

PREA Facility Audit Report: Final

Name of Facility: South Bend Community Reentry and Chain O' Lakes Complex

Facility Type: Prison / Jail

Date Interim Report Submitted: 06/07/2021

Date Final Report Submitted: 06/09/2021

| Auditor Certification | |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge. | <input checked="" type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input checked="" type="checkbox"/> |
| 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. | <input checked="" type="checkbox"/> |
| Auditor Full Name as Signed: `SONYA LOVE | Date of Signature: 06/09/2021 |

| AUDITOR INFORMATION | |
|-------------------------------------|--------------------------|
| Auditor name: | Love, Sonya |
| Email: | sonya.love57@outlook.com |
| Start Date of On-Site Audit: | 03/25/2021 |
| End Date of On-Site Audit: | 03/27/2021 |

| FACILITY INFORMATION | |
|-----------------------------------|---|
| Facility name: | South Bend Community Reentry and Chain O' Lakes Complex |
| Facility physical address: | 4650 Old Cleveland Road, South Bend, Indiana - 46628 |
| Facility Phone | |
| Facility mailing address: | |

| Primary Contact | |
|--------------------------|----------------------|
| Name: | Janet Pontius |
| Email Address: | jpontius@idoc.in.gov |
| Telephone Number: | 574-234-4094 ext 262 |

| Warden/Jail Administrator/Sheriff/Director | |
|---|--------------------|
| Name: | Charles Bowen |
| Email Address: | cbowen@idoc.in.gov |
| Telephone Number: | 574-234-4094 |

| Facility PREA Compliance Manager | |
|---|------------------------|
| Name: | Janet Pontius |
| Email Address: | jpontius@idoc.in.gov |
| Telephone Number: | O: (574) 234-4094 x262 |
| Name: | Dannette Smith |
| Email Address: | danesmith@idoc.in.gov |
| Telephone Number: | O: (260) 636-3144 x247 |

| Facility Health Service Administrator On-site | |
|--|------------------------|
| Name: | Linda Frye |
| Email Address: | linda.frye@idoc.in.gov |
| Telephone Number: | 765-593-0111 |

| Facility Characteristics | |
|--|-----------------|
| Designed facility capacity: | 341 |
| Current population of facility: | 260 |
| Average daily population for the past 12 months: | 270 |
| Has the facility been over capacity at any point in the past 12 months? | No |
| Which population(s) does the facility hold? | Males |
| Age range of population: | 18 and over |
| Facility security levels/inmate custody levels: | level 1 minimum |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 60 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 18 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 0 |

| AGENCY INFORMATION | |
|--|--|
| Name of agency: | Indiana Department of Correction |
| Governing authority or parent agency (if applicable): | State of Indiana |
| Physical Address: | 302 W Washington St., IGCS, RM E334, Indianapolis, Indiana - 46204 |
| Mailing Address: | |
| Telephone number: | 317-232-5711 |

| Agency Chief Executive Officer Information: | |
|--|-----------------------|
| Name: | Robert Carter |
| Email Address: | rocarter1@idoc.in.gov |
| Telephone Number: | 317-232-5711 |

| Agency-Wide PREA Coordinator Information | | | |
|---|---------------|-----------------------|----------------------|
| Name: | Bryan Pearson | Email Address: | bpearson@idoc.in.gov |

AUDIT FINDINGS

Narrative:

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

The standards used for this audit became effective August 20, 2012. An internet search confirmed the South Bend Community Re-Entry Center 2019 final PREA report was posted on the agency and facility Website. Further, in reviewing the IDOC website the Auditor found the following PREA related information:

IDOC SEXUAL ABUSE AND SEXUAL HARASSMENT REPORTS

To report an incident of sexual abuse or sexual harassment on behalf of an inmate please call 877-385-5877 or email IDOCPREA@idoc.in.gov

Reporting parties please note the following:

- The allegation will be discussed with the victim named in the report
- The allegation will be disclosed only to those who need to know to ensure victim safety and to investigate the allegation
- Please include the following information, if known, when reporting sexual abuse or sexual
- Date of the alleged incident.
- Victim's name and DOC number and facility
- All alleged perpetrators names and DOC numbers
- Location of alleged incident
- Any other information provided regarding the incident

* For more information on the Prison Rape Elimination Act (PREA) visit:
www.prearesourcecenter.org

IDOC SURVEY of SEXUAL VIOLENCE REPORTS

Survey of Sexual Victimization Reports, State Prison Systems Summary Form, 2011-2019

IDOC AGENCY ANNUAL REPORT

The report provides a summary of the sexual incident report data collected by IDOC annual, compares reporting data with the previous two tears, summaries problems identified, and corrective actions completed, changes made to improve compliance with PREA standards, and identifies continued needs

for compliance for the Indiana Department of Corrections.

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|------|---|
| 2020 | Sexual Abuse Prevention Program Annual Report |
| 2019 | Sexual Abuse Prevention Program Annual Report |
| 2018 | Sexual Abuse Prevention Program Annual Report |
| 2017 | Sexual Abuse Prevention Program Annual Report |
| 2016 | Sexual Abuse Prevention Program Annual Report |
| 2015 | Sexual Abuse Prevention Program Annual Report |
| 2014 | Sexual Abuse Prevention Program Annual Report |
| 2013 | Sexual Abuse Prevention Program Annual Report |

Indiana Ombudsman Bureau

The IDOC Indiana Ombudsman Bureau was created by the legislature in the fall of 2003. Per Indiana Code (IC) 4-13-1.2-1 through 4-13-1.2-12. The Bureau is charged with the responsibility of receiving, investigating, and attempting to resolve complaints from offenders housed in IDOC facilities or offenders' family members that the DOC accuses of violating a specific law, rule, department written policy or endangered the health or safety of a person. The director of the bureau was appointed by the Governor in May 2005. The Ombudsman Bureau reviews complaints from inmates across the state and provides recommendations to the IDOC for resolution. The Ombudsman Bureau completes a monthly report of substantiated complaints which includes an overview of monthly activity and any follow-up if necessary. The Auditor found an unrelated PREA complaint dated November 2018 from an inmate at Indiana State Prison, regarding classification. The last annual report was published in 2018. The recent Indiana Ombudsman Monthly Report was published in December 2019.

Pre-Audit Phase

The notifications of the audit were posted in the facility at least six weeks prior to the on-site audit; photographs were taken and submitted to the Auditor. The facility completed the Pre-Audit Questionnaire. The facility uploaded supporting documentation via cloud server in advance of the onsite portion of the facility audit. Correspondence with the PREA Coordinator and PREA Compliance Manager took place throughout the audit process. The Auditor was provided access to all PREA related documents and files. An examination of the inmate handbook revealed that South Bend/Chain-O-Lake's inmate education includes information about:

- Mental Health Services and how to access the service
- The academic and technical training programs are available at most facilities
- Larger facilities have Law Libraries that may be used for legal research. All offenders are permitted to have access to legal materials throughout IDOC
- That substance abuse programming is available in all facilities
- That the IDOC has educational and treatment program for offenders who have been convicted of sex crimes, either during a current commitment or previously

- Telephone calls will be monitored and recorded, apart from calls to your attorney or legal representative
- Inmates may have access to legal representatives, including consular officials, and the courts to the extent required by statute, treaty, court order, rule, or policy
- Sexual Assault Prevention and Reporting PREA Audit Report, South Bend/Chain-O-Lakes 2019
- Offender Grievance Process

The Auditor completed a document review of the South Bend/Chain-O-Lakes, Pre-Audit Questionnaire (PAQ), applicable policies, procedures, program statements and supplemental information. Telephone calls and emails were exchanged between the PREA Coordinator, PREA Compliance Managers and the Auditor. The following documentation was requested for the onsite visit:

- Roster of inmates by unit
- Roster of inmates with disabilities
- Roster of inmates who were Limited English Proficient (LEP)
- LGBTI inmates
- Inmates who reported sexual abuse
- Inmates who reported sexual victimization during risk screening
- Staff roster by shifts
- Specialized staff roster
- Inmates census the first day of the audit
- A roster of new employees hired in the past 12 months
- Staffing Plan
- Unannounced institutional rounds
- List of contact information for volunteers
- SANE/SAFE point of contact information
- Copies of training acknowledgments for volunteers and contractors

Entrance Briefing and Tour (On-site Audit)- First day The audit was conducted by Certified PREA Auditor, Sonya Love. The audit of the South Bend Community Re-Entry Center and Chain-O-Lakes took place on the dates of March 25-27, 2021. Administrative interviews took place on March 16, 2021. An entrance conference was held on March 25, 2021, and March 27, 2021, with the Warden and his leadership team from each respective facility. A complete facility tour was conducted by the Auditor at both locations.

Some specialized staff were shared between the two facilities, however the Auditor interviewed 1 Aramark contractor and 1 Wexford contractor at Chain-O-Lakes. Double counting specialized staff was

unavoidable when duties overlapped between South Bend and Chain-O-Lakes. More, because of job descriptions and staffing considerations some staff assignments included multiple responsibilities in one or more specialized categories.

The Warden was interviewed for both South Bend and Chain-O-Lake's facilities. More, staff (random and specialized) and inmates' (random and targeted) responses during interviews confirmed that all had received PREA training. Staff members were interviewed from all shifts. The facility operates on 12-hour shifts. Thirty (30) inmate institutional files were reviewed from both facilities. A random sampling of other facility documentation was reviewed as well. This sampling included, but was not limited to logbooks, shift reports, incident reports, policies, and procedures, (20) training records/logs and review of the PREA and SART training curriculum. The Auditor reviewed the contractual agreement between the Indiana Coalition Against Domestic Violence and the IDOC.

During each facility tour, staff members were observed interacting with inmates and providing direct supervision during activities. On the days of the audit the total population at South Bend was 151 inmates and Chain-O-Lakes was 121 adult inmates. Twenty (20) random and one targeted inmate interviews were conducted at South Bend Community Re-Entry Center. Twenty (20) random and zero targeted interviews were conducted at Chain-O-Lakes Correctional Facility.

| Inmates | Total Numbers |
|---|----------------------|
| Random | 40 |
| Targeted | 1 |
| | |
| Inmate Categories | Total Numbers |
| Youthful Inmates | 0 |
| Disasle Inmates | 1 |
| Limited English Proficient (LEP) | 0 |
| Transgender/Intersex | 0 |
| Gay/lesbian/bisexual | 0 |
| Inmates placed in segregation for risk of victimization | 0 |
| Inmates who repoorted abuse | 0 |
| Inmates who disclosed sexual victimization during screening | 0 |
| Inmate Correspondence | |
| Inmate letters to the Auditor | 1 |

| Staff | |
|--|---|
| Agency contract administrator | 1 |
| Administrative resources | 1 |
| Intermediate or higher level staff who conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment | 1 |
| Line staff who supervise youthful inmates | 0 |
| Education staff who work with youthful inmates | 0 |
| Program staff who work with youthful inmates | 0 |
| Medical staff (contract) | 1 |
| Mental health staff | 0 |
| SAFE/SANE/SART representative | 1 |
| Volunteers | 0 |
| Contractors (Aramark) | 1 |
| Investigative staff | 1 |
| Staff who perform screening for risk of victimization and abusiveness | 2 |
| Staff who supervise segregation | 0 |
| Designated staff charged with monitoring retaliation | 2 |
| Incident review team | 2 |
| First responder, security | 1 |
| First responder, non security | 1 |

| Category of Staff Interviewed (South Bend/Chain-O-Lakes) | # Interviewed |
|---|----------------------|
| Random | 12 |
| Specialized | 15 |
| Total Staff Interviewed | 27 |

