

# PREA Facility Audit Report: Final

**Name of Facility:** Wabash Valley Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 08/13/2025

**Date Final Report Submitted:** 09/08/2025

## Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.



**Auditor Full Name as Signed:** Sonya Love

**Date of Signature:** 09/08/2025

## AUDITOR INFORMATION

**Auditor name:** Love, Sonya

**Email:** sonya.love57@outlook.com

**Start Date of On-Site Audit:** 04/28/2025

**End Date of On-Site Audit:** 04/30/2025

## FACILITY INFORMATION

**Facility name:** Wabash Valley Correctional Facility

**Facility physical address:** 6908 U.S. Highway 41 , Carlisle , Indiana - 47838

**Facility mailing address:**

## Primary Contact

<b>Name:</b>	Jessica Dickerson
<b>Email Address:</b>	JDickerson@IDOC.IN.gov
<b>Telephone Number:</b>	8123985050 4121

#### Warden/Jail Administrator/Sheriff/Director

<b>Name:</b>	Keith Vinardi
<b>Email Address:</b>	kvinardi@idoc.in.gov
<b>Telephone Number:</b>	8123985050 4101

#### Facility PREA Compliance Manager

<b>Name:</b>	Keith Vinardi
<b>Email Address:</b>	kvinardi@idoc.in.gov
<b>Telephone Number:</b>	(812) 398-5050 ext.
<b>Name:</b>	Jessica Dickerson
<b>Email Address:</b>	jdickerson@idoc.in.gov
<b>Telephone Number:</b>	(812) 398-5050

#### Facility Health Service Administrator On-site

<b>Name:</b>	Sara Bedwell
<b>Email Address:</b>	SBedwell2@IDOC.in.gov
<b>Telephone Number:</b>	(812) 398-5050 Ext 3

#### Facility Characteristics

<b>Designed facility capacity:</b>	2216
<b>Current population of facility:</b>	2043
<b>Average daily population for the past 12 months:</b>	2037

<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Men/boys
<b>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b>	
<b>Age range of population:</b>	18 and over
<b>Facility security levels/inmate custody levels:</b>	Level 1, Level 3, Level 4
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	584
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	151
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	122

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Indiana Department of Correction
<b>Governing authority or parent agency (if applicable):</b>	State of Indiana
<b>Physical Address:</b>	302 West Washington Street, Indianapolis, Indiana - 46204
<b>Mailing Address:</b>	

<b>Telephone number:</b>	3172325711
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<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	Lloyd Arnold
<b>Email Address:</b>	LArnold@idoc.IN.gov
<b>Telephone Number:</b>	317-233-5541

<b>Agency-Wide PREA Coordinator Information</b>			
<b>Name:</b>	Matthew Bishir	<b>Email Address:</b>	mbishir@idoc.in.gov

<b>Facility AUDIT FINDINGS</b>	
<b>Summary of Audit Findings</b>	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>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.</p>	
<b>Number of standards exceeded:</b>	
0	
<b>Number of standards met:</b>	
45	
<b>Number of standards not met:</b>	
0	

## POST-AUDIT REPORTING INFORMATION

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

## GENERAL AUDIT INFORMATION

### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-04-28
2. End date of the onsite portion of the audit:	2025-04-30

### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	ICADV

## AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2216
15. Average daily population for the past 12 months:	2037
16. Number of inmate/resident/detainee housing units:	12
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

**23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:**

2066

**25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:**

1335

**26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:**

1177

**27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:**

305

**28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:**

9

**29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:**

1

**30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:**

39

<b>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>	21
<b>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>	9
<b>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>	96
<b>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b>	According to the facility, the LEP inmate population is not tracked over time beyond the initial and reassessment periods.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>	584
<b>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	122

<b>38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	151
<b>39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b>	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	28
<b>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input checked="" type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input checked="" type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>

<b>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	<p>To identify a select sample of inmates to interview, the Auditor relied on the following:</p> <ul style="list-style-type: none"> <li>• Inmate roster by living unit</li> <li>• Facility identification of inmates in the vulnerable categories (e.g., cognitive, physical, LEP, LGBTI, hx. of victimization, history of reported sexual abuse, etc.)</li> <li>• Inmate requests during the facility tour</li> <li>• Inmate correspondence</li> <li>• Investigations</li> </ul>
<b>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<b>44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	<p>No text provided.</p>
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	<p>12</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

<b>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	3
<b>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	1

<b>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	3
<b>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b>	9
<b>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b>	1
<b>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b>	The facility tour and site review included a segregation process. Informal conversations took place with the inmate who wanted to speak to the Auditor. Most inmates were asleep. The Auditor also confirmed with the facility security staff in segregation that, during the visit, no inmates in segregation were accused of sexual abuse or placed there due to risk of victimization.
<b>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	No text provided.
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>58. Enter the total number of RANDOM STAFF who were interviewed:</b>	12
<b>59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<div> <input checked="" type="checkbox"/> Length of tenure in the facility  <input checked="" type="checkbox"/> Shift assignment  <input checked="" type="checkbox"/> Work assignment  <input checked="" type="checkbox"/> Rank (or equivalent)  <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)  <input type="checkbox"/> None         </div>
<b>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<div> <input checked="" type="radio"/> Yes  <input type="radio"/> No         </div>
<b>61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	No text provided.

### Specialized Staff, Volunteers, and Contractor Interviews

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

**62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):**

13

**63. Were you able to interview the Agency Head?**

☒ Yes

☐ No

**64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?**

☒ Yes

☐ No

**65. Were you able to interview the PREA Coordinator?**

☒ Yes

☐ No

**66. Were you able to interview the PREA Compliance Manager?**

☒ Yes

☐ No

☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

**67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)**

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

	<input type="checkbox"/> Other
<b>68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	2
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>70. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No text provided.

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

**71. Did you have access to all areas of the facility?**

☒ Yes

☐ No

**Was the site review an active, inquiring process that included the following:**

**72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?**

☒ Yes

☐ No

**73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?**

☒ Yes

☐ No

**74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?**

☒ Yes

☐ No

**75. Informal conversations with staff during the site review (encouraged, not required)?**

☒ Yes

☐ No

<b>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b>	No text provided.
<b>Documentation Sampling</b>	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
<b>77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b>	<input checked="checked" type="radio"/> Yes  <input type="radio"/> No
<b>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	No text provided.
<b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>	
<b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	5	5	0	0
<b>Staff-on-inmate sexual abuse</b>	4	4	0	0
<b>Total</b>	9	9	0	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	20	0	20	0
<b>Staff-on-inmate sexual harassment</b>	17	0	17	0
<b>Total</b>	37	0	37	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	4	0	0	0
Total	0	4	0	0	0

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

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

### Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	1	1	18	0
<b>Staff-on-inmate sexual harassment</b>	1	2	14	0
<b>Total</b>	2	3	32	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

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

9

<b>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	5
<b>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	5
<b>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

<b>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	37
<b>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	20
<b>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

**Staff-on-inmate sexual harassment investigation files**

**98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:**

17

**99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?**

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

**100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?**

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

**101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.**

No text provided.

**SUPPORT STAFF INFORMATION****DOJ-certified PREA Auditors Support Staff**

**102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

☐ Yes

☒ No

## Non-certified Support Staff

**103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

☒ Yes

☐ No

**a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:**

1

## AUDITING ARRANGEMENTS AND COMPENSATION

**108. Who paid you to conduct this audit?**

☒ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☐ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> <li>Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard (requires corrective actions)</li> </ul>	
Auditor Discussion Instructions	
<p>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.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.11 (a): The agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.</b></p> <p>115.11 (a)-1 The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract.</p> <p>By examination of Indiana Department of Correction (IDOC) Policy 02-01-115 (Sexual Abuse Prevention), effective 08/15/2024, pages 1-48, the said policy mandates that IDOC maintain a zero-tolerance policy on inmate sexual abuse/sexual harassment. All employees, inmates, contractors, volunteers, vendors, and visitors shall be subject to this zero-tolerance policy. Violations of the policy may result in administrative and criminal sanctions. Each facility shall establish procedures for inmate sexual abuse/sexual harassment prevention and intervention. The written policy outlines the</p>

agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy outlines the agency's implementation plan for PREA.

115.11 (b): The agency shall employ or designate an upper-level, agency-wide PREA Coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

The IDOC Policy 02-01-115 (Sexual Abuse Prevention), Policy 02-01-115 (Sexual Abuse Prevention), effective 08/15/2024, pages 1-48, outlines several key points regarding the prevention of sexual abuse. In Section III, Definitions, Subsection C, it specifies the role of the Executive Director of PREA on page 3. Additionally, Section IV, Prevention Planning, Subsection A discusses the agency's Zero Tolerance policy towards sexual abuse and sexual harassment, detailing the responsibilities of the PREA Coordinator on page 6. According to the IDOC organizational chart, the Commissioner of the Indiana Department of Correction will appoint a high-level individual or their designee to serve as the agency's PREA Coordinator.

During an interview, the PREA Coordinator/Director assured the auditor that he possesses sufficient time and authority to develop, implement, and oversee the agency's compliance with PREA standards. The IDOC agency PREA Coordinator reports to the Director of the Office of Investigations and Intelligence (OII). The Director of OII then reports to the Executive Director of Field Operations, who subsequently reports to the Deputy Commissioner of Operations. The Deputy Commissioner ultimately reports to the Commissioner of the IDOC, placing the PREA Coordinator five levels away from the agency's commissioner.

