred for criminal prosecution.* *Regardless of criminal prosecution, DOC shall take appropriate administrative actions to ensure that the respondent is placed in restrictive housing for the safety of others.* *An inmate, arrestee, or resident who engages in sexual contact with another detainee, arrestee, or detainee shall be disciplined in accordance with PM 5300.1, Detainee Disciplinary and Administrative Housing Hearing Procedures.* *If the investigation concludes that the detainee, arrestee, or resident knowingly and deliberately made a false report of sexual assault, sexual abuse, or sexual misconduct, he or she may be referred for disciplinary action in accordance with PM 5300.1, Detainee Disciplinary and Administrative Housing Hearing Procedures* *The Warden, Chief of Investigative Services, or designee should contact law enforcement to determine if a deliberately false accusation may be referred for prosecution.”* This auditor reviewed DC-DOC’s Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.178. While onsite, this PREA auditor interviewed CCB’s Captain. CCB’s Captain shared that if there is probable cause that a detainee sexually abused another detainee while in CCB, she would respond immediately by referring this information to the *Metropolitan Police Department (MPD)* for an investigation and would support the efforts of an investigation. Additionally, while the detainees are in custody, CCB’s Captain would separate both detainees, place them in cells alone, transport detainees alone and would input an alert into the DC-DOC electronic system regarding both detainees. Additionally, she would inform the *Marshall Service* of the high risk of perpetration status of the offending detainee. Finally, this auditor interviewed Office of Investigative Services Chief. He confirmed DC-DOC's "*Zero Tolerance*" policy for sexual abuse and sexual harassment regarding detainees, as well as the information shared by DC-DOC's PREA Coordinator and CCB’s Captain. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.178.

115.182	**Access to emergency medical and mental health services**
	Auditor Overall Determination: Meets Standard

Auditor Discussion

This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.182. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.182. An excerpt states, *"If a complainant alleges sexual abuse or sexual assault, then DOC staff shall ensure the complainant is immediately given the necessary emergency medical treatment by medical staff, without compromising the integrity of available physical evidence. Medical Staff Shall:*

1. *Obtain and record a description of the sexual assault or sexual abuse in the alleged complainant's own words. The complainant shall not receive a physical examination.*
2. *Instruct the complainant not to bathe, shower, brush their teeth, remove any items of clothing, urinate, or have a bowel movement until seen at the referring hospital.*
3. *Notify the highest ranking staff employee immediately, if the correctional staff is not aware of the incident.*
4. *Record the general appearance and the presence or absence of cuts, scratches, bruises, etc. and demeanor of the complainant, as well as the condition of clothes, e.g., torn or stained.*
5. *Refer the complainant to an outside emergency room (ER) certified to treat sexual assault and sexual abuse complainants for evaluation and immediate treatment.*
6. *Notify the ER physician that a sexual assault or sexual abuse complainant is on his/her way to the ER. c. d. Evidence Protocol and Forensic Medical Examinations, the following procedures shall be followed:*

DOC follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

DOC shall offer all victims of alleged sexual abuse access to forensic medical examinations. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners."

This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.182.

While on site, this auditor conducted a site review/tour of CCB and observed a medical area to triage medical services at CCB. This auditor interviewed medical

	contractor, *Unity Healthcare's* Nurse on duty who shared that CCB primarily utilizes *Medstar Washington Hospital Center* for medical services for their detainees. *Unity Healthcare's* Nurse on duty shared that medical decisions are made based on her professional judgement, and victim detainees are informed about emergency contraception by the local hospital they are taken to and followed up by CCB (or the hospital based on the scope of follow-up). Unity Healthcare's Nurse on duty shared that they follow a protocol each time a PREA allegation is addressed. This protocol ensures that all parties involved receive appropriate and immediate medical care, crisis support and triage treatment before a detainee receives medical services outside the facility. Additionally, *Unity Healthcare's* Nurse on duty shared that staff work together to ensure that victims receive appropriate medical care as well as emotional support provisions. CCB detainee victims of sexual abuse receive unimpeded access to medical services with community partner hospitals for acute/serious medical services. Finally, Unity Healthcare's Nurse on duty shared that medical and crisis intervention services are provided to the victims of sexual abuse without financial cost. Finally, DC-DOC's PC submitted evidence that DC-DOC has entered a Memorandum of Understanding (MOU) with *Network for Victim Recovery of DC, District of Columbia Forensic Nurse Examiners,* and *MedStar Washington Hospital Center (MWHC)*. This multi-agency MOU allows CCB to utilize *Medstar Washington Hospital Center* as the community-based hospital for SANE/SAFE services through the District of Columbia Forensic Nurse Examiners, Victim Advocacy through the *Network for Victim Recovery of DC*. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.182.