Auditor's note: In some instances, interviews overlapped between specialized and random staff due to the facility size and distribution of roles and responsibilities.

| Other staff interactions during the facility tour (South Bend/Chain-O-Lakes) | # of Interviews |
|---|------------------------|
| Staff interactions during the tour | 2 |
| Staff who refused to be interviewed | 0 |
| Total staff interviewed informally | 2 |

AUDIT FINDINGS

Facility Characteristics:

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

The Indiana Department of Correction places select offenders, who are within 12 months of their discharge date, into a community-based work release and re-entry program, to transition them back into society.

| Facility Characteristics | |
|---|-------------|
| Designated population | 341 |
| Current population | 260 |
| Average age of inmates | 18-80 years |
| Number of staff currently employed | 60 |
| Number of staff hired in the past 12 months | 28 |
| Number of individual contractors | 18 |
| Number of volunteers | 0 |
| PHYSICAL PLANT | |
| Number of building units | 8 |
| Number of housing units | 19 |
| Number of single cells | 1 |
| Number of open bay/dorms housing | 18 |
| Number of segregation | 0 |
| | |

South Bend Community Re-Entry Center

The South Bend Community Re-Entry Center, which is the oldest existing state work release program in

Indiana, was established in 1971, under contract with the Indiana Department of Correction. The facility was originally located at 135 S. Olive St. In 1975, the Department of Correction assumed full control of the facility and in 1977, the center was moved to 2421 S. Michigan St. In 2012, the center moved to its present location at 4650 Old Cleveland Rd., South Bend, Indiana. The facility provides re-entry services to offenders being released throughout northern Indiana and has both a work release program component and re-entry education program component for the long-term offender. Foodservice and recreation is provided at both facilities. The Indiana Department of Correction offers a wide selection of programming, courses, and activities based on both facility and offender need, as well as available resources. Listed below are several current programming opportunities available at South Bend

Community Re-Entry Center:

- Work Release Program
- Reentry Education Program
- Work Crew Program

- Employment Readiness Classes
- Life Skills Seminar
- Money Smart
- Dave Ramsey's Financial Peace University – Self Study
- Partners in Parenting
- Men's Fraternity
- Substance Abuse Treatment
- Alcoholics Anonymous
- Relapse and Prevention for Reentry
- Celebrate Recovery
- Self-Study Life Skill Programs
- Bible Study
- Motivation for Change

Chain O' Lakes Correctional Facility

The Chain O' Lakes Correctional Facility is in Noble County. The facility is located inside the Chain O' Lakes State Park. The facility was established in 1967 and at that time consisted of one building with a population of 54 offenders. Chain O' Lakes now consists of six buildings and houses and 154 adult male offenders, offering a wide variety of educational and treatment programs to aide each offender with his transition back into the community. Chain O' Lakes Correctional Facility also provides a variety of work crews throughout North East Indiana. Work crews help maintain Pokagon State Park as well as Chain O' Lakes State Park. Crews work closely with the Noble County Surveyors office, Indiana Department of Transportation and the local community on special projects that range from helping sand bagging when it floods to planting and maintaining flowers around the community.

The Indiana Department of Correction offers a wide selection of programming, courses, and activities based

on both facility and offender need, as well as available resources. Listed below are several current programming opportunities available at Chain O' Lakes Correctional Facility:

- Inside Out Dads
- Substance Abuse
- Thinking for a Change
- Purdue Master Gardener
- Anger Management
- Dave Ramsey's Financial Peace University
- All Pro Dad's

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

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|---|----|
| Number of standards exceeded: | 0 |
| Number of standards met: | 39 |
| Number of standards not met: | 0 |
| Not audited at the facility level: Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards. | 6 |

OAS will automatically calculate the number of standards exceeded, the number of standards met and the number requiring some measure of corrective action. Other than the standards listed below all other standards met PREA standards for the period under review. The following standard require some degree of corrective action:

115.51 Inmate access telephone access to outside entity was inoperable. The facility corrected the problem while the Auditor was onsite.

115.65 SB/COL should provide the Auditor with a coordinated response, written institutional plan for her review.that complies with Standard 115.65.

115.86 The single sexual abuse incident review was not dated or signed. The Auditor could not determine the timeline from the closure of the sexual abuse incident to the time the incident review committee met to review the incident was within 30 days. While the review did take place and SB/COL provided evidence of the review date was omitted along with the signature of the author of the document.

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.

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| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Indiana Department of Correction (IDOC) has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment that is outlined in Policy 02-01-115, Sexual Abuse Prevention. The Sexual Abuse Prevention Policy details the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment allegations. The Agency has designated a statewide PREA Coordinator.</p> <p>The agency's Executive PREA Coordinator Director is positioned in the upper level of the agency hierarchy. For the remainder of this report the Executive PREA Coordinator Director will be referred to as the PREA Coordinator. During his interview, the PREA Coordinator confirmed having sufficient time and authority to develop, implement, and oversee the agency efforts to comply with the PREA standards in all its facilities. Further, the PREA Coordinator outlined in detail how Indiana Department of Corrections (IDOC) coupled with PREA Compliance Managers assigned at each facility, advanced the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>South Bend Community Re-Entry Center and Chain-O-Lakes have each designated a PREA Compliance Manager, due in part to the geographical distance between the two facilities and to ensure adherence to PREA standards. The PCM at South Bend reports to the Correctional Case Manager, and the PCM at Chain-O-Lakes reports to the Administrative Assistant 2. Both Correctional Case Manager and Administrative Assistant 2 report to the Warden. Each PCM demonstrated a working knowledge of PREA standards. Likewise, each PCM confirmed the facility utilizes a PREA Working Committee/Group to maintain compliance with each PREA standard.</p> <p>During the facility tour, the Auditor noticed that zero tolerance posters were displayed throughout the facility, on each living unit and in common areas. Staff receive initial training and annual training, as well as updates throughout the year. The PCM job description was reviewed. South Bend and Chain-O-Lakes met the requirements of Standard 115.11.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Review of organizational charts for PREA Coordinator and PREA Compliance Managers (2) • Interview with the PREA Coordinator • Job description for PREA Compliance Manager, South Bend • Job description for PREA Compliance Manager, Chain-O-Lakes • Interview with the PREA Compliance Manager, South Bend |

• Interview with the PREA Compliance Manager, Chain-O-Lakes

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| 115.12 | Contracting with other entities for the confinement of inmates |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
| | <p>This standard is also being, or has been, audited at the agency-level. If the facility does not have any responsibility for this standard, you do not need to audit it. The facility has indicated on their PAQ that they do not have responsibility for this standard, separate from the agency's responsibilities, but you must confirm this as part of your audit.</p> |

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| 115.13 | Supervision and monitoring |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention with an effective date of 4/1/2020, confirmed that the agency has a documented policy that mandates the development and annual review of a facility staffing plan. Establishes guidance for staff and offenders regarding the prevention of sexual assaults and those actions to be taken in cases of alleged sexual abuse and sexual harassment by staff or offenders, including the establishment of a coordinated, multi-disciplinary team to respond to incidents of sexual abuse to ensure victims receive the medical and support services needed and that investigators obtain evidence to substantiate allegations and hold perpetrators accountable.</p> <p>Policy 02-01-115, Sexual Abuse Prevention, Subsection, C, Supervision and Monitoring, outlines the Agency's duty to ensure that each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities, shall take into consideration each factor delineated in Standard 115.13 (a).</p> <p>During an interview with the Warden, he confirmed that South Bend/Chain-O-Lakes experienced zero deviations from the established staffing plan in the past 12 months that required documentation of the circumstances. In times were there where staff absences, the facility utilized draft selection to fill the slot, working voluntary custody staff, or supervisors to augment staffing challenges.</p> <p>The facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. By examination, the Auditor determined that unannounced rounds were being conducted by intermediate level or higher-level supervisor to identify and deter sexual abuse and sexual harassment on all shifts to include weekends.</p> <p>More, the Auditor interviewed the facility Lieutenant who confirmed his responsibility to conduct unannounced rounds on all shift's nights and weekends. The Auditor identified random days to confirm compliance with this standard. Likewise, the Auditor interviewed random inmates who confirmed unannounced sightings of supervisors occurring during odd times at night and on weekends. Unrelated to other operational reasons to make rounds throughout the facility, random staff interviewed confirmed that duty supervisors made unannounced rounds that occurred without alerting staff.</p> <p>The staffing plan provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. The Executive Director of PREA, PREA Coordinator confirmed during his interview that he reviews, approves, and makes recommendations when necessary, to facility staffing plans for South Bend/Chain-O-Lakes (SB/COL) at least on a yearly basis. The Auditor was also provided a copy of the 2020/2021 staffing plans for South Bend/Chain-O-Lakes. Moreover, the Auditor received verification from the Warden and PREA Compliance Managers (2) that the Executive Director of PREA, PREA</p> |

Coordinator and the Regional Director were both given the opportunity to review and approve the facility annual staffing plan for SB/COL on 1/26/2021.

Evidence relied upon to make auditor determination:

- Pre-Audit Questionnaire
- Policy 02-01-115 (Sexual Abuse Prevention)
- 2021 Annual Staffing Plan (South Bend)
- 2020 Annual Staffing Plan (South Bend)
- 2020 Annual Staffing Plan (Chain-O-Lakes)
- 2021 Annual Staffing Plan (Chain-O-Lakes)
- Institution Capacity/Shift Reports/Daily Logs (South Bend/Chain-O-Lakes)
- Auditor Review of unannounced rounds (South Bend/Chain-O-Lakes)
- Interviews with the Executive Director of PREA, PREA Coordinator and PREA Compliance Managers
- Interviews with staff (random)
- Interview with the Warden

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| 115.14 | Youthful inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>South Bend/Chain-O-Lakes do not house youthful offenders. South Bend and Chain-O-Lakes met the requirements of Standard 115.14.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • • Review of Policy 01-04-102 (Classification Assignments for Youth Incarcerated as Adults and Alternatively Sentenced Youth) • Daily population reports • Facility tour • Interviews with the Executive Director of PREA, PREA Coordinator • Interviews with the PREA Compliance Managers (South Bend/Chain-O-Lakes) |

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|--------|---|
| 115.15 | Limits to cross-gender viewing and searches |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-03-101, Searches and Shakedown and Policy 02-10-1118 address the requirements in Standard 115.15.</p> <p>According to IDOC, the primary consideration in conducting searches shall be the safety and security of the facility, staff, and inmates. IDOC mandates that all searches shall be conducted in a courteous, respectful, and professional manner. Policy 02-03-101 indicates that "...except during an emergency as declared by the Warden or designee, a strip search must afford the offender reasonable privacy and shall be conducted by staff of the same gender. Opposite gender strip searches of an inmate shall not be conducted unless the opposite gender staff member, in his/her professional judgment, has reasonable cause to believe that a delay in retrieving possible prohibited property would jeopardize the safety, order, and/or security of the facility. If a strip search is conducted by an opposite gender staff member, the strip search shall be documented on an Incident Report and submitted to the Custody Supervisor or designee."</p> <p>Random staff (100%) described circumstances that would warrant an opposite gender strip search, during individual interviews. Random staff (100%) interviewed were also aware of the need to document all cross-gender strip searches and cross-gender visual body cavity searches. Neither SB/COL houses female inmates. During this audit SB/COL has zero inmates identified as transgender or intersex.</p> <p>The Auditor confirmed by examination that all staff received training on the facility policy that does not allow cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat down searches be conducted. South Bend/Chain-O-Lakes both have a written policy that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Review of 02-03-101(Searches and Shakedowns) • Review of 02-01-118 (Transgender and Intersex Offenders) • Security skills refresher evaluation • Strip and cavity searches • Training sign in sheets and curriculum • Inmate handbook • Interview with inmates |