In an interview with the Agency Head, he expressed full support for the agency's initiatives to prevent, detect, and respond to all forms of sexual abuse and sexual harassment. The IDOC Commissioner is well-informed about the PREA Coordinator's efforts to develop, implement, and ensure compliance with PREA standards across the agency's facilities. According to the Agency Head for PREA-related issues, the PC would report up to his immediate supervisor, the Director of Investigations and Intelligence, who is a member of upper management. There are tiers between the PREA Coordinator and the Agency Head.

115.11 (c): Where an agency operates more than one facility, each facility shall designate a PREA Compliance Manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

IDOC Policy 02-01-115 (Sexual Abuse Prevention), effective August 15, 2024, pages 1-2, supports this standard. After conducting audits in multiple IDOC facilities, each facility has a designated PREA Compliance Manager, as required in this standard. Additionally, PREA audits posted on the agency website provide a list of PREA Compliance Managers for each facility. The Wabash organizational chart confirms that the PREA Compliance Manager reports to the facility Deputy Warden of Operations, who in turn reports directly to the facility Warden. Previous PREA audits also support Standard 115.11(c). All facilities audited in the most recent cycle provide contact information and are interviewed by a PREA Compliance Manager, as conducted by the Auditor.

	<p>Furthermore, during an interview, the PREA Coordinator confirmed that each IDOC facility had identified a PREA Compliance Manager. The role and responsibilities of the PREA Compliance Manager were detailed during the facility audit by the PREA Compliance Manager. The PREA Compliance Manager confirmed having sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Organizational Chart (facility)</li> <li>3. Organizational Chart (agency) (internet search)</li> <li>4. IDOC Policy 02-01-115 (Sexual Abuse Prevention), effective 08/15/2024, pages 1-48</li> <li>5. Interview with the PREA Coordinator/Director of PREA</li> <li>6. Interview with the PREA Compliance Manager</li> </ol> <p><b>Conclusion:</b></p> <p>Based on the evidence relied upon in making the compliance determination for this standard, the Auditor's analysis and reasoning, and the Auditor's conclusions, this standard is deemed compliant. This standard complies with PREA requirements for the relevant period.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>115.12 (a): A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.</b></p> <p>115.12 (a)-1 The agency has entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>IDOC confirmed during this audit that the agency has entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Policy 02-01-115 (Sexual Abuse Prevention), effective 08/15/2024, pages 1-48</p> <p>115.12 (a)-2 All of the above contracts require contractors to adopt and comply with PREA standards.</p>

IDOC confirmed during this reporting period that all of the above contracts require contractors to adopt and comply with PREA standards.

115.12 (a)-3 The number of contracts for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies on or after August 20, 2012, or since the last PREA audit, whichever is later: 4.

- GEO Group (2)
- VOA
- Lake County

115.12 (a)-4 The number of above contracts that DID NOT require contractors to adopt and comply with PREA standards

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

115.12 (b)-1 All of the above contracts require the agency to monitor the contractor's compliance with PREA standards.

During this audit, IDOC confirmed that the contract above (4) requires contractors to adopt and comply with PREA standards.

115.12 (b)-2 The number of contracts referenced in 115.12 (a)-3 that DO NOT require the agency to monitor the contractor's compliance with PREA standards was zero.

During this Audit, the Auditor interviewed the Agency's Contract Administrator. The Contract Administrator confirmed that the agency, in collaboration with the PREA Coordinator, monitors new and renewed contracts for confinement services to determine. Contact facilities are required to comply with PREA and complete and submit PREA compliance results to the PREA Coordinator.  
If the contractor does not comply with the required

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 (Sexual Abuse Prevention), effective 08/15/2024, pages 1-48
3. Examination of contracts (4)
4. Interview with the Agency Contract Administrator

**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

115.13	Supervision and monitoring
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 338 1481 1003"><b>115.13 (a): The agency shall ensure that each facility it operates shall 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: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors.</b></p> <p data-bbox="256 1037 1461 1193">115.13 (a)-1 The agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse.</p> <p data-bbox="256 1234 1366 1312">115.13 (a)-2 Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates: 2050.</p> <p data-bbox="256 1346 1426 1424">115.13 (a)-3 Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates on which the staffing plan was predicated: 2050.</p> <p data-bbox="256 1458 1481 2000">Upon examination, Wabash Valley Correctional Facility has a written staffing plan. The staffing plan was reviewed on January 29, 2024, and in January 2023. It considers adequate staffing levels and incorporates video monitoring to enhance the sexual safety of offenders. The staffing plan takes into account (1) generally accepted detention and correctional practices; (2) any judicial findings of inadequacy; (3) any findings of inadequacy from federal investigative agencies, (4) any findings of inadequacy from internal or external oversight bodies; (5) all components of the facility’s physical plant (including “blind spots” or areas where staff or inmates may be isolated); (6) the composition of the inmate population; (7) the number and placement of supervisory staff; (8) institutional programs occurring during a particular shift; (9) any applicable state or local laws, regulations, or standards; (10) the prevalence of both substantiated and unsubstantiated incidents of sexual abuse; and (11) any other relevant factors.</p> <p data-bbox="256 2033 1473 2067">During the audit, the Auditor interviewed the Warden. The Warden confirmed that the</p>

facility has a staffing plan and that staffing levels are reviewed at least annually to ensure adequate staffing levels are maintained. Furthermore, the Warden indicated that facility security management evaluates all factors outlined in this standard, such as the physical plant, staff assignments, and any identified blind spots, and utilizes electronic video monitoring to oversee the movement of offenders throughout the facility.

The Auditor interviewed the PREA Compliance Manager (PCM) during this audit. The PCM confirmed that Wabash Valley Correctional Facility has a staffing plan and the facility considers (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors.

#### **Site review and facility tour**

During the facility tour, the Auditor observed the facility's staffing plan. The staffing plan is problematic because it fails to specify staffing levels for each shift, including weekends. This requires corrective action.

The Auditor observed the number of staff and contractors present, including security and non-security personnel, as well as staffing patterns during the shift. This included locations such as housing units, segregation units, programming areas, recreation, education, the library, workspaces, staff sight lines, and other areas where sexual abuse was likely to occur, according to the facility staff during informal conversations with custody staff. No volunteers were present during the on-site portion of this audit.

Furthermore, observations also included

- The level of supervision
- Frequency of cell checks in housing
- Sight lines from internal security posts to showers and upper tiers in the housing units
- Direct and indirect supervision from the control rooms and floor supervision
- Camera placement from the control room.

Informal conversations with both custody and non-custody staff confirmed that the current hiring freeze is a concern and that supervision practices are adequate, considering the population decline and the shift in the facility's culture.

**115.13 (b): In circumstances where the staffing plan is not complied with, the facility documents and justifies all deviations from the plan.**

115.13 (b)-1 Each time the staffing plan is not complied with, the facility documents

and justifies all deviations from the staffing plan.

Wabash confirmed during this audit that, where applicable, each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan.

115.13 (b)-2 If documented, the six most common reasons for deviating from the staffing plan in the past 12 months: agency hiring freeze.

During an interview with the Warden, he confirmed that the staffing plan is reviewed for each shift by comparing it to the staff scheduled to work in each bracket. Those on personal or military leave, on vacation, in training, or out sick are accounted for during the shift briefing.

**115.13 (c): Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.**

115.13 (c)-1 At least once every year the facility/agency, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

Upon examination of the Wabash 2024 Sexual Abuse Prevention Annual Report, generated by the Warden at Wabash and submitted to the Executive Director of PREA, the PREA Coordinator dated January 21, 2025, this Auditor confirmed that the facility consulted with the PREA Coordinator.

**115.13 (d): Each agency operating a facility shall implement 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. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit 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.**

115.13 (d)-1 Wabash confirmed during this reporting period that the facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment.

115.13 (d)-2 Wabash confirmed during this audit that the facility documents unannounced rounds.

	<p>115.13 (d)-3 Wabash confirmed during this reporting period that over time, the unannounced rounds cover all shifts.</p> <p>115.13 (d)-4 Wabash confirmed during this reporting period that the facility prohibits staff from alerting other staff of the conduct of such rounds.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention (effective 8/15/2024) pages 1-48.</li> <li>3. LHU Unannounced Rounds</li> <li>4. Interview with the Warden</li> <li>5. Interview with the PREA Coordinator</li> </ol> <p><b>Corrective Action:</b></p> <ol style="list-style-type: none"> <li>1. 115.13 (a): The agency requires each facility it operates to develop, document, and make its best efforts to comply regularly with a staffing plan that provides for <b>adequate</b> levels of staffing and, where applicable, video monitoring, to protect inmates against abuse. <ol style="list-style-type: none"> <li>1. This standard requires the facility to have a documented staffing plan that provides for <b>adequate levels of staffing</b> and, where applicable, video monitoring, to protect inmates against sexual abuse.</li> </ol> </li> <li>2. Unannounced rounds cannot distinguish between the types of rounds completed and regular daily rounds.</li> </ol>
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115.14	Youthful inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>115.14 (a): A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters.</b></p> <p>115.14 (a)-1 The facility prohibits placing youthful inmates in a housing unit in which a youthful inmate will have sight, sound, or physical contact with any adult inmate</p>

through use of a shared dayroom or other common space, shower area, or sleeping quarters.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D., Youthful Incarcerated Individuals (effective 8/15/2024), page 10 states a youthful incarcerated individual shall not be placed in a housing unit in which the youthful incarcerated individual will have sight, sound, or physical contact with any incarcerated individual eighteen (18) years of age or older through use of a shared dayroom or other common space, shower area, or sleeping quarters.