115.186	**Sexual abuse incident reviews**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.186. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA policies. CCB submitted their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21 as evidence of compliance with PREA Standard 115.186. An excerpt states, *"The facility shall establish an Incident Review Team made up of upper-level*

management officials (Chief of Office of Investigative Services), with input from line supervisors (Lieutenant), (OIS), investigators, the PREA Coordinator, and medical or mental health practitioners, and Victim Services Coordinator/Advocate.

2) The Team shall 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.

3) Such review shall ordinarily occur within thirty (30) days of the conclusion of the investigation.

4) ***The review team shall:***

a) consider whether changes in policy or practice are needed to improve the prevention, detection, or response to sexual abuse incidents similar to the alleged incident;

b) whether race, ethnicity, sexual orientation, gang affiliation, or group dynamics in the facility played a role;

c) whether physical barriers in the facility contributed to the incident;

d) whether staffing levels need to be changed in light of the alleged incident;

e) whether more video monitoring is needed;

f) The PREA Coordinator shall prepare a report of its findings, including any recommendations for improvement and submit such report to the SAIRT.

g) The PREA Coordinator shall implement the recommendations for improvement, or shall document its reasons for not doing so."

This auditor reviewed DC-DOC's Policy #3350.21; concluding that it has the necessary language to align with PREA Standard 115.186.

While onsite, this PREA auditor interviewed DC-DOC's PREA Compliance Specialist (PCM) and CCB's Captain, who shared that *Sexual Abuse Incidents Reviews* are conducted at the conclusion of sexual abuse investigations (unless unfounded) within 30 days of the conclusion of the sexual abuse investigation. DC-DOC's PREA Coordinator (PC) shared that the CCB Captain, Warden or Deputy Warden are present to address all CCB incidents at SAIR meetings. This auditor reviewed 3 *Sexual Abuse Incident Review Team (SAIRT)* meetings minutes submitted in OAS by DC-DOC's PCM (October 2024, March 2025, and June 2025). All meeting minutes were observed to be compliant with 115.186. All SAIRT meetings were documented, including the team/staff that attended. The meetings further reviewed sexual abuse incidents to see if the incident(s) were motivated by policy or practice flaws, race, ethnicity, gender identity/orientation, physical plant barriers, staffing levels, monitoring practice and/or technology flaws.

This PREA auditor concludes that the Central Cell Block (CCB) is in compliance with PREA Standard 115.186.

115.187	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.187. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding data collection captured in their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA Standard. This auditor interviewed DC-DOC PREA Coordinator and DC-DOC PREA Compliance Specialist. Both shared that sexual abuse and sexual harassments data is collected monthly from each DC-DOC facility, as well as Sexual Abuse Incident Review reports to identify facility-based corrective action recommendations. All monthly sexual abuse and sexual harassment information are compiled into annual reports, consisting of narrative discussion of prevention efforts, statistical data documentation, corrective actions taken, outstanding corrective actions, as well as recommendations. This PREA auditor reviewed CCB's website ***DOC PREA, Safety, and Security Reports | doc*** and was able to view DC-DOC's 2021, 2022, 2023, and 2024 Annual Reports. This auditor was able to verify that uniformed data is collected and disseminated to the public. These annual reports also consist of CCB's incident-based sexual abuse data collected annually. This auditor also viewed CCB's 2016, 2019 and 2023 PREA Final Audit Reports. DC-DOC's PREA Coordinator was able to explain how their data is collected and stored for audit, review, and corrective action purposes. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.187.

115.188	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also

	relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.188. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding data review for corrective action captured in their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA Standard. This auditor interviewed DC-DOC PREA Coordinator and DC-DOC PREA Compliance Specialist. Both shared that sexual abuse and sexual harassments data is collected monthly from each DC-DOC facility, as well as Sexual Abuse Incident Review reports to identify facility-based corrective action recommendations. All monthly sexual abuse and sexual harassment information are compiled into annual reports, consisting of narrative discussion of prevention efforts, statistical data documentation, corrective actions taken, outstanding corrective actions, as well as recommendations. This PREA auditor reviewed CCB's website ***DOC PREA, Safety, and Security Reports | doc*** and was able to view DC-DOC's 2021, 2022, 2023, and 2024 Annual Reports. This auditor was able to verify that uniformed data is collected and disseminated to the public. These annual reports also consist of CCB's incident-based sexual abuse data collected annually. This auditor also viewed CCB's 2016, 2019 and 2023 PREA Final Audit Reports. This auditor observed an annual summary, related aggregate data, year-to year assessment/comparisons, and corrective action documentation. Additionally, DC-DOC's PREA Coordinator was able to explain how their data is collected and stored for audit, review, and corrective action purposes. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.188.