- Interview with staff
- Interview with the Executive Director of PREA, PREA Coordinator
- Observations of Auditor during the on-site portion of the audit

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| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>IDOC Policy (Telephonic and In Person Interpretive Service) and Policy 02-01-115 (Sexual Abuse Prevention, Subsection F.) address the policy requirements of Standard 115.16. IDOC takes reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient. The agency/facility has an on-going Memorandum of Understanding (MOU) to provide inmates with needed assistance. The facility is equipped with posters in alternate languages such as Spanish to ensure inmate education.</p> <p>IDOC utilizes a uses Propio LLC interpretive service that can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. These Propio LLC interpretive services are available 24 hours a day. The facility provided invoices of the use of interpretive services. During random interviews (100%) facility staff confirmed that they always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-response duties under §115.64, or the investigation of the inmate’s allegations. The facility also has a list of staff members’ that are utilized as interpreters.</p> <p>IDOC takes reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient. They employ an interpreter who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. South Bend/Chain-O-Lakes does not use inmate interpreters. South Bend/Chain-O-Lakes met the requirements of Standard 115.16.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-03-101 (Searches and Shakedowns) • Policy 02-01-118 (Transgender and Intersex Offenders) • Memorandum: Warden regarding use of inmate interpreters, inmate readers, or inmate assistants, dated April 19, 2019 • Training: Security skills refresher evaluation • Propio LS LLC, purchase agreement effective date /08/2021 • Propio, over-the-phone interpreting service access instructions with top language codes • Training: Strip and Cavity Searches • Training sign in sheets and curriculum |

- Review of the inmate handbook
- Interviews with inmates (random)
- Interviews with random staff
- Interview with the Executive Director of PREA, PREA Coordinator

| | |
|--------|---|
| 115.17 | Hiring and promotion decisions |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>IDOC Policy 04-03-102, Human Resources and Policy, and IDOC Policy 04-03-103, Information and Standards of Conduct for Departmental Staff, prohibit hiring or promoting anyone who may have contact with inmates, and prohibits enlisting the services of any contractor who may have contact with inmates, who: 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). The same policies require that criminal background records checks be conducted at least every four years on current employees and contractors who may have contact with inmates. The facility provided Policy 04-03-103 and 04-03-102 as evidence that the agency ensures compliance with Standard 115.17. Each policy was reviewed, a blank copy of an applicant questionnaire was uploaded for the Auditor to examine, and a Human Resource representative was also interviewed.</p> <p>A Human Resource representative was interviewed during the onsite portion of the audit. The HR representative confirmed that the agency prohibits the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse. The agency considers material omissions regarding such misconduct, or the provision of materially false information, grounds for termination. The agency considers any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates and the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates. Furthermore, before SB/COL/Agency hires new employees, who may have contact with inmates, the Agency performs a criminal background records check on all potential applicants, contractors, and volunteers. Volunteerism has been suspended by IDOC for greater than 12 months.</p> <p>The Executive Director of PREA, PREA Coordinator confirmed in an interview that the Agency asks all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees and provided evidence. Furthermore, the HR representative and the Executive Director of PREA, PREA Coordinator also affirmed that the agency imposes upon employees a continuing affirmative duty to disclose any such misconduct and he also provided evidence in the form of the employment application form for the Indiana Department of Corrections. IDOC, 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. The Auditor examined criminal background records check of current employees, volunteers, and contractor to determine compliance with Standard 115.17. The Executive Director of PREA, PREA Coordinator provided the Auditor with (2) examples of the agency providing information to potential employers 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.</p> |

The Warden confirmed during his interview that IDOC prohibits the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. During the last 12 months, South Bend had 17 and Chain-O-Lakes had 11 persons hired who may have contact with inmates that received criminal background checks. South Bend/Chain-O-Lakes met the requirements of Standard 115.17.

Evidence relied upon to make auditor determination:

- Pre-Audit Questionnaire
- Policy 04-03-103 (Information and Standards of Conduct for Departmental Staff)
- Policy 04-03-102, Human Resources
- Sample: Re-Hire Request for Information document
- Sample: IDOC Release of PREA Information
- Interviews with staff (random and specialized)
- Interview with the Warden (SB/COL)
- Interview with the Human Resource representative
- Interview with the Executive Director of PREA, PREA Coordinator
- Interview with the PREA Compliance Managers
- Sample: Review of applicant employment questionnaire

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| 115.18 | Upgrades to facilities and technologies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>SB/COL has not acquired a new facility or made any substantial expansions or modifications to the existing facility since August 20, 2012 or since the last PREA audit in 2019.</p> <p>South Bend Community Re-Entry Center has 72 cameras throughout the facility to areas where inmates are permitted. The facility has made minor modifications to its strip search procedure by creating a room with semi stalls where inmates may be stripped search without being exposed of other inmates.</p> <p>Chain O Lakes Correctional facility has nine (9) cameras placed throughout the facility were installed before the 2019 PREA audit. Twelve additional, high-definition cameras have been ordered to replace and supplement the current system. The Pre-Audit Questionnaire captured the additions being made based on the recommendation of the staffing plans as wells the interviews of the Incident Review Team, Compliance Managers and Executive Director of PREA, PREA Coordinator. South Bend/Chain-O-Lakes met the requirements of Standard 115.18.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Observations of the Auditor during the on-site tour • Floor plan with cameras (South Bend) • Floor plan with cameras (Chain-O-Lakes) • Interviews with staff • Interview with the Executive Director of PREA, PREA Coordinator • Interview with the PREA Compliance Managers (2) • Interview with Warden |

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| 115.21 | Evidence protocol and forensic medical examinations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115 (Sexual Abuse Prevention, Subsection V.) and Standard Policy Indiana Code (IC) 11-10-3-5, Co-payment requirements; exceptions. The Agency offers all inmates who experience sexual abuse access to forensic medical examinations on-site, without financial cost, where evidentiary or medically appropriate. IC 11-10-3-5 outlines circumstances when an inmate is not required to pay for medical services such as: (1) the service is provided in an emergency; (2) the service is provided because of an injury received in the correctional facility; or (3) the service is provided at the request of the administrator of a correctional facility all address the policy requirements of Standard 115.21.</p> <p>The Auditor confirmed by examination that the facility has a MOU with a local hospital and the Indiana Coalition Against Domestic Violence (ICDV). A call was made to the service provider. The Regional SANE Coordinator of the program, Michelle Resendez verified that facility currently has a MOU with a local hospital. The services provided are as follows: Examinations performed by Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners (SANE); SAFE or SANE examiners are available 24 hours and seven days a week (documented in the MOU); victim advocacy, emotional support, crisis intervention, information, and referrals.</p> <p>Random and specialized staff confirmed knowledge of the MOU with local victim advocacy organization as well as what services are offered by each provider. Inmates understood services were available for victims of sexual abuse but did not recall specifics. Each inmate could tell the Auditor where additional victim information could be located, regarding how to report sexual abuse or sexual harassment in addition to third-party reporting to outside entities, on each living unit. Specialized staff confirmed that if requested by the victim, South Bend/Chain-O-Lakes would provide SART victim advocates, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews. In addition to counseling provided by a Mental Health professional at South Bend/Chain-O-Lakes, victims of sexual abuse, either during or prior to incarceration, can receive emotional support services from a Victim Advocate at the Indiana Coalition Against Domestic Violence. Inmates can call the toll-free number to the ICADV hotline from the offender phone system by dialing #66. Further, inmates are also provided with the address to the ICADV to write the organization.</p> <p>Indiana Coalition Against Domestic Violence</p> <p>Attn: IDOC Victim Advocate 1915 W. 18th Street, Indianapolis, IN 46202</p> <p>The IDOC is responsible for investigating allegations of sexual abuse in the facility. Allegations of sexual abuse that rise to criminal behavior is referred to the Indiana State Police for investigation and referral for prosecution when applicable. During an interview with the facility investigator, he confirmed that the facility follows the requirements for investigating allegations of sexual abuse. The same investigator confirmed that the investigative protocol, as appropriate, was 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</p> |

for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011.

The Agency is responsible for the initial investigation of allegations of sexual abuse in the facility. The Agency provided Indiana Code (IC) 11-10-3-5, Copayment, as evidence of compliance with Standard 115.21. The agency’s investigative officers follow the requirements for investigating allegations of sexual abuse in confinement settings.

The services provided are as follows:

- Examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs);
- SAFEs or SANEs are available 24 hours and seven days a week (documented in the MOU);
- Victim advocacy, emotional support, crisis intervention, information, and referrals.

Random staff and inmate questionnaires were conducted, and staff and inmates displayed knowledge of the Memorandum of Understanding and was able verbalize who the agreements were with and what services they provided. South Bend/Chain-O-Lakes met the requirements of Standard 115.21.

Evidence relied upon to make auditor determination:

- Pre-Audit Questionnaire
- Indiana Code (IC) 11-10-3-5, Copayment, exceptions
- Memorandum of Understanding with Indiana Coalition Against Domestic Violence
- Sexual Assault Response Team Curriculum (SART) (19 hours)
- Evidence Collection Table/Sexual Assault Evidence Protocols
- List of SART certified employees and copy of certificates of completion[SL1]
- Interviews with staff (random and specialized)
- Interviews with the PREA Compliance Managers
- Interview with the Executive Director of PREA, PREA Coordinator

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| 115.22 | Policies to ensure referrals of allegations for investigations |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1390 405">IDOC Policy 02-01-115, Sexual Abuse Prevention, Subsection B., and Policy 00-01-103 Investigations and Intelligence address the policy requirement of Standard 115.22.</p> <p data-bbox="252 517 1481 1066">The policy ensures that allegations of sexual abuse are investigated by an entity with the legal authority to conduct criminal investigations. The policy is available and accessible to viewers on the agency website. The Executive Director of PREA, PREA Coordinator confirmed that the South Bend/Chain-O-Lakes has a practice in place to document all investigations of allegations of sexual abuse or sexual harassment that are referred for investigation to the Indiana State Police to conduct criminal investigations, unless the allegation does not involve potentially criminal. An interview with a facility investigator confirmed his understanding of his responsibility to document all investigation and to make referrals when appropriate to the Indiana State Police. Per the PAQ, within the last 12 months, South Bend had zero allegations of sex abuse or harassment and Chain-O-Lakes had one reported incident. In addition, the PAQ revealed that South Bend had zero allegations resulting in an administration investigation and Chain-O-Lakes had one, but zero criminal investigations. South Bend/Chain-O[SL1] - Lakes met the requirements of Standard 115.22.</p> <p data-bbox="252 1178 935 1211">Evidence relied upon to make auditor determination:</p> <ul data-bbox="252 1323 1222 1944" style="list-style-type: none"> <li data-bbox="252 1323 699 1357">• Pre-Audit Questionnaire <li data-bbox="252 1402 935 1435">• Policy 02-01-115, Sexual Abuse Prevention <li data-bbox="252 1469 991 1503">• Policy 00-01-103 Investigations and Intelligence <li data-bbox="252 1547 759 1581">• Review of investigation file (1) <li data-bbox="252 1626 1222 1659">• Interview with the Executive Director of PREA, PREA Coordinator <li data-bbox="252 1693 1110 1727">• Interview with the Office of Investigation and Intelligence <li data-bbox="252 1771 759 1805">• Review of the agency website <li data-bbox="252 1850 991 1883">• Interview with the PREA Compliance Managers <li data-bbox="252 1917 951 1951">• Interviews with random and specialized staff |