IDOC Policy 01-04-102 Classification Assignments For Youth Incarcerated as Adults and Alternative Sentenced Youth (effective 10/01/2020) pages 1-14 states that the Indiana State Legislature has passed an Alternative Sentencing law that allows courts, that have waived a youthful offender, to require the youth to be housed in a Division of Youth Services (DYS) facility until the youthful offender reaches the age of eighteen (18). Once the youthful offender reaches the age of eighteen (18), the Department shall notify the sentencing court. The sentencing court will set a review hearing concerning the youthful offender before the youthful offender reaches the age of nineteen (19).

The Auditor reviewed the facility's housing assignment, which included the names and DOBs of all inmates assigned during the onsite portion of this audit. Zero inmates met the criteria as defined in PREA for a Youthful Inmate.

115.14 (a)-2 Wabash indicates "no" that the facility does not have housing units to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters.

115.14 (a)-3 Wabash indicates "no," the facility does not place youthful inmates in the SAME HOUSING UNIT as adults. This substandard is not applicable. This facility does not house Youthful Inmates>

115.14 (a)-4 Youthful inmates who are placed in the SAME HOUSING UNIT as adults have sight, sound, or physical contact with any adult inmate through use of shower area, sleeping quarters, shared dayroom, or other common space. See 115.114 (a)-3.

115.14 (a)-5 In the past 12 months, no housing units to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters. See 115.114 (a)-3.

115.14 (a)-6 In the past 12 months, the number of youthful inmates placed in the SAME HOUSING UNIT as adults at this facility: 0. See 115.114 (a)-3. Not applicable.

**115.14 (b): In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.**

	<p>115.14 (b)-1 The facility maintains sight, sound, and physical separation between youthful inmates and adult inmates in areas OUTSIDE HOUSING UNITS. See 115.114 (a)-3. Not applicable.</p> <p>115.14 (b)-2 The agency always provides direct staff supervision in areas OUTSIDE HOUSING UNITS where youthful inmates have sight, sound, or physical contact with adult inmates. See 115.114 (a)-3. Not applicable.</p> <p><b>115.14 (c): Agencies shall make its best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.</b></p> <p>115.14 (c)-1 The facility documents the exigent circumstances for each instance in which youthful inmates' access to large-muscle exercise, legally required education services, and other programs and work opportunities was denied. See 115.114 (a)-3. Not applicable.</p> <p>115.14 (c)-2 In the past 12 months, the number of youthful inmates who have been placed in isolation in order to separate them from adult inmates: 0. See 115.114 (a)-3. Not applicable.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. Facility tour and Site Review</li> <li>3. Examination of population roster by housing units</li> <li>4. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D., Youthful Incarcerated Individuals (effective 8/15/2024), page 10.</li> <li>5. IDOC Policy 01-04-102 Classification Assignments For Youth Incarcerated as Adults and Alternative Sentenced Youth (effective 10/01/2020), pages 1-14.</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions.</p>
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>115.15 (a): The facility shall not conduct cross-gender strip searches or</b>

**cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.**

115.15 (a)-1 Wabash confirmed during this audit that the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of inmates.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E., Limits to Cross Gender Viewing and Searches (effective 8/15/2024), page 10 states Staff shall not conduct cross-gender strip searches or cross-gender visual searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. No staff shall conduct cross-gender strip searches except in emergency circumstances. Body cavity searches shall only be performed by medical personnel under IDOC 02-03-101 Policy and Administrative Procedure, Searches (effective 6/01/2019).

IDOC 02-03-101 Policy and Administrative Procedure, Searches (effective 6/01/2019), pages 1-2.

115.15 (a)-2 In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates: 0. Not applicable.

#### **PREA Audit Site Review**

##### **During the site review, the Auditor:**

- Observed the location where strip searches are conducted
- Zero opposite gender staff were allowed to watch or conduct an opposite-gender strip search absent exigent circumstances
- Wabash reports zero logs of cross-gender strip searches and cross-gender visual body cavity searches in the past 12 months

**115.15 (b): As of August 20, 2015, or August 20, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.**

115.15 (b)-1 The facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances (facilities have until August 20, 2015, to comply; or August 20, 2017, if their rated capacity does not exceed 50 inmates).

This facility has a rated capacity that exceeds 50 inmates. This facility houses only adult male inmates.

115.15 (b)-2 The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities to comply with this provision.

Not applicable.

115.15 (b)-3 The number of pat-down searches of female inmates that were conducted by male staff was zero. Not applicable.

115.15 (b)-4 The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s): 0. Not applicable.

During the onsite portion of this audit, the Auditor interviewed a select sample of random staff (12). All staff interviewed confirmed that the facility does not permit cross-gender pat-down searches except under exigent circumstances such as a medical or life-threatening emergency.

Zero female inmates were interviewed at this facility. This facility is an adult male facility.

**115.15 (c): The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates.**

115.15 (c)-1 Wabash confirmed during this audit that the facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E., Limits to Cross Gender Viewing and Searches (effective 8/15/2024), page 10 states staff shall not conduct cross-gender strip searches or cross-gender visual searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. No staff shall conduct cross-gender strip searches except in emergency circumstances. Body cavity searches shall only be performed by medical personnel under IDOC 02-03-101 Policy and Administrative Procedure, Searches (effective 6/01/2019).

IDOC 02-03-101 Policy and Administrative Procedure, Searches (effective 6/01/2019), pages 1-2.

115.15 (c)-2 Facility policy requires that all cross-gender pat-down searches of female inmates be documented. The facility does not house female inmates. Not applicable.

**115.15 (d): The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.**

115.15 (d)-1 The facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia,

except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera).

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E4-5., Limits to Cross Gender Viewing and Searches (effective 8/15/2024), page 11 states all inmates shall be afforded the ability to to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. All staff of a different gender than the designation of the facility shall announce their presence by declaring, "Different gender staff on the unit," when entering the housing unit or bathroom area. The announcement shall be documented in housing unit logs.

Upon examination of the PREA Opposite Gender Weekly Form (2), confirmed evidence of documentation efforts by the facility.

115.15 (d)-2 Policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit.

During the onsite portion of this audit, a random sample of staff was interviewed. All staff (12) interviewed confirmed that opposite gender announcements are made when entering a housing unit that houses inmates of the opposite gender or upon entering the unit's bathrooms. This same sample of randomly selected staff also confirmed that inmates can dress, shower, and use the toilet without being observed by staff of a different gender, absent exigent circumstances.

During the onsite portion of this audit, the Auditor interviewed random and targeted inmates (40). Each random and targeted inmate sampled was asked if staff of the opposite gender announced their presence when entering the housing unit.

- Twenty inmates confirmed that staff of the opposite gender announced their presence when entering the housing unit.
- Sixteen inmates indicated that staff of the opposite gender did not announce their presence when entering the housing unit.
- One inmate indicated in writing that he did not know. He was deaf.
- Three inmates reported that sometimes staff of the opposite gender would announce their presence when entering the housing unit.

**115.15 (e): The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined 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.**

115.15 (e)-1 The facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

During the onsite portion of this audit, the Auditor interviewed a select sample of random staff (12). Each staff member selected was asked if the facility prohibits staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining their gender status. All staff confirmed PREA training and policy review, which prohibits staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining their gender status.

During the onsite portion of this audit, the Auditor interviewed zero intersex inmates but three inmates who self-identify as transgender. Each inmate was asked if they had been put in a housing area only for transgender or intersex inmates? All denied placement in a housing unit only for transgender or intersex inmates. The Auditor also asked each inmate if they had any reason to believe that they were strip-searched for the sole purpose of determining their genital status. Each transgender inmate (3) interviewed during this audit denied being searched to determine their gender status.

115.15 (e)-2 This facility denies such searches (described in 115.15 (e)-1) that occurred in the past 12 months.

**115.15 (f): The agency shall train security staff in how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates professionally and respectfully, and the least intrusive manner possible, consistent with security needs.**

115.15 (f)-1 The percent of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs (the percentage given does not necessarily indicate compliance or non-compliance with the standard):100.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E., Limits to Cross Gender Viewing and Searches (effective 8/15/2024), page 10.
3. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E., Limits to Cross Gender Viewing and Searches (effective 8/15/2024), page 11
4. IDOC 02-03-101 Policy and Administrative Procedure, Searches (effective 6/01/2019), pages 1-2.
5. Interviews with inmates (40) (random and targeted\_
6. Interviews with random staff (12)
7. Interview with transgender inmates (3)

**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="256 311 544 342"><b>Auditor Discussion</b></p> <p data-bbox="256 387 1481 1171"><b>115.16 (a): The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall 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, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.</b></p> <p data-bbox="256 1211 1449 1328">115.16 (a)-1 The agency has established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> <p data-bbox="256 1368 1481 1821">IDOC Policy 02-01-115 (Sexual Abuse Prevention) Section F. Incarcerated Individuals with Disabilities and Incarcerated Individuals Who are Limited English Proficient (effective 08/15/2024), pages 12-13 indicates that the agency shall take appropriate steps to ensure that residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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. IDOC Division of Workforce Engagement, slides 1-43, Preservice academy, Working with Incarcerated Individuals Having Special Needs (effective 7/01/2023). The lesson plan was designed to help staff effectively supervise incarcerated individuals with special needs.</p> <p data-bbox="256 1861 1449 2058">IDOC Communication Board is written material for effective communication with residents with disabilities. It is a pictorial communication board that helps staff communicate with residents with special needs and limited vocabulary. This Auditor confirmed that IDOC has a contract with an online interpretive service to provide translation services for residents with limited language challenges who have</p>

disabilities. Zero residents were identified as LEP during the onsite portion of this audit.