115.189	**Data storage, publication, and destruction**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This PREA Auditor reviewed Central Cell Block (CCB) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/ files reviewed and observations to determine compliance for Standard 115.189. Central Cell Block (CCB) follows the District of Columbia Department of Corrections (DC-DOC) PREA Policy. There was no information regarding data storage, publication, and destruction captured in their District of Columbia Department of Correction "Elimination of Sexual Abuse, Sexual Assault, and Sexual Misconduct Policy #3350.21, as such policy documentation is not required for this PREA

	Standard. This auditor interviewed DC-DOC PREA Coordinator and DC-DOC PREA Compliance Specialist. Both shared that sexual abuse and sexual harassments data is collected monthly from each DC-DOC facility, as well as Sexual Abuse Incident Review reports to identify facility-based corrective action recommendations. All monthly sexual abuse and sexual harassment information are compiled into annual reports, consisting of narrative discussion of prevention efforts, statistical data documentation, corrective actions taken, outstanding corrective actions, as well as recommendations. This PREA auditor reviewed CCB's website ***DOC PREA, Safety, and Security Reports | doc*** and was able to view DC-DOC's 2021, 2022, 2023, and 2024 Annual Reports. This auditor was able to verify that uniformed data is collected and disseminated to the public. These annual reports also consist of CCB's incident-based sexual abuse data collected annually. This auditor also viewed CCB's 2016, 2019 and 2023 PREA Final Audit Reports. This auditor observed an annual summary, related aggregate data, year-to year assessment/comparisons, and corrective action documentation. Additionally, DC-DOC's PREA Coordinator was able to explain how their data is collected and stored for audit, review, and corrective action purposes. Finally, DC-DOC's PC reported that PREA-related sexual abuse data is protected by an electronic database password and permission protected. It is also stored and maintained for a minimum of 10 years (pursuant to 115.187). This PREA auditor concludes that Central Cell Block (CCB) is in compliance with PREA Standard 115.189.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Central Cell Block (CCB) understands PREA Standard 115.401, which states, *"During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once."* CCB plans to continue to have a PREA audit conducted every three years. This is CCB's fourth PREA Facility Audit and the first year of the current audit cycle (Cycle 5). The auditor had access to, and the ability to observe, all areas of the audited facility. The auditor was permitted to request and receive copies of any relevant documents. The auditor was permitted to conduct private interviews with random selections of staff and detainees. The CCB detainees were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. This PREA auditor concludes that Central Cell Block (CCB) is in compliance with

	PREA Standard 115.401.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Central Cell Block (CCB) submitted their DC-DOC website: ***DOC PREA, Safety, and Security Reports	doc***. On DC-DOC's website, this auditor was able to view Central Cell Block's (CCB) 2016, 2019, and 2023 PREA Audit Final Reports. This auditor was also able to see DC-DOC's 2017 through 2024 Annual Reports. DC-DOC's website is available for public viewing.

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.)	yes
115.112 (b)	**Contracting with other entities for the confinement of detainees**	
	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".)	yes
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.)	yes
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	yes

	deployment of video monitoring systems and other monitoring technologies?	
	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	yes

	circumstances or when such viewing is incidental to routine cell checks?	
	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**	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.115 (e)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	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,	yes

	and respond to sexual abuse and sexual harassment, including: Detainees who have psychiatric disabilities?	
	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 formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have intellectual disabilities?	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
	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
115.116 (b)	**Detainees with disabilities and detainees who are limited English proficient**	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to detainees who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and	yes

	expressively, using any necessary specialized vocabulary?	
115.116 (c)	**Detainees with disabilities and detainees who are limited English proficient**	
	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
115.117 (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	yes

	employees?	
	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.)	yes
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 investigations**	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.122 (b)	**Policies to ensure referrals of allegations for investigations**	
	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 of the agency's zero-tolerance policy**	
	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	yes

	administrative or criminal sexual abuse investigations. See 115.121(a).)	
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(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**	
	In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of	yes

	vulnerability? (N/A if lockup is NOT used to house detainees overnight.)	
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	yes

	occurred?	
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 victim[1]s 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 contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf	yes

	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?	
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	yes

	expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	
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,	yes

	suspect, or witness on an individual basis and not on the basis of that individual’s status as detainee or staff?	
	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 (l)	**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 investigations**	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.176 (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:	yes

	Relevant licensing bodies?	
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 sexual 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 services**	
	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 services**	
	Are treatment services provided to the victim without financial	yes

	cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	
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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	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.)	na

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	**Frequency and scope of audits**	

(h)		
	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