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| 115.31 | Employee training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>IDOC Policy 02-01-115, Sexual Abuse Prevention, Subsection VI, Training and Education, subsection A., address the policy requirement of Standard 115.31.</p> <p>By examination of twenty (20) random training files the Auditor determined compliance with Standard 115.31 (a). Further, all twenty (20) training files reflected that the staff received the appropriate training in accordance with Standard 115.31 (b). Of the twenty (20) random files those requiring refresher training had received training yearly as outlined in IDOC policy but at least refresher training every two years to ensure that all employees know the Agency's current sexual abuse and sexual harassment policies and procedures per 115.31 (c). In years in which an employee did not receive refresher training, the PREA Compliance Manager (2) confirmed IDOC/SB/COL would provide refresher information on current sexual abuse and sexual harassment policies. The Auditor reviewed the employee training curriculum provided by the facility PREA Coordinator. South Bend/Chain-O-Lakes met the requirements of Standard 115.31.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> · Pre-Audit Questionnaire · Policy 02-01-115 (Sexual Abuse Prevention) · Indiana Training Lesson Plan 2020 revised · On the Job Training Session · Security Skills Evaluations · Learning Plan Transcript · Acknowledgment of Receipt · Auditor review of training files · Auditor review of training curriculum · PREA brochures · Interviews with staff (random and specialized/contractor) · Interview with the PREA Compliance Managers (2) |

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| 115.32 | Volunteer and contractor training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>IDOC Policy 02-01-115, Sexual Abuse Prevention, Subsection B., the Indiana Contractor and Volunteer Manual and PREA Lesson Plan all address Standard 115.32.</p> <p>Volunteerism has been suspended by the Agency for better than one year due to the Corona-19 pandemic. Prior to the suspension of volunteer services, all volunteers and contractors who have contact with inmates had been trained on their responsibilities under the Agency’s policies and procedures regarding sexual abuse and sexual harassment prevention and detection. Contractors with essential work roles and responsibilities such as foodservice for the Agency, continue to work onsite as needed.</p> <p>During training, IDOC notifies all volunteers and contractors who may have contact with inmates of the Agency’s zero-tolerance policy regarding sexual abuse and sexual harassment. Likewise, the training also informs each volunteer or contractor how to report such incidents prior to gaining contact with inmates. The level and type of training provided to volunteers and contractors is based on the types of services they provide and frequency and level of contact they have with inmates. The Auditor interviewed a contractor for SB/COL who detailed her training provided by SB/COL. She confirmed her duty to report any allegation of sexual abuse/sexual harassment to a member of management or the Shift Supervisor immediately and she was aware of the Agency’s zero-tolerance policy for sexual abuse and sexual harassment.</p> <p>The PREA Lesson Plan utilized for training volunteers and contractors considers the diverse level of contact with inmates and the services being rendered to inmates at SB/COL. The curriculum also covers the Agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informs a volunteer or contractor how to report such incidents. South Bend/Chain-O-Lakes met the requirements of Standard 115.32.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Indiana Contractor and Volunteer Manual • Interview with a contractor • Interview with the Executive Director of PREA, PREA Coordinator • Examination of Training Receipt of Acknowledgment Forms |

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| 115.33 | Inmate education |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>IDOC Policy 02-01-115, Sexual Abuse Prevention, Subsection C, Offender Education, address Standard 115.33.</p> <p>The Agency documents inmate training in the inmate institutional and clinical files. A total of thirty (30) inmate institutional files were reviewed to verify that inmates received information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment during their intake process. IDOC Offender PREA Brochure covered how to report incidents or suspicions of sexual abuse or sexual harassment. The information was also provided for those who are limited English proficient (LEP), deaf, visually impaired, or otherwise disabled.</p> <p>Within 7 days but no greater than 30 days of intake, the IDOC/SB/COL provides age-appropriate comprehensive education to inmates verbally in-person, written materials and by video, regarding their rights to be free from sexual abuse and sexual harassment, as well as their rights to be free from retaliation for reporting such incidents. The training of inmate education regarding was verified through the review of thirty (30) clinical files.</p> <p>In addition to providing such education the Agency ensures that key information is continuously and readily available or visible to inmates through posters, inmate handbooks and informal PREA groups. During the facility tour the Auditor noted PREA related posters were in Spanish and English and they were posted throughout the facility, specifically on living units and displayed in common areas. The inmates sampled were very versed in the grievance process and all felt that their grievance would be addressed in a confidential and timely manner. South Bend/Chain-O-Lakes met the requirements of Standard 115.33.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Auditor review of inmate education materials • Offender PREA Brochure (Spanish) • Offender PREA Brochure (English) • Sexual Abuse Reporting to the Ombudsman Office (English) • Sexual Abuse Reporting to the Ombudsman Office (Spanish) • Inmate PREA Education Acknowledgment Form • PREA Grievance Orientation • Auditor review of inmate's files • Interpretive language contract |

- Interviews with staff
- Interviews with inmates
- Interviews with the Executive Director of PREA, PREA Coordinator

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| 115.34 | Specialized training: Investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>IDOC Policy 02-01-115, Sexual Abuse Prevention, Subsection D, Specialized Training: Investigations, and Policy 00-01-103, Investigation and Intelligence, address Standard 115.34.</p> <p>IDOC conducts investigations of sexual abuse/sexual harassment. The South Bend/Chain-O-Lakes a regional investigator formally investigates allegations that meet the criteria of abuse, neglect, or criminal allegations, and does not contract with an outside entity. In addition to the general training provided to all employees pursuant to §115.31, the Agency mandates that, to the extent the Agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings.</p> <p>The Agency also conducts investigations into the administrative aspects of sexual abuse investigations. This inquiry is informal and is only conducted to determine staff misconduct. These aspects include determining whether staff actions or failure to act contributed to the abuse and the investigation shall be documented in comprehensive written reports. If criminal involvement is founded, the investigation is referred for criminal charges. The investigators have been trained on conducting sexual abuse investigations. Documentation of the completed training is maintained by the Agency. The Auditor examined the training curriculum for compliance Standard 115.34 (b). The curriculum included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, the criteria and evidence required to substantiate a case for administrative action or prosecution referral. South Bend/Chain-O-Lakes met the requirements of Standard 115.34.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Policy 00-01-103 (Investigation and Intelligence) • Interview with the Executive Director of PREA, PREA Coordinator • Interview with the PREA Compliance Managers • National Institute of Corrections (NIC) Investigation Curriculum • 2020 PREA Investigators Training Participants Manual, The Moss Group • Interview of Agency investigator • Review of the certificate of course completion |

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| 115.35 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>IDOC ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>By examination, the Auditor determined that IDOC/SB/COL maintains documentation that medical and applicable mental health practitioners have received general and specialized training referenced in this standard either from the Agency or elsewhere. For example, Wexford is a contract provider for staff medical and mental health practitioners. This provider provides e-training of specialized training for medical and mental health practitioners. IDOC mandates staff/contractor general and specialized training regarding this standard for contractors who may come in contact with an inmate. SB/COL utilizes telepsychology. Moreover, psychological, and mental health services are accomplished via telemedicine. The Auditor verified by examination training documents for medical and mental health practitioners' staff. The documentation indicates that training was conducted, and that specialized staff was re-trained yearly. Medical staff employed at South Bend/Chain-O-Lakes do not conduct forensic medical exams. South Bend/Chain-O-Lakes met the requirements of Standard 115.35.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Interviews with Medical and Mental Health Staff • Wexford PREA Training Curriculum • IDOC Staff Development and training, PREA Curriculum • Interview with the Executive Director of PREA, PREA Coordinator • Interview with the PREA Compliance Managers • Review of training certifications and training records for all medical and mental health staff |

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| 115.41 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Subsection VII., Screening for Risk of Sexual Victimization and Abusiveness, address the policy requirement for Standard 115.41.</p> <p>IDOC Policy 02-01-115, Sexual Abuse Prevention requires screening (upon admission to a facility or transfer to another facility) for risk of being sexually abused by other inmates or sexually abusive toward other inmates. Further, the policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusive behaviors within 72 hours of their intake but ordinarily within twenty-four hours. Based on a sample of thirty (30) institutional files, the facility is conducting the screening upon intake the Auditor determined that: All inmates' samples were assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates, and for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. Using an objective instrument for PREA risk screening termed Adult Sexual Violence Tool (SVAT), the intake screenings ordinarily occurred within 72 hours of the arrival to the facility.</p> <p>IDOC/SB/COL risk screenings considered all factors detailed in 115.41 (d) such as: (1) Whether the inmate has a mental, physical, or developmental disability, the age of the inmate, physical build, if inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming or a history of sexual victimization or sexually victimizing others. Moreover, in assessing inmates for risk of being sexually abusive, IDOC/SB/COL 's initial PREA risk screening considers, as known to IDOC, any prior acts of sexual abuse, prior convictions for violent offenses, and any history of prior institutional violence or sexual abuse.</p> <p>IDOC Policy 02-01-115, Sexual Abuse Prevention mandates within a set time period not more than 30 days from the inmate's arrival at the facility, SB/COL reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. Other reassessment should occur of the inmate's risk level when warranted due to a referral, an incident, a request, or due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.</p> <p>During interviews of inmates sampled (random and targeted) (100%) confirmed that they were screened during the intake process by a counselor/caseworker. An example of a PREA risk screening assessment form (blank) was examined by the Auditor. Each file examined (30) contained documented evidence in the form of a risk assessment that was conducted in accordance with Standard 115.41. The facility through record review demonstrated that inmates were screened again within thirty (30) days. The Incident Treatment Team, staff responsible for completing risk screening, were interviewed to verified that the Agency/SB/COL obtains this information periodically throughout an inmate's confinement and considers the motivation of all applicable incidents. The Incident Treatment Team, staff responsible for completing risk screening confirmed that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs 115.41 (d)(1), (d)(7), (d)(8), or (d)(9) of this section. Random and targeted inmates deny ever being disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to 115.41 (d)(1), (d)(7), (d)(8),</p> |

or (d)(9) of this standard.

The Incident Treatment Team, staff responsible for completing risk screening detail best efforts to implement appropriate controls to avert the dissemination of personal identifying or sensitive information to prevent the exploitation of information to the inmate's detriment by staff or other inmates. Appropriate control includes but is not limited to locked files cabinets in locked rooms with limited key access, encryption and private password and log-on information. South Bend/Chain-O-Lakes met the requirements of Standard 115.41.