During this audit, the Auditor confirmed with the IDOC Commissioner that the agency shall take appropriate steps to ensure that residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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.

### **PREA Audit Site Review**

#### **During the site review, the Auditor:**

- Test the facility's process for securing interpretation services on demand.
- The Auditor tested the online service to assess whether the phones for accessing the language line work correctly.
- Determine that a resident was not required to self-identify (e.g., enter pin, provide name/ID number) to access interpretation services.
- Assessed the availability of interpretation services (e.g., ability to access immediate interpretation services).
- Assess the accessibility of interpretation services (i.e., whether they are available to all persons confined in the facility who need an interpreter, including persons confined in restricted housing).
- Observe the location of interpretation services provided in a location (e.g., an administrative office ) that provides some privacy.

**115.16 (b): The agency shall 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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.**

115.16 (b)-1 The agency has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

IDOC Division of Workforce Engagement, slides 1-43, Preservice academy, Working with Incarcerated Individuals Having Special Needs (effective 7/01/2023). The lesson plan was designed to aid staff in effectively supervising incarcerated individuals with special needs.

IDOC Communication Board is written material for effective communication with residents with disabilities. It is a pictorial communication board that helps staff communicate with residents who have special needs and limited vocabulary.

IDOC PREA informational brochure (Spanish).

This Auditor confirmed that IDOC has a contract with an online interpretive service (Propio LS LLC) (QPA 50146) to provide translation services for residents with limited language challenges for individuals with disabilities.

**115.16 (c): The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations.**

115.16 (c)-1 IDOC confirmed during this audit that the agency's policy prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section F., Incarcerated Individuals with Disabilities and Incarcerated Individuals Who are Limited English Proficient (effective 8/15/2024), pages 12-13 The Department shall not rely on incarcerated interpreters, incarcerated readers, or other types of incarcerated individual assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the incarcerated individual's safety, the performance of first-response duties under 115.64/364, or the investigation of the incarcerated individual's allegations. Incarcerated interpreters shall not be used to provide the PREA education to incarcerated individuals at intake to a facility.

115.16 (c)-2 IDOC confirmed during this audit that the agency or facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.

115.16 (c)-3 In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations: 0.

During this audit, the Auditor interviewed a select sample of random staff. All staff (12) interviewed stated that the agency/facility does not ever allow the use of inmate interpreters, inmate readers to assist LEP when making allegations of sexual abuse or sexual harassment, except in exigent circumstances such as a medical emergency.

During this audit, the Auditor interviewed zero inmates who are limited English proficient, one deaf inmate, one hard-of-hearing inmate, and several inmates (3) with a history of mental illness. All confirmed that the facility provides information about

	<p>sexual abuse and sexual harassment in a language and format they understood. During an interview with an inmate who was deaf, he confirmed that staff provided him with written information about sexual abuse and sexual harassment. Inmates with cognitive challenges confirmed that their intake process and PREA education included a video and staff reading written information about sexual abuse and sexual harassment. All confirmed to the Auditor that they understood their rights in this facility as they related to sexual abuse and how to report sexual abuse and sexual harassment.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"><li>1. Pre-audit questionnaire</li><li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section F., Incarcerated Individuals with Disabilities and Incarcerated Individuals Who are Limited English Proficient (effective 8/15/2024), pages 12-13.</li><li>3. IDOC Lesson Plan, WORKING WITH INCARCERATED INDIVIDUALS HAVING SPECIAL NEEDS (PP).</li><li>4. IDOC Communication Board Booklet (pictorial)</li><li>5. IDOC Inmate Handbook</li><li>6. Inmate PREA Brochure (Spanish/English)</li><li>7. Interview random staff (12)<ul style="list-style-type: none"><li>■ Interviewed disabled inmates (5)</li><li>■ Deaf (1)</li><li>■ Hard-of-hearing (1)</li><li>■ Cognitive challenges (3)</li></ul></li></ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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115.17	Hiring and promotion decisions
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>115.17 (a): The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who— (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the</b></p>

**victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.**

115.17 (a)-1 IDOC confirmed during this audit that the agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G., Hiring and Promotion Decisions (effective 8/15/2024), pages 13-15.

IDOC Policy 04-03-102 Human Resources (effective 11/01/2020), pages 1-17.

IDOC Mandatory Pre-Service PREA Questions (effective 2/17) page 1.

Files of staff persons hired (11) or promoted (1) in the past 12 months were reviewed to determine whether proper criminal record background checks have been conducted, and questions regarding past conduct were asked and answered.

Files of one (1) volunteer were reviewed to determine whether proper criminal record background checks had been conducted, and questions regarding past conduct were asked and answered.

**115.17 (b): IDOC confirmed during this audit that the agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.**

115.17 (b)-1 IDOC confirmed during this audit that the agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G., Hiring and Promotion Decisions (effective 8/15/2024), pages 13-15.

IDOC Policy 04-03-102 Human Resources (effective 11/01/2020), pages 1-17.

IDOC Mandatory Pre-Service PREA Questions (effective 2/17) page 1.

IDOC Example (1) Request for Information, PREA Investigation (KI) (Pendleton 8/7/23-7/22/24).

During this audit, the Auditor interviewed Administrative (Human Resources) Staff

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

**115.17 (c): Before hiring new employees who may have contact with inmates, the agency shall: (1) Perform a criminal background records check; and (2) 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.**

115.17 (c)-1 IDOC confirmed during this audit that the agency's policy requires that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G., Hiring and Promotion Decisions (effective 8/15/2024), pages 13-15.

IDOC Policy 04-03-102 Human Resources (effective 11/01/2020), pages 1-17.

IDOC Mandatory Pre-Service PREA Questions (effective 2/17) page 1.

Files of staff persons hired (11) or promoted (1) in the past 12 months were reviewed to determine whether proper criminal record background checks have been conducted, and questions regarding past conduct were asked and answered.

115.17 (c)-2 In the past 12 months, the number of persons hired who may have contact with inmates who have had criminal background record checks: 150.

During this audit, the Auditor interviewed Administrative (Human Resources) staff who confirmed that the agency completes IDAC criminal background and sex offender registry checks on all individuals considered for employment and all staff being promoted, as required by PREA standards.

**115.17 (d): The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.**

115.17 (d)-1 IDOC confirmed that the agency has a policy that requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G., Hiring and Promotion Decisions (effective 8/15/2024), pages 13-14.

IDOC Policy 04-03-102 Human Resources (effective 11/01/2020), pages 1-17.

115.17 (d)-2 In the past 12 months, the number of contracts for services where

criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates: 3. Records of background checks of contractors who might have contact with inmates were sampled by the Auditor.

**115.17 (e): The agency shall 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.**

115.17 (e)-1 Agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates, or that a system is in place for otherwise capturing such information for current employees.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G., Hiring and Promotion Decisions (effective 8/15/2024), pages 13-14.

IDOC Policy 04-03-102 Human Resources (effective 11/01/2020), pages 1-17.

Documentation of background records checks for current employees and contractors was sampled at five-year intervals, when applicable. See 115.17 (c)-1.

**115.17 (f): IDOC confirmed during this audit that the agency shall 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 and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.**

**115.17 (g): IDOC confirmed during this audit that material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.**

115.17 (g)-1 IDOC confirms that the agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G., Hiring and Promotion Decisions (effective 8/15/2024), page 14.

IDOC Policy 04-03-102 Human Resources (effective 11/01/2020), pages 1-17.