Evidence relied upon to make auditor determination:

- Pre-Audit Questionnaire
- Review of inmate screenings
- Review of Sexual Violence Assessment Tool
- Review of the SVAT instruction for Completion
- Review the Adult SVAT Questionnaires
- Identifying LGBTI offenders
- Observations made during the on-site portion of the audit
- Auditor Interviews with specialized staff
- Auditor interviews with inmates
- Auditor with the PREA Coordinator
- Auditor Interviews with the PREA Compliance Managers

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| 115.42 | Use of screening information |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Subsection C., Use of Screening Information, Policy 01-04-101, Adult Offender Classification; 02-01-118, Transgender and Intersex Procedure; Directive: Health Care Services; 2.03A, Reception Screening; Health Care Services and Directive 3.01A, Health Services for Transgender/Intersex Offenders all address the policy requirement for Standard 115.42.</p> <p>Policy 02-01-115, Sexual Abuse Prevention, Subsection C., Use of Screening Information, Policy 01-04-101, Adult Offender Classification; 02-01-118, Transgender and Intersex Procedure; Directive: Health Care Services; 2.03A, Reception Screening; Health Care Services and Directive 3.01A, Health Services for Transgender/Intersex Offenders these policies were adopted with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive and to inform housing, bed, work, education, and program assignments. According to the PREA Coordinator, the Agency makes individualized determinations how best to ensure the safety of each inmate on a case-by-case basis to include inmates identified as LGBTI.</p> <p>More, The PREA Coordinator also confirmed that in deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, IDOC considers, on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems. Placement and programming assignments for each transgender or intersex inmate is reassessed at least twice each year to review any threats to safety experienced by the inmate. During this audit SB/COL documented zero transgender/intersex inmates in the population. The Warden/PREA Compliance Manager confirmed during separate interviews that SB/COL would earnestly consider a transgender or intersex inmate's own view with respect to his or her own safety when making a facility and housing placement decision and programming assignments. Transgender and intersex inmates assigned to SB/COL would be given the opportunity to shower separately from other inmates.</p> <p>IDOC does not house LGBTI inmates in a dedicated facility, unit, or wing solely for the placement of LGBT or pursuant to a consent decree.</p> <p>IDOC always refrains from placing: Transgender inmates in dedicated facilities, units, or wings solely based on such identification or status according to the PREA Coordinator/PREA Compliance Manager and Warden.</p> <p>IDOC always refrains from placement of LGBTI a dedicated facility, unit, or wing solely for the placement of LGBTI status.</p> <p>Thirty (30) SVAT documents were examined by the Auditor. The facility uses information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping all inmates safe and free of abuse. The facility conducts screenings, according to this standard. Staff responsible (Counselors/Caseworkers) for completing risk</p> |

screening confirmed during interviews with the Auditor that risk screenings are utilized to inform bed, work, education, and program assignments at SB/COL.

All inmates are given the opportunity to dress/shower/use the toilet with a measure of privacy. The facility states as a last resort, to protect an inmate who has been victimized when less restrictive measures are inadequate and alternative means of keeping the inmate safe cannot be immediately arranged, isolation may be considered as an option, transfer to another facility (victim) or transferring the aggressor to a more secure correctional facility. The Auditor queried a sample of random and targeted inmates during this audit. All inmates sampled (100%) indicated that they are given the opportunity to shower/dress and use the toilet facilities with a measure of privacy. Further, all indicated that SB/COL staff make opposite gender announcements. Zero transgender or intersex inmates were placed at SB/COL during the onsite portion of this audit. South Bend/Chain-O-Lakes met the requirements of Standard 115.42.

Evidence relied upon to make auditor determination:

- Pre-Audit Questionnaire
- Policy 01-04-101 (Adult Offender Classification)
- Policy 02-01-115, Sexual Abuse Prevention, Subsection C
- Review of Vulnerability Assessment documentation
- Policy 02-01-118, Transgender and Intersex Procedure
- Directive 3.01A, Health Services for Transgender/Intersex Offenders
- Facility tour
- Interviews with the Executive Director of PREA, PREA Coordinator
- Interview with the PREA Compliance Managers
- Interviews with staff
- Interviews with inmates
- Auditor observation , review of facility schematics

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| 115.43 | Protective Custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Subsection C., Use of Screening Information, Policy 01-04-101, Adult Offender Classification; 02-01-118, Transgender and Intersex Procedure; Directive: Health Care Services; 2.03A, Reception Screening; Health Care Services and Directive 3.01A, Health Services for Transgender/Intersex Offenders all address the policy requirement for Standard 115.43.</p> <p>Policy 02-01-115, Sexual Abuse Prevention, Subsection C., Use of Screening Information, Policy 01-04-101, Adult Offender Classification; 02-01-118, Transgender and Intersex Procedure; Directive: Health Care Services; 2.03A, Reception Screening; Health Care Services and Directive 3.01A, Health Services for Transgender/Intersex Offenders these policies were adopted with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive and to inform housing, bed, work, education, and program assignments.</p> <p>The Agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and determination has been made that there is no available alternative means of separation from likely abusers.</p> <p>The number of segregation cells used for that purpose at SB/COL number zero. Both SB/COL are Level 1-minimum work camps for inmates. If SB/COL cannot conduct a safety assessment immediately, the Warden would transfer the victim to a safer environment while completing the assessment and at the same time transfer the aggressor to a more structured correctional environment, a Level 2-3 facility. During the past 12-month period zero inmates were placed in involuntary segregation because he was at high risk of sexual victimization. South Bend/Chain-O-Lakes met the requirements of Standard 115.43.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • The Pre-Audit Questionnaire • Interview with the Warden • Interview with inmates (Random and Targeted) • Policy 02-11-115 (Sexual Abuse Prevention) • Facility tour • PREA Housing Assignment Review Form (blank sample) • Interview with the PREA Compliance Managers |

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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Subsection VIII., A., Offender Reporting all address the policy requirement for Standard 115.51.</p> <p>Policy 02-01-115, Sexual Abuse Prevention, allows for multiple internal ways for inmates to report privately to agency officials about: sexual abuse and sexual harassment; retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; AND staff neglect or violation of responsibilities that may have contributed to such incidents. The Agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency. Problematic, the Auditor tested the telephone system. The telephone connection at South Bend did not connect to the reporting entity. Inmates were however still able to communicate by writing a letter to the public entity. The PREA Coordinator quickly contacted the telephone provider to correct the problem.</p> <p>Each staff interviewed during the audit confirmed that they understood their duty to report all allegations of sexual abuse or sexual harassment. Further, the Agency provides multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment through the grievance process, telling staff and the PREA hotline. Each inmate was able to discuss multiple ways of reporting sexual abuse and sexual harassment such as filing a grievance, third-party reporting, PREA hotline or telling a trusted staff person. Most inmates sampled indicated that they would simply inform staff. Inmates (random and targeted) were also knowledgeable of the grievance process. Grievance forms were observed available in the grievance boxes throughout the facility during the tour.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Policy 00-01-102 (Offender Access to Court) • Facility tour • Telephone test • Notice to inmates regarding the Indiana Ombudsman Bureau • Internet search: Indiana Ombudsman Bureau • Email communication: Ombudsman Bureau for the Annual 2020 report • Sexual Abuse Report Ombudsman Report 2019 • Auditor review of forms and reporting documentation • Interviews with inmates |

- Interviews with staff
- Interview with the Executive Director of PREA, PREA Coordinator
- Interview with the PREA Compliance Managers
- PREA Brochure (Inmate)
- PREA Brochure (Staff)

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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Subsection VII., Reporting, A., Exhaustion of Administrative Remedies, Policy 00-02-301, Administrative Procedures, and Policy Student Grievance Process all address Standard 115.52.</p> <p>Policy 00-02-301, Administrative Procedures details IDOC’s administrative procedure for dealing with inmate grievances regarding sexual abuse/sexual harassment. The policy/procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time; regardless of when the incident is alleged to have occurred. Language contained in the procedure indicates that the Agency always refrains from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.</p> <p>Likewise, IDOC educates inmates using a Grievance Orientation Form, on the specifics of filing a PREA related grievance during the intake process. Moreover, inmates are informed that the Agency permits inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits, an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and this type of grievance is not referred to a staff member who is the subject of the complaint.</p> <p>Further, the same grievance orientation form explains PREA related timeframes outlined in Standard 115.52 (d) such as: The Agency mandates the issuance of a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance, if the Agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, the Agency mandates that a facility notify the inmate in writing of any such extension and provide a date by which a decision will be made, and that at any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate should consider the failure to respond to the grievance to be a denial of that grievance.</p> <p>IDOC has also established a timeframe to address emergency grievances when the inmate alleges that he is subject to a substantial risk of imminent sexual abuse. The Auditor interviewed the PREA Compliance Managers (2) both confirm their role and responsibility if an inmate filed a PREA related grievance or an emergency grievance. During an interview with the Warden, he detailed critical steps after receiving an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse, the SB/COL would immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level (Warden and PREA Coordinator) for review at which time immediate corrective action would be taken. SB/COL is required to provide an initial response within forty-eight (48) hours, and the Agency mandates the issuance of a final Agency decision within five (5) calendar days. The Agency required SB/COL to provide an initial response and final determination of danger, document the decision to determine whether the inmates is in substantial risk of imminent sexual abuse and the action taken in response to the emergency</p> |

grievance.

The PREA Coordinator confirmed for the Auditor that the Agency permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies (grievances) relating to allegations of sexual abuse. During this reporting period SB/COL had zero emergency grievances, zero third party reports and zero declination of third-party assistance.

SB/COL may require as a condition of processing a complaint that the alleged victim agree to have the complaint filed on his or her behalf and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.

Policy 02-01-115 and Policy 00-02-301, indicates that the Agency disciplines inmates for filing a grievance related to alleged sexual abuse, ONLY where the agency demonstrates that the inmate filed the grievance in bad faith. Inmates (Random and Targeted) interviewed during the onsite portion of the audit. Zero participants in the sample indicated ever being disciplined for filing a PREA related grievance. South Bend/Chain-O-Lakes met the requirements of Standard 115.52.

Evidence relied upon to make auditor determination:

- Pre-Audit Questionnaire
- Policy 02-01-115, Sexual Abuse Prevention
- Policy 00-02-301 (Offender Grievance Process)
- PREA Grievance Orientation
- Interviews with the Warden
- Interviews with inmates (Random and Targeted)
- Interview the Executive Director of PREA, PREA Coordinator
- Interview with the PREA Compliance Managers (2)

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| 115.53 | Inmate access to outside confidential support services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section VII., Section C., Reporting, Offender Access to Outside Confidential Support Services, address Standard 115.53.</p> <p>The facility never has persons detained solely for civil immigration purposes. SB/COL provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. The contact information is posted throughout SB/COL. The Auditor noted information relative to access to outside confidential support displayed in all living units and in common area throughout SB/COL. The posters were observed posted during the tour of SB/COL. The PREA Coordinator maintains copies of the agreement with the Indiana Coalition Against Domestic Violence.</p> <p>SB/COL enables reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. Prior to inmates' access, inmates are informed of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory state reporting laws. The Auditor verified the level of confidentiality using the inmate telephone system. Inmates are advised that their call could be recorded. Inmates interviewed confirmed knowledge of access to victim advocacy support, but none could provide the Auditor with specifics regarding services offered nor the name of the advocacy organization. It should be mentioned that 100% of inmates were aware where information regarding advocacy support could be located if needed. South Bend/Chain-O-Lakes met the requirements of Standard 115.53.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Observations of the Auditor made during the facility tour • Agreement with the Indiana Coalition Against Domestic Violence 2020 • Interviews with inmates (Random and Targeted) • Interviews with staff • Interviews with the Executive Director of PREA, PREA Coordinator • Interviews with the PREA Compliance Managers |

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| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section VIII., Section D., Third Party Reporting Services, address Standard 115.54.</p> <p>The Agency has established a method to receive third-party reports of sexual abuse and sexual harassment. The facility accepts all third-party reports of inmate sexual abuse or sexual harassment. The agency established a method to receive third-party reports of sexual abuse and sexual harassment that can be found on the agency's website. The agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate on their website. The website provides contact information as well as whom the third-party reporter will speak to when communicating with the agency. According to the Executive Director of PREA, PREA Coordinator, third party reports by family, friends, and other members of the public can be made electronically by submitting an email to IDOCPREA@idoc.in.gov or telephoning (toll free) the Department Sexual Assault Hotline at (877) 385-5877. This contact information shall be posted in visiting rooms, published in offender and visitor brochures, and on the Department's website. South Bend/Chain-O-Lakes met the requirements of Standard 115.54.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Indiana Department of Correction website • Interviews with staff • Interviews with inmates • PREA Brochure (Visitors) • PREA Brochure (Staff) • PREA Brochure (Inmates) • Interview with the Executive Director of PREA, PREA Coordinator • Interview with the PREA Compliance Managers |