**115.17 (h): IDOC confirmed during this audit that, unless prohibited by law, the agency shall 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.**

	<p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G., Hiring and Promotion Decisions (effective 8/15/2024), pages 13-15.</li> <li>3. IDOC Policy 04-03-102 Human Resources (effective 11/01/2020), pages 1-17.</li> <li>4. IDOC Mandatory Pre-Service PREA Questions (effective 2/17) page 1.</li> <li>5. IDOC Example (1) Request for Information, PREA Investigation (KI) (Pendleton 8/7/23-7/22/24).</li> <li>6. Documentation of background records checks for current employees and contractors was sampled at five-year intervals, when applicable.</li> <li>7. Interviewed Administrative (Human Resources) staff (1)</li> <li>8. IDOC Mandatory Pre-Service PREA Questions (effective 2/17) page 1.</li> <li>9. Files of staff persons hired (11) or promoted (1) in the past 12 months were reviewed to determine whether proper criminal record background checks have been conducted, and questions regarding past conduct were asked and answered.</li> <li>10. IDOC Discipline Policy Statement</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions.</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>115.18 (a): When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.</b></p> <p>115.18 (a)-1 The agency/facility has acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>This Warden, during his interview with the Auditor, confirmed that the facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>During this reporting period, the Auditor interviewed the Agency Head. The Agency</p>

	<p>Head indicated that the agency is building several new facilities. In designing the new facilities, the PREA Coordinator was a key stakeholder throughout the planning process. Enhancement to technology was a critical consideration for the sexual safety of all concerned.</p> <p><b>115.18 (b): IDOC confirmed during this reporting period that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.</b></p> <p>115.18 (b)-1 IDOC Agency Head confirmed that the facility has 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.</p> <p>The Warden, during his interview, confirmed that the facility continues to install or update a video monitoring system, electronic surveillance system, or other monitoring technology to improve supervision and management of inmates.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. Interview with the Warden</li> <li>3. Interview with the Agency Head</li> <li>4. Facility tour and site review</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.21 (a): To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.</b></p> <p>115.21 (a)-1 IDOC confirmed during this audit that the agency/facility is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).</p>

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section V. Responsive Planning, Subsection A. Evidence Protocol and Forensic Medical Examinations (effective 08/15/2024), pages 15-17, confirms that the agency is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).

IDOC Policy 00-01-103 Investigations and Intelligence (effective 6/01/2022), pages 1-40, outlines the procedures and guidelines for conducting investigations and intelligence gathering activities by the IDOC's Investigations and Intelligence staff.

115.21 (a)-2 The agency/facility is responsible for conducting criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).

See 115.21 (a)-1.

115.21 (a)-3 If another agency has responsibility for conducting either administrative or criminal sexual abuse investigations, the name of the agency that has responsibility (if another agency has responsibility for conducting both administrative and criminal sexual abuse investigations, skip to 115.21(c)-1): Not applicable. See 115.21 (a)-1.

115.21 (a)-4 When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section V. Responsive Planning, Subsection A. Evidence Protocol and Forensic Medical Examinations (effective 08/15/2024), page 15, confirms that when conducting a sexual abuse investigation, IDOC agency investigators follow a uniform evidence protocol.

IDOC Staff Development and Training, Sexual Assault Response Team (SART), Lesson Plan, SART First Responders, Evidence Protocol, and Investigations (effective 3/03/2016) (PP) training focuses on:

- IDOC Policy 02-01-115 Sexual Abuse Prevention
- IDOC Policy 00-01-103 Investigations and Intelligence
- National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents 2nd ED 4/2013.
- Public Law 108-79 (2003) Prison Rape Elimination Act
- Evidence collection
- Victim/Suspect Evidentiary Concerns
- Recommendation for Health Care Providers
- Crime Scene Evidence Consideration
- Three Different Types of Sexual Assault Investigation
- Understanding the three types of investigative findings

During the onsite portion of this audit, the Auditor interviewed a select sample of random staff (12) to determine if each staff member knows and understands the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. All staff confirmed participation in PREA training, which included training

	<p>regarding the agency’s protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. Staff sampled indicated that if they were the first responder, their responsibility include:</p> <ul style="list-style-type: none"><li>• Safeguard the victim, separate from the alleged abuser</li><li>• Protecting the crime scene</li><li>• Asking the victim/abuser not to brush their teeth, change clothes, or shower</li><li>• Notify a supervisor, unless the supervisor is the subject of the allegation.</li><li>• Document the incident</li><li>• Alert the Sexual Assault Team (SART)</li></ul> <p>Furthermore, the same select sample of random staff all confirmed that IDOC Investigations and Intelligence (I &amp; I) was responsible for conducting sexual abuse investigations.</p> <p>The Auditor reviewed the uniform evidence protocol for evidence and determined that there is sufficient technical detail to aid responders in obtaining usable physical evidence.</p> <p><b>115.21 (b): The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be 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.</b></p> <p>115.21 (b)-1 The protocol is developmentally appropriate for youth. This substandard is not applicable. This facility is for adult males. Through examination, the Auditor reviewed the facility population rosters by living units and, by examining the inmates' dates of birth, determined that no youth were assigned to this facility.</p> <p>115.21 (b)-2 IDOC confirmed during this audit that the agency follows the uniform protocol adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section V. Responsive Planning, Subsection A. Evidence Protocol and Forensic Medical Examinations (effective 08/15/2024), page 15, confirms that when conducting a sexual abuse investigation, IDOC agency investigators follow a uniform evidence protocol.</p> <p>IDOC Staff Development and Training, Sexual Assault Response Team (SART), Lesson Plan, SART First Responders, Evidence Protocol, and Investigations (effective 3/03/2016) (PP) training focuses on:</p> <ul style="list-style-type: none"><li>• IDOC Policy 02-01-115 Sexual Abuse Prevention</li><li>• IDOC Policy 00-01-103 Investigations and Intelligence</li></ul>
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- National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents 2nd ED 4/2013
- Public Law 108-79 (2003) Prison Rape Elimination Act
- Evidence collection
- Victim/Suspect Evidentiary Concerns
- Recommendation for Health Care Providers
- Crime Scene Evidence Consideration
- Three Different Types of Sexual Assault Investigation
- Understanding the three types of investigative findings

**115.21 (c): IDOC confirmed during this audit that the agency offers all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.**

115.21 (c)-1 The facility confirms that it offers all inmates who experience sexual abuse access to forensic medical examinations.

115.21 (c)-2 The facility confirms that it offers all inmates who experience sexual abuse access to forensic medical examinations onsite where medically appropriate.

Indiana Medical Forensic Examination Providers 2024 for information and referrals. Furthermore, in the absence of a forensically trained provider, agencies are directed to transfer or refer the victim to the nearest trained provider.

115.21 (c)-3 The facility confirms that, where applicable, the facility offers all inmates who experience sexual abuse access to forensic medical examinations at an outside facility

115.21 (c)-4 Forensic medical examinations are offered without financial cost to the victim.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section V. Responsive Planning, Subsection A. Evidence Protocol and Forensic Medical Examinations (effective August 15, 2024), page 45, confirms that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.

115.21 (c)-5 IDOC confirmed during this audit that, where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).

Indiana Medical Forensic Examination Providers 2024 for information and referrals. Furthermore, in the absence of a forensically trained provider, agencies are directed to transfer or refer the victim to the nearest trained provider.

115.21 (c)-6 IDOC confirmed during this audit that when SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.

115.21 (c)-7 The facility documents efforts to provide SANEs or SAFEs.

Indiana Medical Forensic Examination Providers 2024 for information and referrals.

Furthermore, in the absence of a forensically trained provider, agencies are directed to transfer or refer the victim to the nearest trained provider.

115.21 (c)-8 The number of forensic medical exams conducted during the past 12 months: 0.

115.21 (c)-9 The number of exams performed by SANEs/SAFEs during the past 12 months: 0.

115.21 (c)-10 The number of exams performed by a qualified medical practitioner during the past 12 months: 0.

**115.21 (d): The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.**

115.21 (d)-1 The facility attempts to make a victim advocate from a rape crisis center available to the victim, either in person or by other means.

IDOC, in collaboration with the Indiana Medical Forensic Examination Providers, 2024, for information and referrals. Furthermore, in the absence of a forensically trained provider, agencies are directed to transfer or refer the victim to the nearest trained provider.

115.21 (d)-2 IDOC confirms that these efforts are documented.

115.21 (d)-3 If and when a rape crisis center is not available to provide victim advocate services, the facility offers a qualified staff member from a community-based organization or a qualified agency staff member.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section V. Responsive Planning, Subsection A. Evidence Protocol and Forensic Medical Examinations (effective August 15, 2024),

IDOC, in collaboration with the Indiana Medical Forensic Examination Providers, 2024, for information and referrals. Furthermore, in the absence of a forensically trained provider, agencies are directed to transfer or refer the victim to the nearest trained provider.

IDOC has established a SART team, which includes victim advocates. Before a staff member can become a SART victim advocate, they must complete the IDOC Staff Development and Training, Sexual Assault Response Team (SART), Lesson Plan, SART First Responders, Evidence Protocol, and Investigations (effective 3/03/2016) (PP) training, which focuses on:

- IDOC Policy 02-01-115 Sexual Abuse Prevention
- IDOC Policy 00-01-103 Investigations and Intelligence
- National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents 2nd ED 4/2013
- Public Law 108-79 (2003) Prison Rape Elimination Act
- Evidence collection
- Victim Evidentiary Concerns
- Victim Advocacy
- Recommendation for Health Care Providers
- Crime Scene Evidence Consideration
- Three Different Types of Sexual Assault Investigation
- Understanding the three types of investigative findings

IDOC Sexual Assault Manual (effective 4/01/2022)

- Clinical Evaluation
- Explain your role
- Intervention
- Victim support

**115.21 (e): IDOC confirmed during this audit that, as requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.**

115.21 (e)-1 IDOC confirmed during this audit that if requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section V. Responsive Planning, Subsection A. Evidence Protocol and Forensic Medical Examinations (effective 08/15/2024), page 15, confirms that when conducting a sexual abuse investigation, IDOC

agency investigators follow a uniform evidence protocol.

IDOC Staff Development and Training, Sexual Assault Response Team (SART), Lesson Plan, SART First Responders, Evidence Protocol, and Investigations (effective 3/03/2016) (PP).

See 115.21 (d)-3

During the audit, the Auditor interviewed the PREA Compliance Manager (PCM). The PCM indicated that IDOC maintains trained SART members of every bracket to accompany a victim to the hospital for a forensic examination by a SANE or SAFE provider. The SART team member's role is to provide emotional support, crisis intervention, and information during the investigative process and forensic examination.

During this audit, the Auditor interviewed three inmates who reported sexual abuse during this reporting period. Two of the three inmates denied reporting sexual abuse allegations to authorities. The third inmate sampled indicated that he did not report sexual abuse but instead sexual harassment.

**115.21 (f): To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section. Not applicable. IDOC conducts criminal sexual abuse investigations.**

115.21 (f)-1 If the agency is not responsible for investigating administrative or criminal allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.21 (a) through (e) of the standards. Not applicable. IDOC conducts criminal sexual abuse investigations.

**115.21 (g): The requirements of paragraphs (a) through (f) of this section shall also apply to: (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.**

An Auditor is not required to audit this provision.

**115.21 (h): IDOC confirms that for the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.**

IDOC Staff Development and Training, Sexual Assault Response Team (SART), Lesson Plan, SART First Responders, Evidence Protocol, and Investigations (effective 3/03/2016) (PP).

	<p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Staff Development and Training, Sexual Assault Response Team (SART), Lesson Plan, SART First Responders, Evidence Protocol, and Investigations (effective 3/03/2016) (PP).</li> <li>3. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section V. Responsive Planning, Subsection A. Evidence Protocol and Forensic Medical Examinations (effective 08/15/2024), pages 1-48.</li> <li>4. DOC Policy 00-01-103 Investigations and Intelligence (effective 6/01/2022), pages 1-40</li> <li>5. Indiana Medical Forensic Examination Providers, 2024, for information and referrals.</li> <li>6. IDOC Sexual Assault Manual (effective 4/01/2022)</li> <li>7. Interview with the PCM</li> <li>8. Interview with Inmates who Reported Sexual Abuse (3)</li> <li>9. SANE interview with a representative</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.22 (a): The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</b></p> <p>115.22 (a)-1 The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct).</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Policies to Ensure Referrals of Allegations for Investigations (effective 08/15/2024), page 17 indicates that the agency "Department" ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct).</p> <p>IDOC Policy 00-01-103 Investigations and Intelligence (effective 6/01/2022), pages 1-40, outlines the procedures and guidelines for conducting investigations and</p>

intelligence gathering activities by the IDOC's Investigations and Intelligence staff.

115.22 (a)-2 In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received: 46.

115.22 (a)-3 In the past 12 months, the number of allegations resulting in an administrative investigation: 37.

115.22 (a)-4 In the past 12 months, the number of allegations referred for criminal investigation: 9.

115.22 (a)-5 Referring to allegations received during the past 12 months, all administrative and/or criminal investigations were completed. Yes.

During this reporting period, the Auditor interviewed the IDOC Agency Head. He stated that the agency conducts its investigations under IDOC Policy 00-01-103 Investigations and Intelligence (I&I) into allegations of sexual abuse and sexual harassment. Additionally, he confirmed that the agency ensures an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment.

For documentation of reports of sexual abuse and harassment, see Standard 115.71  
For documentation of investigations, including complete investigative reports with findings, see Standard 115.71

**115.22 (b): The agency shall have in place a policy 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. The agency publishes such policy on its website or, if it does not have one, makes the policy available through other means. The agency documents all such referrals.**

115.22 (b)-1 IDOC confirmed during this audit that the agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its investigations, unless the allegation does not involve potentially criminal behavior.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section X. Investigations, Subsection A. Criminal and Administrative Indiana Department of Correction Investigations (effective 08/15/2024), pages 39-48.

IDOC Policy 00-01-103 Investigations and Intelligence (effective 6/01/2022), pages 1-40, outlines the procedures and guidelines for conducting investigations and intelligence gathering activities by the IDOC's Investigations and Intelligence staff.

115.22 (b)-2 IDOC confirmed during this audit that the agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website or made publicly available via other means.

115.22 (b)-3 IDOC confirmed during this audit that the agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation.

During this audit, the Auditor interviewed Investigative Staff. He confirmed that the agency policy requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The referral agency is IDOC, the agency itself, as it conducts its criminal investigations. The Investigative Staff indicated that he is a Correctional Police Officer. For documentation of referrals of allegations of sexual abuse and/or sexual harassment, see Standard 115.71.

The Auditor completed an internet search of the IDOC website to verify that the policy is on the website under PREA standards.

**115.22 (c): If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity. Not applicable. See Standard 115.22 (b) for more information.**

**115.22 (d): IDOC confirmed during this audit that the agency, a State entity, is responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails, shall have in place a policy governing the conduct of such investigations.**

**See Standard 115.22 (a).**

115.22 (d)-1 If the agency is not responsible for conducting administrative or criminal investigations of alleged sexual abuse, and another state entity has that responsibility, this other entity has a policy governing how such investigations are conducted. Not applicable.

**115.22 (e): Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.**

An Auditor is not required to audit this provision

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Policies to Ensure Referrals of Allegations for Investigations (effective 08/15/2024), page 17
3. IDOC Policy 00-01-103 Investigations and Intelligence (effective 6/01/2022), pages 1-40
4. For documentation of reports of sexual abuse and harassment, see Standard 115.71
5. For documentation of investigations, including complete investigative reports

	<p>with findings, see Standard 115.71</p> <ol style="list-style-type: none"> <li>6. Interview with the Agency Head</li> <li>7. Interview with Investigative Staff (1)</li> <li>8. Internet search of the IDOC website to verify that the policy is on the website under PREA standards</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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<b>115.31</b>	<b>Employee training</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.31 (a): The agency shall train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates’ rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</b></p> <p>115.31 (a)-1 The agency trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section VI. Training and Education Subsection., Employee Training (effective 08/15/2024), pages 17-18, confirms that it has a mandate to train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates’ rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in</p>

confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

IDOC Staff Development and Training Prison Rape Elimination Act (PP) (revised 6/12/2020), slides1-32.

115.31 (a)-2 IDOC confirmed during this audit that the agency trains all employees who may have contact with inmates on how to fulfill their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.

115.31 (a)-3 IDOC confirmed during this audit that the agency trains all employees who may have contact with inmates on the right of inmates to be free from sexual abuse and sexual harassment.

115.31 (a)-4 IDOC confirmed during this audit that the agency trains 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.

115.31 (a)-5 IDOC confirmed during this audit that the agency trains all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement.

115.31 (a)-6 IDOC confirmed during this audit that the agency trains all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims.

115.31 (a)-7 IDOC confirmed during this audit that the agency trains all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse.

115.31 (a)-8 IDOC confirmed during this audit that the agency trains all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates.

115.31 (a)-9 IDOC confirmed during this audit that the agency trains 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.

115.31 (a)-10 IDOC confirmed during this audit that the agency trains 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.

During this audit, the Auditor interviewed a random sample of 12 staff members. All

confirmed they completed PREA training or refresher courses under this standard. The Auditor reviewed IDOC staff training records for 12 staff members and training records for four contract employees, which support the interviews of the randomly selected staff.

**115.31 (b): Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only female inmates, or vice versa.**

115.31 (b)-1 Training is tailored to the gender of the inmates at the facility.

115.31 (b)-2 Employees who are reassigned from facilities housing the opposite gender are given additional training.

**115.31 (c): All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall 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. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.**

115.31 (c)-2 IDOC confirmed during this audit that between trainings, the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment.

- C2 PREA eLearning module
  - What is PREA
  - Zero tolerance
  - Purpose of PREA
  - Identify the dynamics of sexual abuse
  - Identify common reactions of victims of sexual abuse
  - Identify how to avoid inappropriate relationships and how to communicate effectively and professionally with LGBTI incarcerated individuals.
  - Identify relevant laws related to mandatory reporting and the age of consent.
  - Describe the difference in procedures for male vs. female, juvenile vs. adult, and LGBTI incarcerated individuals.

During this audit, the Auditor interviewed a random sample of 12 staff members. All confirmed they completed PREA training or refresher courses under this standard. The Auditor reviewed IDOC staff training records for 12 staff members and training records for four contract employees, which support the interviews of the randomly selected staff.

	<p>115.31 (c)-3 IDOC confirmed during this audit that annually is the frequency with which employees who may have contact with inmates receive refresher training on PREA requirements.</p> <p><b>115.31 (d): The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.</b></p> <p>115.31 (d)-1 IDOC confirmed during this audit that the agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification.</p> <p>During this audit, the Auditor interviewed a random sample of 12 staff members. All confirmed they completed PREA training or refresher courses under this standard. The Auditor reviewed IDOC staff training records for 12 staff members and training records for four contract employees, which support the interviews of the randomly selected staff.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section VI. Training and Education Subsection., Employee Training (effective 08/15/2024), pages 17-18</li> <li>3. IDOC Staff Development and Training Prison Rape Elimination Act (PP) (revised 6/12/2020), slides1-32.</li> <li>4. C2 PREA eLearning module</li> <li>5. Interview with a random sample of 12 staff members.</li> <li>6. Examination of training files-staff (12)</li> <li>7. Examination of training files-contractors (4)</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.32 (a): IDOC confirmed during this audit that the agency shall ensure 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.</b></p>

115.32 (a)-1 All volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Volunteer and Contractor Training (effective 08/15/2024), page 19. IDOC confirmed during this audit that the agency shall ensure 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.