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| 115.61 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section IX., Official Response Following and Inmate Report, Subsection A., Staff, and Indiana Department of Corrections Reporting Duties address Standard 115.61.</p> <p>Employees of the Indiana Department of Corrections to include contractors and volunteers are mandated reporters and are required under Policy 02-01-115, Sexual Abuse Prevention, to immediately report any knowledge, suspicion, or information they receive regarding sexual abuse and harassment, retaliation against inmates or staff who report any incidents, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>Interviews with staff to include the Warden and regional investigator supported compliance with this standard. Staff (100%) interviewed confirmed that they would always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions. Random staff also indicated during interviews that they would report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators, the PREA Compliance Manager and the Warden. Specialized staff confirmed that they understood medical and mental health practitioners are required to report sexual abuse pursuant to Standard 115.61. South Bend/Chain-O-Lakes does not house inmates under the age of 18. South Bend/Chain-O-Lakes met the requirements of Standard 115.61.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Interview with the Warden • Interview with the investigator • Interview with the PREA Compliance Managers • Interviews with staff (random and specialized) • Interviews with inmates • Interview with the Executive Director of PREA, PREA Coordinator • Review of investigated files |

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| 115.62 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section B. address the requirements of Standard 115. 62. The policy requires staff to take immediate action to protect an inmate when he is identified as being subject to substantial risk of imminent sexual abuse.</p> <p>Staff (100%) interviewed confirmed their understanding of their responsibility, when they learn that an inmate is subject to a substantial risk of imminent sexual abuse and to take immediate action to protect the inmate from harm.</p> <p>Per the Preaudit Questionnaire (PAQ) and confirmed by the PREA Compliance Manager at Chain-O-Lakes (COL) and the Executive Director of PREA, PREA Coordinator, during the last 12 months, there was one incident when the facility determined that an inmate may be in substantial risk of imminent sexual abuse. The determination was made by the facility out of caution for the safety of the victim. The designation of the reported sexual abuse incident was due in part because of the physical design of Chain-O-Lakes. The open bay design is connected by a common set of Jack-and-Jill bathrooms.</p> <p>In addition, Chain-O-Lakes has zero segregation cells which presented a challenge for correctional managers to ensure the safety of the victim. It should be noted that the victim reported the incident on 10/15/20 which occurred on 10/12/20. The PREA Compliance Manager from Chain-O-Lakes interviewed the victim on 10/15/20, notified a regional investigator of the incident. Based on the account of the victim, both the victim and the aggressor were fully clothed when the incident occurred. Zero penetration was noted based on the incident report. The Warden was immediately notified on 10/15/20. The Warden immediately transferred the aggressor from Chain-O-Lakes to Branchville, another secure correctional facility on 10/15/20. The investigation into the incident was determined to be unsubstantiated. South Bend/Chain-O-Lakes met the requirements of Standard 115.62.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Interviews with staff • Incident report • Interview with the PREA Compliance Manager (COL) • Interview with the Executive Director of PREA, PREA Coordinator • Interview with the Warden |

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| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, supports compliance with this standard.</p> <p>Policy requires when a Warden/Superintendent or designee receives an allegation that an offender was sexually abused at another facility, the Warden/Superintendent or designee receiving the allegation shall notify the head of the facility where the alleged abuse occurred within seventy-two (72) hours of receiving the allegation and document he/she has provided such information. The Warden/Superintendent that receives such notification shall ensure that the allegation is investigated in accordance with this policy and administrative procedure. During the past 12 months, The Warden and PCM confirmed that there were zero (0) allegations received that an inmate was abused while confined to another facility. If the SB/COL received such a notification it would document the notification. South Bend/Chain-O-Lakes met the requirements of Standard 115.63.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Interview with the PREA Compliance Managers • Interview with the Executive Director of PREA, PREA Coordinator • Interview with Warden |

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| 115.64 | Staff first responder duties |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1465 405">Policy 02-01-115, Sexual Assault Prevention, Section B., Indiana Department of Correction Protection Duties, and Subsection D., Staff First Responder Duties address Standard 115.64.</p> <p data-bbox="252 517 1477 1149">First Responders are to ensure the safety of the victim and safeguard the crime scene and any physical evidence. Members of the Sexual Assault Response Team (SART) also require responders to take specific steps to respond to a report of sexual abuse including; separating the alleged victim from the abuser; preserving any crime scene within a period of time that still allows for the collection of physical evidence; request the alleged victim not take any action that could destroy physical evidence; and ensure that the alleged abuser does not take any action to destroy physical evidence, if the abuse took place within a time period that still allows for the collection of physical evidence. Staff interviews revealed a clear understanding of the actions to be taken upon learning that an inmate was sexually abused. Non-security staff interviewed during the onsite portion of the audit detailed a duty to request that the alleged victim not take any actions that could destroy physical evidence, and then notify Shift Supervisor. Per the PAQ, and confirmed by the Warden, Executive Director of PREA, PREA Coordinator and PREA Compliance Manager that within the last 12 months, there was one allegation that an inmate was sexually abused at Chain-O-Lakes. South Bend/Chain-O-Lakes met the requirements of Standard 115.64.</p> <p data-bbox="252 1261 992 1294">Evidence relied upon to make auditor determination:</p> <ul data-bbox="252 1339 1342 2000" style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Assault Prevention – Members of SART and Their Responsibilities) • Sexual Assault Prevention Directive • IDOC Sexual Abuse Incident Checklist • Interview with the Warden • Interview with the PREA Compliance Manager • Interview with the Executive Director of PREA, PREA Coordinator • Interviews with staff (security and non-security) first responders • Interviews with (Random and Specialized) staff |

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| 115.65 | Coordinated response |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The facility will either develop a coordinated written institutional plan or provide evidence of the existence of the said plan to the Auditor to gain compliance with the standard. |

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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
| | The facility is not responsible for collective bargaining. |

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| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Assault Prevention, Section G., Protection Against Retaliation address Standard 115.67.</p> <p>The Agency has established written guidance that requires the Office of Investigation and Intelligence to ensure the protection of inmates and staff who have reported sexual abuse or sexual harassment or who have cooperated in a sexual abuse or sexual harassment investigation.</p> <p>The Agency has multiple protection measures to employ in its efforts to protect staff and inmates such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</p> <p>During this reporting period SB/COL documented one allegation of sexual abuse/sexual harassment which occurred at COL. By examination, the Auditor determined that COL conducted retaliation monitoring of the victim for a period of 90 days with periodic face-to-face status checks. The Auditor interviewed the PCM of COL and confirmed during the interview that she would extend retaliation monitoring longer, as needed and act promptly to remedy any such retaliation. Further, in accordance with Standard 115.67 (c) monitoring would include but not be</p> <p>limited to monitor any inmate disciplinary reports, housing or program changes, negative performance ratings, or reassignments.</p> <p>During an interview with the Warden, he indicated that staff who cooperate with an investigation and indicate a concern regarding potential retaliation that SB/COL would take all steps necessary to protect the individual/staff who cooperate in an investigation. Likewise, the Executive Director of PREA, PREA Coordinator during his interview confirmed the Agency's duty to take all steps necessary to protect the individual/staff who cooperate in an investigation. There were no incidents of retaliation in the past 12 months. South Bend/Chain-O-Lakes met the requirements of Standard 115.67.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • PREA Retaliation Monitoring Form • Examination of retaliation monitoring of an inmate • Interview with the Executive Director of PREA, PREA Coordinator • Interview with the PREA Compliance Managers |

- Interview with the Warden

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| 115.68 | Post-allegation protective custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115 Sexual Assault Prevention, Section H. Post-Allegation Protective Custody and Policy 02-01-107, The Use of Protective Custody address Standard 115.68.</p> <p>SB/COL does not utilize segregated housing or restrictive status housing units to protect an inmate who alleged to have suffered sexual abuse. Policy 02-01-107, The Use of Protective Custody Facilities indicates that facilities that do not operate protective custody units shall ensure that offenders have the opportunity to request protective custody and procedures are available to process these requests.</p> <p>In a memorandum dated April 15, 2019 regarding Standard 115.68, the Warden indicated that South Bend/Chain-O-Lakes does not operate segregated or restricted housing. For this 2021 audit the Auditor interviewed the Warden. He confirmed that in the event of a PREA allegation the facility would immediately transfer the aggressor. By examination, the Auditor confirmed SB/COL practice of transferring the aggressor reported in a sexual abuse allegation being transferred to another secure facility to protect the victim. South Bend/Chain-O-Lakes met the requirements of Standard 115.68.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-107 (The Use and Operation of Protective Custody) • Policy 02-01-115 (Sexual Assault Prevention) • Interview with Office of Investigations and Intelligence • Interview with the Warden • Interview with the PREA Compliance Managers |

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| 115.71 | Criminal and administrative agency investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Assault Prevention, Section X., Subsection A. Criminal and Administrative Indiana Department of Corrections Investigations and Policy and Section IX., Policy 00-010-103, Investigations, and Intelligence address Standard 115.71.</p> <p>Policy 02-01-115, Sexual Assault Prevention, requires the Agency to conduct its own investigation into allegations of sexual abuse and sexual harassment. Investigations are required to be conducted promptly, thoroughly, and objectively including third-party reports.</p> <p>Criminal investigations are conducted by the Office of Investigations and Intelligence. The Agency uses investigators who have received specialized training in sexual abuse investigations as required by 115.34. Administrative and criminal investigations examined for SB/COL was documented. In accordance with 115.71 (c) investigators per policy are required to gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, interview alleged victims, suspected perpetrators, and witnesses, and review prior reports and complaints of sexual abuse involving the suspected perpetrator.</p> <p>The Auditor interviewed an investigator from the Office of Investigations and Intelligence for the audit who confirmed his duty regarding PREA investigations when the quality of evidence appears to support criminal prosecution, the Agency would conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. As an Agency investigator he described for the Auditor his responsibility to assess the credibility of an alleged victim, suspect, or witness on an individual basis and not based on that individual's status as inmate or staff. Furthermore, the same investigator confirmed that the Agency investigates allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding. The Auditor examine the single PREA related investigation for SB/COL. The Auditor did not find any use of a truth-telling device being employed during the investigative process. All substantiated allegations of conduct that appears to be criminal would be referred for prosecution. More, the investigator confirmed for the Auditor that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation and the investigation would continue.</p> <p>Policy 02-010115 and Policy 00-010-103 requires staff/contractors to cooperate with all investigations. There has been zero allegations of harassment and one allegation of sexual abuse that was unsubstantiated during this reporting period. Zero investigations were referred for criminal prosecution. The appropriate action was applied by the facility. South Bend/Chain-O-Lakes met the requirements of Standard 115.71.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Assault Prevention) |

- Policy 00-01-103 (Investigations and Intelligence)
- Interview with the Investigators
- Interview with the PREA Compliance Managers
- Review of Investigations

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| 115.72 | Evidentiary standard for administrative investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Assault Prevention, Section X., Subsection A. Criminal and Administrative Indiana Department of Corrections Investigations and Policy and Section IX., Policy 00-010-103, Investigations, and Intelligence address Standard 115.72.</p> <p>The policy states the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations are substantiated in administrative and criminal investigations. The Auditor interview an investigator for the Office of Investigations and Intelligence for this standard. The investigator confirmed that as an investigator he does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The Auditor examined the single reported incident of sexual abuse/sexual harassment documented during this reporting period and found the report met the criteria outlined in Standard 115.72. South Bend/Chain-O-Lakes met the requirements of Standard 115.72.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 00-01-103 (Investigations and Intelligence) • Policy 02-01-115, (Sexual Assault Prevention) • Interview with the PREA Compliance Managers • Interview with the Investigators |