115.32 (a)-2 The number of volunteers and contractors, who may have contact with inmates, who have been trained in the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response: 246.

Volunteer(s) or Contractor(s) who have Contact with Inmates (3). All confirmed to be trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response per agency policy and procedure.

Sample of training records for volunteers and contractors who may have contact with inmates, as per PREA Standard 115.31, confirmed that volunteers and contractors who have Contact with Inmates.

**115.32 (b): IDOC confirmed during this audit that 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. Still, all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed on how to report such incidents.**

115.32 (b)-1 IDOC confirmed during this audit that the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section VI. Training and Education Subsection., Employee Training (effective 08/15/2024), pages 17-18, confirms that it has a mandate to train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

IDOC Staff Development and Training Prison Rape Elimination Act (PP) (revised 6/12/2020), slides1-32.

#### C2 PREA eLearning module

- What is PREA
- Zero tolerance
- Purpose of PREA
- Identify the dynamics of sexual abuse
- Identify common reactions of victims of sexual abuse
- Identify how to avoid inappropriate relationships and how to communicate effectively and professionally with LGBTI incarcerated individuals.
- Identify relevant laws related to mandatory reporting and the age of consent.
- Describe the difference in procedures for male vs. female, juvenile vs. adult, and LGBTI incarcerated individuals.

115.32 (b)-2 All volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed on how to report such incidents.

During this audit, the Auditor interviewed three (3) contractors, all of whom confirmed completing PREA training at least annually, and that the training includes the agency's zero-tolerance policy regarding sexual abuse and sexual harassment, and informed them on how to report such incidents. For relevant documentation, refer to Standard 115.31.

#### **115.32 (c): The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.**

115.32 (c)-1 IDOC confirmed during this audit that the agency maintains documentation confirming that volunteers and contractors understand the training they have received.

#### **Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Volunteer and Contractor Training (effective 08/15/2024), page 19.
3. IDOC Staff Development and Training Prison Rape Elimination Act (PP) (revised 6/12/2020), slides1-32.
4. Interview with contract staff (3)
5. Interview with a volunteer (1)

#### **Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

115.33	Inmate education
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 338 1437 499"><b>115.33 (a): During the intake process, inmates shall receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.</b></p> <p data-bbox="256 539 1445 651">115.33 (a)-1 Inmates receive information at the time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment.</p> <p data-bbox="256 692 1437 938">IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Incarcerated Individual Education (effective 08/15/2024), page 19 indicates that during the intake process, inmates shall receive information explaining the Agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment and will be provided a copy of the PREA Brochure.</p> <p data-bbox="256 972 1458 1050">IDOC Sexual Abuse Prevention and Reporting, Offender/Student Brochure (revised 9/2019).</p> <ul data-bbox="331 1120 1139 2074" style="list-style-type: none"> <li>• Treatment and Counseling</li> <li>• Tips for Prevention</li> <li>• What should you report <ul style="list-style-type: none"> <li>◦ Abusive sexual contact</li> <li>◦ Nonconsensual sexual act</li> <li>◦ Sexual harassment</li> <li>◦ Staff/Volunteer/Contractor sexual misconduct</li> <li>◦ How to report sexual abuse/sexual harassment</li> <li>◦ Methods to report <ul style="list-style-type: none"> <li>■ verbally</li> <li>■ any staff</li> <li>■ file a grievance</li> <li>■ hotline</li> <li>■ offender phoneline</li> <li>■ IDOC hotline</li> <li>■ email idocprea@idoc.in.gov.</li> <li>■ Family/friend</li> <li>■ Ombudsman's Office</li> </ul> </li> <li>◦ When you are a victim <ul style="list-style-type: none"> <li>■ Do not use the toilet</li> <li>■ Do not brush your teeth</li> <li>■ Do not shower</li> <li>■ Do not eat or drink</li> </ul> </li> </ul> </li> </ul>

- Do not remove any clothing
- Do not destroy evidence

115.33 (a)-2 The number of inmates admitted during the past 12 months who were given this information at intake: 554.

During this audit, the Auditor interviewed Intake Staff (1). The staff person confirmed that during the intake process, all incoming inmates are provided with information about the agency's zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. To ensure all inmates receive the same information, it is provided to new and transferring inmates from other facilities, and they are all educated on the agency's zero-tolerance policy regarding sexual abuse or sexual harassment.

This Auditor conducted interviews with a select sample of inmates. All inmates were asked, Did you get information about the facility's rules against sexual abuse and harassment when you first came here? Inmates responded in the following manner:

- 32/40 confirmed during the intake process, receiving information explaining the Agency's zero-tolerance policy regarding sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse or sexual harassment, and will be provided a copy of the PREA Brochure.
- 5/40 denied during the intake process, receiving information explaining the Agency's zero-tolerance policy regarding sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse or sexual harassment, and will be provided a copy of the PREA Brochure.
- 2/40 inmates sampled arrived between 1993 and 2017.
- 1/40 inmates sampled remember the intake process, but indicate he was not paying much attention.

#### **PREA Audit Site Review**

The Intake Staff detailed a mock intake with a resident for the Auditor.

- The Auditor confirmed who is responsible for conducting the intake process.
- Confirmed that staff are prepared to read to residents.
- Staff have access to an on-demand language line to assist LEP residents
- The Auditor tested the critical function of all living units.
  - PREA posters (English/Spanish)
  - Telephones
  - Tablets are used to communicate with family, the Ombudsmen's Office, and staff in management
  - Observed medical and mental health rounds

- Observed PREA reporting information on all living units
- Observed that PREA reporting information was in good repair, clear, concise, accurate, and age-appropriate
- Observed information regarding the current Auditor contact information was posted on all living units and in common areas for staff
- Observed that information regarding emotional support was posted on all living units
- Observed that all residents are put on notice that calls could be recorded
- Observed the braille brochure for residents

### **INTERPRETATION SERVICES**

During the site review, the Auditor:

Test the facility's process for securing on-demand interpretation services.

Confirmed that services are provided via a language line.

Tested the language line to assess whether the phones for accessing the language line work properly.

- Confirmed telephones in the living unit worked properly and had dial tones.
- Confirmed that inmates were not required to self-identify (e.g., enter pin, provide name/ID number) to access interpretation services.
- Confirmed the availability of interpretation services (e.g., ability to access immediate interpretation services).
- Assess the accessibility of interpretation services (i.e., available to all persons confined in the facility who need an interpreter, including persons confined in restricted housing).
- Observed the location of interpretation services (e.g., services were provided in the case manager's office, an area that offers some privacy for the persons confined in the facility).

Noteworthy: The facility did not identify any LEP inmates during the onsite portion of this audit.

During this audit, the Auditor confirmed, through an examination of a select sample of random inmate 40 intake and educational files, that inmates receive information at intake and that their files contain inmate signatures.

**115.33 (b): IDOC confirmed during this audit that within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such**

**incidents, and regarding agency policies and procedures for responding to such incidents.**

115.33 (b)-1 The number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake:

During the audit, the Auditor interviewed Intake Staff from the facility. Intake Staff confirmed that all residents are provided information about the agency's zero-tolerance policy and how to report incidents or suspicions of sexual abuse and sexual harassment within 24 hours, but always within 72 hours. The facility delivers education to residents in the following manner:

- Verbally
- PREA video
- PREA brochure
- Individual face-to-face encounter

The Auditor interviewed a sample of random and targeted residents (40). All responded in the affirmative

**115.33 (c): Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall 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.**

115.33 (c)-1 Of those who were NOT educated (as stated in 115.33(b)-1) within 30 days of intake, all inmates have been educated subsequently. IDOC indicates that this substandard is not applicable.

115.33 (c)-2 If YES, by what date were they all educated by: IDOC indicates that this substandard is not applicable.

115.33 (c)-3 If NO, the number still not educated: IDOC indicates that this substandard is not applicable.

115.33 (c)-4 IDOC confirmed during this audit that the Agency policy requires that inmates who are transferred from one facility to another be educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Incarcerated Individual Education (effective 08/15/2024), pages 19-20.

During this audit, the Auditor interviewed Intake Staff (1). The staff person confirmed that during the intake process, all incoming inmates are provided with information about the agency's zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. To ensure all inmates receive the same information, it is provided to new and transferring inmates from other facilities, and they are all educated on the agency's zero-tolerance policy regarding sexual abuse or sexual harassment.

**115.33 (d): The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills.**

115.33 (d)-1 IDOC confirmed during this audit that Inmate PREA education is available in formats accessible to all inmates, including those who are limited English proficient.

115.33 (d)-2 IDOC confirmed during this audit that Inmate PREA education is available in formats accessible to all inmates, including those who are deaf.

115.33 (d)-3 IDOC confirmed during this audit that Inmate PREA education is available in formats accessible to all inmates, including those who are visually impaired.

115.33 (d)-4 IDOC confirmed during this audit that Inmate PREA education is available in formats accessible to all inmates, including those who are otherwise disabled.