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| 115.73 | Reporting to inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Assault Prevention, Section C., Reporting to Offenders address Standard 115.73.</p> <p>The standard requires that after an allegation of sexual abuse the inmate shall be informed verbally or in writing as to whether the allegation was substantiated, unsubstantiated or unfounded. All such notifications and attempts of notifications shall be documented.</p> <p>There was one (1) investigation into an allegation of sexual abuse and harassment. Per the PAQ, the inmate received all required notification. The allegation involved an inmate-on-inmate allegation of sexual abuse hence it did not involve facility staff therefore Standard 115.73 (c) is not applicable. The Auditor interviewed the PREA Compliance Manager (2) and confirmed that following an inmate’s allegation that he has been sexually abused by another inmate, SB/COL would then inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or the facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility and document the written notification of the victim on 10/21/21. South Bend/Chain-O-Lakes met the requirements of Standard 115.73.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115, Sexual Assault Prevention • Review of Investigation files • Interview with the PREA Compliance Managers • PREA Inmate Notification |

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| 115.76 | Disciplinary sanctions for staff |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Assault Prevention, Section XI., Discipline, Subsection A., Disciplinary Sanctions for Staff and Policy 04-03-103, Information and Standards of Conduct for Departmental Staff address Standard 115.76.</p> <p>Policy 04-03-103, Information and Standards of Conduct for Departmental Staff outlines the IDOC’s disciplinary response related to violations of PREA policies by staff. Specifically, disciplinary sanctions for staff may include termination. The policy specifically states that the presumptive disciplinary sanction for staff who engage in sexual abuse will be termination. The failure to participate in an investigation shall also be grounds for terminating employment. Further, IDOC policy regarding disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) indicate that disciplinary actions will be 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. This standard does not apply during this reporting period given the single reported incident of sexual abuse/sexual harassment was inmate-on-inmate.</p> <p>In the past 12 months, zero (0) staff was terminated for violating the facility’s PREA policies. South Bend/Chain-O-Lakes met the requirements of Standard 115.76.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 04-03-103 (Information and standards of conduct for departmental staff) • Interview with the PREA Compliance Managers • Review of Investigation files • Sexual Abuse Incident Review |

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| 115.77 | Corrective action for contractors and volunteers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section B. Corrective Action for Contractors and Volunteers address Standard 115.77.</p> <p>Policy 02-01-115, Sexual Abuse Prevention, states that any contractor or volunteer engaging in sexual abuse of inmates will be subject to referral to local law enforcement. The policy further requires that the contractor or volunteer be prohibited from having contact with inmates.</p> <p>During an interview with the Warden the Auditor confirmed that zero contractors were disciplined during this reporting period for violating any PREA standard. Volunteerism has been suspended due to the pandemic for greater than one year. Volunteers have not had contact with inmates. Further, the Warden confirmed that if a contractor or volunteer engaged in sexual abuse, he/she would be reported to: Law enforcement agencies if applicable, to any relevant licensing bodies, take appropriate remedial measures, and consider whether to prohibit further contact with inmates or issue a gate closure to the contractor or volunteer. During the past 12 months, zero (0) contractors reported to law enforcement. South Bend/Chain-O-Lakes met the requirements of Standard 115.77.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Gate Closure Restricting entry to facility • Review of Investigation file • Interview with the PREA Compliance Managers |

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| 115.78 | Disciplinary sanctions for inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section XI. Discipline, Subsection C., Disciplinary Sanctions for Offenders and Administrative Procedures Policy 02-04-101, The Disciplinary Code for Adult Offenders address Standard 115.78.</p> <p>Policy 02-04-101, Disciplinary Code for Adult Offenders, states that inmates may receive disciplinary sanctions following an administrative finding or a criminal investigation that an inmate engaged in inmate-on-inmate sexual abuse and sanctions shall be commensurate with the nature and circumstances of the sexual abuse, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.</p> <p>The Warden confirmed that there were no administrative or criminal findings of guilt for inmate-on-inmate sexual abuse in the past 12. The facility prohibits all sexual activity between inmates and may discipline inmates for such activity. The facility will not deem sexual activity to constitute sexual abuse if it determines that the activity was not coerced. There were one incident of sexual abuse inmate-on-inmate sexual activity that were determined to be unsubstantiated. South Bend/Chain-O-Lakes met the requirements of Standard 115.78.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-04-101 (Disciplinary Code for Adult Offenders) • Policy 02-01-115, Sexual Abuse Prevention • Indiana Department of Correction Adult Disciplinary Offenses and Sanctions, March 1, 2020 • Inmate handbook • Interview with the Warden • Interview with the PREA Compliance Managers • Conduct Report/Consensual Report |

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| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section XII, Medical and Mental Health Care, Subsection A., Medical and Mental Health Screenings/History of Sexual Abuse address Standard 115.81.</p> <p>According to the medical practitioner (nurse) interviewed during the onsite portion of this audit, inmates who disclose prior sexual victimization or who disclose previously perpetrating sexual abuse during an intake screening will be offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p>Further, the medical practitioner confirmed during the same interview that SB/COL obtains informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.</p> <p>Staff interviews confirmed compliance with this policy. In the past 12 months there were no inmates who disclosed previously perpetrating sexual abuse and required a follow-up meeting with a mental health practitioner. South Bend/Chain-O-Lakes met the requirements of Standard 115.81.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115, Sexual Abuse Prevention • Offender Information System • Auditor review of Behavioral Health and Intake documentation • Sexual Violence Assessment Tool • Consent for Treatment Form • Interviews with medical staff • Interview with the PREA Compliance Managers (2) |

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| 115.82 | Access to emergency medical and mental health services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section XII, Medical and Mental Health Care, Subsection B., Access to Emergency Medical and Mental Health Services and the Sexual Assault Manual address Standard 115.82.</p> <p>Policy 02-01-115, Sexual Abuse Prevention, Section XII, Medical and Mental Health Care, Subsection B., Access to Emergency Medical and Mental Health Services requires timely and unimpeded access to emergency medical treatment, crisis intervention services and victim advocacy services. The nature and scope of these services are determined by medical and mental health practitioners according to their professional judgment. Inmate victim will be afforded a forensic examination at no cost to the victim.</p> <p>Interviews with the Warden and medical practitioner confirmed that if no qualified medical practitioners are on duty at the time a report of recent sexual abuse is made, security staff first responders are directed to take preliminary steps to protect the victim pursuant to § 115.62. South Bend/Chain-O-Lakes met the requirements of Standard 115.82.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115, Sexual Abuse Prevention, Section XII, Medical and Mental Health Care, Subsection B., Access to Emergency Medical and Mental Health Services • Sexual Assault Manual • Review of an investigation file • Interviews with medical staff • Interview with the PREA Compliance Managers |

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| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section XII, Medical and Mental Health Care, Subsection C., Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers address Standard 115.83.</p> <p>Policy 02-01-115, Sexual Abuse Prevention, Section XII, Medical and Mental Health Care, Subsection C., Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers directs facilities to offer a medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any jail, prison, lockup, or juvenile facility. The level of services provided are consistent with the community level of care according to the medical practitioner interviewed during the onsite portion of this audit. SB/COL is an adult male facility therefore 115.83 (d), (e), do not apply to this facility. Further, the same medical practitioner also confirmed that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Treatment services offered by SB/COL would be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. SB/COL documented one incident of sexual abuse in the past 12-month period. The investigative document examined and provided by the PCM at Chain-O-Lakes, confirmed that the inmate declined treatment by a mental health practitioner. South Bend/Chain-O-Lakes met the requirements of Standard 115.83.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115 (Sexual Abuse Prevention) • Interviews with medical staff • Interview with the PREA Compliance Managers |

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| 115.86 | Sexual abuse incident reviews |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy 02-01-115, Sexual Abuse Prevention, Section XIII, Data Collection and Review, Subsection A., Sexual Incident Reviews address Standard 115.86.</p> <p>Policy 02-01-115, Sexual Abuse Prevention, Section XIII, Data Collection and Review, Subsection A., Sexual Incident Reviews mandates that facilities conduct an incident review in accordance with Standard 115.86. The Incident Review Team includes upper-level management officials and allows for input from supervisors, investigators and medical or mental health practitioners. The Warden and PREA Compliance Manager confirmed that an incident review is conducted at the conclusion of every sexual abuse investigation, including when the allegation has not been substantiated, unless the allegation has been determined to be unsubstantiated.</p> <p>Problematic, the investigation was completed on 10/21/21. The evidence provided does not include the date the incident review took place or who completed the report. Therefore, the Auditor could not determine if the incident review occurred within 30 days of the conclusion of the investigation.</p> <p>To correct the problem, SB/COL will provide the Auditor documented evidence of a completion date for the incident review for the reported incident of sexual abuse that occurred in the past 12-month period. The incident review does, however, include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners, and document considerations outlined in 115.86 (d) to include preparing a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the Warden and PREA Compliance Manager. This standard required minimal corrective action.</p> <p>Evidence relied upon to make auditor determination:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Policy 02-01-115, Sexual Abuse Prevention, Section XIII, Data Collection and Review, Subsection A., Sexual Incident Reviews • Sexual Abuse Incident Review • Interviews with members of the Sexual Abuse Incident Review Team • Interview with the PREA Compliance Managers • Interview with the PREA Coordinator • Examination of the Incident Report <p>Corrective Action:</p> |

Chain O' Lakes submitted the required documentation with dates and signatures

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| 115.87 | Data collection |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
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| 115.88 | Data review for corrective action |
| | Auditor Overall Determination: Audited at Agency Level |
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| 115.89 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
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| 115.401 | Frequency and scope of audits |
| | <p data-bbox="252 170 895 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1481 528">During the tour of the facility the upcoming audit was posted throughout the facility. The facility provided electronic verification of the notice. When inmates were asked how long the poster has been posted during the inmate interviews; they consistently replied for a while or confirmed the notice was posted. No inmate gave any indication of the facility not meeting the required timeframe.</p> <p data-bbox="252 573 1461 864">All the agency's facilities were audited during the same timeframe to meet the required deadline of one (1) audit within three (3) years. A review was conducted on information provided to inmates regarding the confidential nature of any correspondence and communication with the auditor. The facility provided inmates with information about the PREA audit at least six weeks prior to the site visit and demonstrated based on their institutional and clinical files that PREA has been a continued practice. South Bend/Chain-O-Lakes met the requirements of Standard 115.401.</p> <p data-bbox="252 909 991 943">Evidence relied upon to make auditor determination:</p> <ul data-bbox="252 976 1214 1223" style="list-style-type: none"> • Interview with staff • Interview with inmates • Interview with the PREA Compliance Managers • Interview with the Executive Director of PREA, PREA Coordinator |

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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
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| Appendix: Provision Findings | | |
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| 115.11 (a) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? | yes |
| | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? | yes |
| 115.11 (c) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) | yes |
| | Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) | yes |
| 115.12 (a) | Contracting with other entities for the confinement of inmates | |
| | If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | |
| 115.12 (b) | Contracting with other entities for the confinement of inmates | |
| | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | |
| 115.13 (a) | Supervision and monitoring | |
| | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? | yes |
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| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? | yes |
| 115.13 (b) | Supervision and monitoring | |
| | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) | yes |

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| 115.13 (c) | Supervision and monitoring | |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? | yes |
| 115.13 (d) | Supervision and monitoring | |
| | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? | yes |
| | Is this policy and practice implemented for night shifts as well as day shifts? | yes |
| | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? | yes |
| 115.14 (a) | Youthful inmates | |
| | Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| 115.14 (b) | Youthful inmates | |
| | In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| | In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |

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| 115.14 (c) | Youthful inmates | |
| | Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| | Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| | Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| 115.15 (a) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners? | yes |
| 115.15 (b) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.) | na |
| | Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) | na |
| 115.15 (c) | Limits to cross-gender viewing and searches | |
| | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? | yes |
| | Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)? | na |

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| 115.15 (d) | Limits to cross-gender viewing and searches | |
| | Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
| | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
| | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? | yes |
| 115.15 (e) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? | yes |
| | If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? | yes |
| 115.15 (f) | Limits to cross-gender viewing and searches | |
| | Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? | yes |
| | Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? | yes |
| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient | |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual | yes |

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

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| 115.16 (b) | Inmates with disabilities and inmates who are limited English proficient | |
| | Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? | yes |
| | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? | yes |
| 115.16 (c) | Inmates with disabilities and inmates who are limited English proficient | |
| | Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | yes |

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| 115.17 (a) | Hiring and promotion decisions | |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? | yes |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? | yes |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? | yes |
| 115.17 (b) | Hiring and promotion decisions | |
| | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? | yes |
| | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? | yes |

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| 115.17 (c) | Hiring and promotion decisions | |
| | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check? | yes |
| | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? | yes |
| 115.17 (d) | Hiring and promotion decisions | |
| | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? | yes |
| 115.17 (e) | Hiring and promotion decisions | |
| | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? | yes |
| 115.17 (f) | Hiring and promotion decisions | |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? | yes |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? | yes |
| | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? | yes |
| 115.17 (g) | Hiring and promotion decisions | |
| | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? | yes |

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

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

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

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| 115.22 (c) | Policies to ensure referrals of allegations for investigations | |
| | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) | yes |
| 115.31 (a) | Employee training | |
| | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? | yes |
| | Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? | yes |
| | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? | yes |
| | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? | yes |
| | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? | yes |
| | Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? | yes |
| | Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? | yes |

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

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

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

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

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| 115.35 (d) | Specialized training: Medical and mental health care | |
| | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.) | yes |
| | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) | yes |
| 115.41 (a) | Screening for risk of victimization and abusiveness | |
| | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| 115.41 (b) | Screening for risk of victimization and abusiveness | |
| | Do intake screenings ordinarily take place within 72 hours of arrival at the facility? | yes |
| 115.41 (c) | Screening for risk of victimization and abusiveness | |
| | Are all PREA screening assessments conducted using an objective screening instrument? | yes |

| 115.41 (d) | Screening for risk of victimization and abusiveness | |
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| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? | yes |

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| 115.41 (e) | Screening for risk of victimization and abusiveness | |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse? | yes |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses? | yes |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse? | yes |
| 115.41 (f) | Screening for risk of victimization and abusiveness | |
| | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |
| 115.41 (g) | Screening for risk of victimization and abusiveness | |
| | Does the facility reassess an inmate's risk level when warranted due to a referral? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to a request? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? | yes |
| 115.41 (h) | Screening for risk of victimization and abusiveness | |
| | Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? | yes |
| 115.41 (i) | Screening for risk of victimization and abusiveness | |
| | Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? | yes |

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| 115.42 (a) | Use of screening information | |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? | yes |
| | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? | yes |
| 115.42 (b) | Use of screening information | |
| | Does the agency make individualized determinations about how to ensure the safety of each inmate? | yes |
| 115.42 (c) | Use of screening information | |
| | When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? | yes |
| | When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? | yes |

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| 115.42 (d) | Use of screening information | |
| | Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? | yes |
| 115.42 (e) | Use of screening information | |
| | Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? | yes |
| 115.42 (f) | Use of screening information | |
| | Are transgender and intersex inmates given the opportunity to shower separately from other inmates? | yes |
| 115.42 (g) | Use of screening information | |
| | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
| | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
| | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |

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| 115.43 (a) | Protective Custody | |
| | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? | yes |
| | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? | yes |
| 115.43 (b) | Protective Custody | |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? | yes |
| | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |

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| 115.43 (c) | Protective Custody | |
| | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? | yes |
| | Does such an assignment not ordinarily exceed a period of 30 days? | yes |
| 115.43 (d) | Protective Custody | |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? | yes |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? | yes |
| 115.43 (e) | Protective Custody | |
| | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? | yes |
| 115.51 (a) | Inmate reporting | |
| | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? | yes |

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| 115.51 (b) | Inmate reporting | |
| | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? | yes |
| | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? | yes |
| | Does that private entity or office allow the inmate to remain anonymous upon request? | yes |
| | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.) | na |
| 115.51 (c) | Inmate reporting | |
| | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? | yes |
| | Does staff promptly document any verbal reports of sexual abuse and sexual harassment? | yes |
| 115.51 (d) | Inmate reporting | |
| | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? | yes |
| 115.52 (a) | Exhaustion of administrative remedies | |
| | Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | no |

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| 115.52 (b) | Exhaustion of administrative remedies | |
| | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) | yes |
| | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (c) | Exhaustion of administrative remedies | |
| | Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) | yes |
| | Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (d) | Exhaustion of administrative remedies | |
| | Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) | yes |
| | If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) | yes |
| | At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) | yes |

| 115.52 (e) | Exhaustion of administrative remedies | |
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| | Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| | Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) | yes |
| | If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) | yes |

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| 115.52 (f) | Exhaustion of administrative remedies | |
| | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| | After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.) | yes |
| | After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) | yes |
| | After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) | yes |
| | Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| | Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) | yes |
| | Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (g) | Exhaustion of administrative remedies | |
| | If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) | yes |

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| 115.53 (a) | Inmate access to outside confidential support services | |
| | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? | yes |
| | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) | yes |
| | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? | yes |
| 115.53 (b) | Inmate access to outside confidential support services | |
| | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? | yes |
| 115.53 (c) | Inmate access to outside confidential support services | |
| | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? | yes |
| | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? | yes |
| 115.54 (a) | Third-party reporting | |
| | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? | yes |
| | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? | yes |

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| 115.61 (a) | Staff and agency reporting duties | |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? | yes |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? | yes |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? | yes |
| 115.61 (b) | Staff and agency reporting duties | |
| | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? | yes |
| 115.61 (c) | Staff and agency reporting duties | |
| | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? | yes |
| | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? | yes |
| 115.61 (d) | Staff and agency reporting duties | |
| | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? | yes |
| 115.61 (e) | Staff and agency reporting duties | |
| | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? | yes |

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| 115.62 (a) | Agency protection duties | |
| | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? | yes |
| 115.63 (a) | Reporting to other confinement facilities | |
| | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? | yes |
| 115.63 (b) | Reporting to other confinement facilities | |
| | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? | yes |
| 115.63 (c) | Reporting to other confinement facilities | |
| | Does the agency document that it has provided such notification? | yes |
| 115.63 (d) | Reporting to other confinement facilities | |
| | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? | yes |

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| 115.64 (a) | Staff first responder duties | |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? | yes |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? | yes |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| 115.64 (b) | Staff first responder duties | |
| | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? | yes |
| 115.65 (a) | Coordinated response | |
| | Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? | yes |
| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers | |
| | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | no |

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| 115.67 (a) | Agency protection against retaliation | |
| | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? | yes |
| | Has the agency designated which staff members or departments are charged with monitoring retaliation? | yes |
| 115.67 (b) | Agency protection against retaliation | |
| | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? | yes |

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| 115.67 (c) | Agency protection against retaliation | |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? | yes |
| | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? | yes |
| 115.67 (d) | Agency protection against retaliation | |
| | In the case of inmates, does such monitoring also include periodic status checks? | yes |

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| 115.67 (e) | Agency protection against retaliation | |
| | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? | yes |
| 115.68 (a) | Post-allegation protective custody | |
| | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? | yes |
| 115.71 (a) | Criminal and administrative agency investigations | |
| | When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
| | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
| 115.71 (b) | Criminal and administrative agency investigations | |
| | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? | yes |
| 115.71 (c) | Criminal and administrative agency investigations | |
| | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? | yes |
| | Do investigators interview alleged victims, suspected perpetrators, and witnesses? | yes |
| | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? | yes |
| 115.71 (d) | Criminal and administrative agency investigations | |
| | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? | yes |

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| 115.71 (e) | Criminal and administrative agency investigations | |
| | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? | yes |
| | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? | yes |
| 115.71 (f) | Criminal and administrative agency investigations | |
| | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? | yes |
| | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? | yes |
| 115.71 (g) | Criminal and administrative agency investigations | |
| | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? | yes |
| 115.71 (h) | Criminal and administrative agency investigations | |
| | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? | yes |
| 115.71 (i) | Criminal and administrative agency investigations | |
| | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? | yes |
| 115.71 (j) | Criminal and administrative agency investigations | |
| | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? | yes |
| 115.71 (l) | Criminal and administrative agency investigations | |
| | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |

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| 115.72 (a) | Evidentiary standard for administrative investigations | |
| | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? | yes |
| 115.73 (a) | Reporting to inmates | |
| | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? | yes |
| 115.73 (b) | Reporting to inmates | |
| | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) | na |
| 115.73 (c) | Reporting to inmates | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes |

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| 115.73 (d) | Reporting to inmates | |
| | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? | yes |
| | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? | yes |
| 115.73 (e) | Reporting to inmates | |
| | Does the agency document all such notifications or attempted notifications? | yes |
| 115.76 (a) | Disciplinary sanctions for staff | |
| | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? | yes |
| 115.76 (b) | Disciplinary sanctions for staff | |
| | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? | yes |
| 115.76 (c) | Disciplinary sanctions for staff | |
| | Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? | yes |
| 115.76 (d) | Disciplinary sanctions for staff | |
| | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)? | yes |
| | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? | yes |

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

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| 115.78 (f) | Disciplinary sanctions for inmates | |
| | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? | yes |
| 115.78 (g) | Disciplinary sanctions for inmates | |
| | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) | yes |
| 115.81 (a) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison). | yes |
| 115.81 (b) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) | yes |
| 115.81 (c) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail). | na |
| 115.81 (d) | Medical and mental health screenings; history of sexual abuse | |
| | Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? | yes |

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| 115.81 (e) | Medical and mental health screenings; history of sexual abuse | |
| | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? | yes |
| 115.82 (a) | Access to emergency medical and mental health services | |
| | Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? | yes |
| 115.82 (b) | Access to emergency medical and mental health services | |
| | If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? | yes |
| | Do security staff first responders immediately notify the appropriate medical and mental health practitioners? | yes |
| 115.82 (c) | Access to emergency medical and mental health services | |
| | Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? | yes |
| 115.82 (d) | Access to emergency medical and mental health services | |
| | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? | yes |
| 115.83 (a) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? | yes |

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

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| 115.83 (h) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) | yes |
| 115.86 (a) | Sexual abuse incident reviews | |
| | Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? | yes |
| 115.86 (b) | Sexual abuse incident reviews | |
| | Does such review ordinarily occur within 30 days of the conclusion of the investigation? | no |
| 115.86 (c) | Sexual abuse incident reviews | |
| | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? | yes |

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| 115.86 (d) | Sexual abuse incident reviews | |
| | Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? | yes |
| | Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? | yes |
| | Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? | yes |
| | Does the review team: Assess the adequacy of staffing levels in that area during different shifts? | yes |
| | Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? | yes |
| | Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? | yes |
| 115.86 (e) | Sexual abuse incident reviews | |
| | Does the facility implement the recommendations for improvement, or document its reasons for not doing so? | yes |
| 115.401 (h) | Frequency and scope of audits | |
| | Did the auditor have access to, and the ability to observe, all areas of the audited facility? | yes |
| 115.401 (i) | Frequency and scope of audits | |
| | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? | yes |
| 115.401 (m) | Frequency and scope of audits | |
| | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? | yes |
| 115.401 (n) | Frequency and scope of audits | |
| | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? | yes |