115.33 (d)-5 IDOC confirmed during this audit that Inmate PREA education is available in formats accessible to all inmates, including those who are limited in their reading skills.

**115.33 (e): IDOC confirmed that the agency shall maintain documentation of inmate participation in these education sessions.**

115.33 (e)-1 IDOC confirmed during this audit that the agency maintains documentation of inmate participation in PREA education sessions.

Inmate education materials were examined by the Auditor (English/Spanish).

- See 115.33 (a)-1, IDOC Sexual Abuse Prevention and Reporting, Offender/ Student Brochure (revised 9/2019).

**115.33 (f): In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.**

115.33 (f)-1 IDOC confirmed during this audit that the agency ensures that key information about the agency's PREA policies is continuously and readily available or

	<p>visible through posters, inmate handbooks, or other written formats.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. Facility tour and site review <ol style="list-style-type: none"> <li>1. INTERPRETATION SERVICES-tested</li> <li>2. Phones-tested</li> <li>3. Observed key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.</li> </ol> </li> <li>3. IDOC Sexual Abuse Prevention and Reporting, Offender/Student Brochure (revised 9/2019).</li> <li>4. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Incarcerated Individual Education (effective 08/15/2024), pages 19-20.</li> <li>5. Interview with Intake Staff</li> <li>6. Interview with a select sample of inmates (40)</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.34 (a): In addition to the general training provided to all employees pursuant to § 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.</b></p> <p>115.34 (a)-1 Agency policy requires that investigators be trained in conducting sexual abuse investigations in confinement settings.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Specialized Training: Investigations (effective 08/15/2024), page 21 outlines, in addition to the general PREA training provided to all employees, that the Agency shall ensure all investigators have received training in conducting such investigations in confinement settings.</p> <p>During this audit, the Auditor interviewed Investigative Staff (1). he confirmed completion of general and specialized training specific to conducting sexual abuse investigations in confinement settings.</p>

- Training curriculum for investigators
  - National Institute of Corrections, Investigations Curriculum, Section 2 PREA Investigative Standards
- Training record of Investigators
  - Investigator JD- PREA: Investigating Sexual Abuse in a Confinement Setting

**115.34 (b): IDOC confirmed during this audit that specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.**

During this audit, the Auditor interviewed Investigative Staff. The investigator confirmed that the specialized training topics completed 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 or prosecutorial referral.

During this audit, the Auditor interviewed Investigative Staff (1). he confirmed completion of general and specialized training specific to conducting sexual abuse investigations in confinement settings.

Training curriculum for investigators, National Institute of Corrections, Investigations Curriculum, Section 2 PREA Investigative Standards

- Training record of Investigators
- Investigator
  - JD- PREA: Investigating Sexual Abuse in a Confinement Setting

**115.34 (c): IDOC confirmed during this audit that the agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.**

115.34 (c)-1 IDOC confirmed during this audit that the agency maintains documentation showing that investigators have completed the required training.

115.34 (c)-2 The number of investigators currently employed who have completed the required training: 6.

**115.34 (d): Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.**

An Auditor is not required to audit this provision.

	<p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Specialized Training: Investigations (effective 08/15/2024), page 21.</li> <li>3. National Institute of Corrections, Investigations Curriculum, Section 2 PREA Investigative Standards</li> <li>4. Training record of Investigators, Investigator JD- PREA: Investigating Sexual Abuse in a Confinement Setting</li> <li>5. Interview with Investigative Staff (1)</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.35 (a): The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</b></p> <p>115.35 (a)-1 The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E. Specialized Training: Medical and Mental Health Care (effective 08/15/2024), pages 21-22 outlines, that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>IDOC employs contract staff as medical and mental health practitioners in the facility. The vendor Centurion provided contract employees with mandatory PREA training. See the Centurian Adult Medical Training (revised 8/2021) module for more</p>

information. The objectives include:

- Understanding PREA
- Review of the PREA National Standards
- Review of expectations of the National Standards for medical and mental health practitioners
- Encourage familiarity with local policies related to PREA and the responsibilities associated with them
- Zero tolerances
- Abuse by another inmate
- Abuse by staff
- Sexual touching
- Indecent exposure
- Sexual harassment
- Voyeurism
- Dynamics of abuse in confinement
- Consent to sexual relationship with staff (never)
- PREA requirements for IDOC
- Staff and agency reporting requirements
- PREA training requirements
- Access to emergency medical and mental health services

During this audit, the Auditor interviewed a medical practitioner (1) and a mental health practitioner (1), each assigned to the facility as contract staff. Each practitioner interviewed separately confirmed training regarding the agency's PREA policy. The Auditor confirmed that all required elements are addressed in the training. Each practitioner confirmed completion of specialized training as required under this standard. Furthermore, the medical practitioner confirmed that the specialized training included topics such as:

- How to detect and assess signs of sexual abuse and sexual harassment;
- How to preserve physical evidence of sexual abuse;
- How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
- How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Training records and personnel records were utilized to confirm that regular practitioners have received training (5).

115.35 (a)-2 The number of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy: 82.

115.35 (a)-3 The percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy: 100.

**115.35 (b): IDOC denies that medical staff employed by the agency conduct**

**forensic examinations; such medical staff shall receive the appropriate training to conduct such examinations.**

115.35 (b)-1 Agency medical staff at this facility conducts forensic medical exams.

During an interview with a medical practitioner, the medical practitioner denied that medical practitioners employed by the agency conduct forensic examinations. Inmates are taken to a local hospital for forensic examinations.

**115.35 (c): IDOC confirmed during this audit that the agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.**

115.35 (c)-1 IDOC confirmed during this audit that the agency maintains documentation showing that medical and mental health practitioners have completed the required training.

Training records and personnel records were utilized to confirm that regular practitioners have received training (5).

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

During this audit, the Auditor interviewed one medical practitioner and one mental health practitioner, each assigned to the facility as contract staff. Each practitioner independently confirmed they received training on the agency's PREA policy, including, but not limited to, training required for employees under § 115.31 or for contractors and volunteers under § 115.32, depending on their status at the agency.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E. Specialized Training: Medical and Mental Health Care (effective 08/15/2024), pages 21-22.
3. Centurian Adult Medical Training (revised 8/2021) module
4. Training records and personnel records were utilized to confirm that regular practitioners have received training (5).
5. Interview with a medical health practitioner
6. Interview with a mental health practitioner

**Conclusion:**

The narrative above must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.

115.41	Screening for risk of victimization and abusiveness
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 338 1465 499"><b>115.41 (a): IDOC confirmed during this audit that all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.</b></p> <p data-bbox="256 539 1445 651">115.41 (a)-1 The agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates.</p> <p data-bbox="256 692 1433 938">IDOC Policy 02-01-115 Sexual Abuse Prevention, Section VII. Screening for Risk of Sexual Victimization and Abusiveness, Subsection A. Screening for Risk of Sexual Victimization and Abusiveness (effective 08/15/2024), pages 22-25, confirms all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.</p> <p data-bbox="256 978 1445 1135">During this audit, the Auditor interviewed the Staff Responsible for Risk Screening. The Staff Responsible for Risk Screening confirmed that all inmates are screened upon admission to your facility or transfer from another facility for the risk of sexual abuse victimization or sexual abusiveness toward other inmates.[]</p> <p data-bbox="256 1176 1469 1422">During this audit, the Auditor interviewed a select sample of random inmates (40). Each inmate was asked, when you first came here, do you remember whether you were asked any questions like whether you had been in jail or prison before, whether you have ever been sexually abused, whether you identify with being gay, lesbian, or bisexual, and whether you think you might be in danger of sexual abuse here. The inmates sampled responded in the following manner:</p> <ul data-bbox="331 1485 1453 1731" style="list-style-type: none"> <li>• 32/40 inmates recalled being asked questions regarding their incarceration history, history of sexual abuse, gender identity, and danger of sexual abuse</li> <li>• 5/40 inmates <u>denied</u> being asked questions regarding their incarceration history, history of sexual abuse, gender identity, and danger of sexual abuse</li> <li>• 1/40 inmates indicated that they did not pay much attention</li> <li>• 2/40 inmates randomly sampled began incarceration in 1993 and 2017.</li> </ul> <p data-bbox="256 1771 635 1839"><b>PREA Audit Site Review</b> <b>PREA RISK SCREENING</b></p> <p data-bbox="256 1879 1390 2080">During the site review, the auditor must ask to observe a confined person being screened for risk of being sexually abused or sexually abusive, if possible; if no confined persons are being screened during the onsite portion of the audit, the auditor may ask staff to walk through the process and do a mock intake for demonstration purposes.</p>

**During the PREA risk screening (mock demo), the Auditor:**

- Confirm who is responsible for risk screening (e.g., medical, mental health, risk screening staff).
- Confirmed that the screening process occurs in a setting that ensures as much privacy as possible
- Confirmed during the mock demo, staff ask screening questions in a manner that is respectful and mindful, thereby fostering comfort and eliciting responses.
- Confirmed how staff determine an inmate's risk of being sexually abused by other inmates confined in the facility or sexually abusive toward other persons confined in the facility, including whether: Screening staff use an instrument to collect information during the risk screening process.
- Confirmed that screening staff affirmatively ask persons confined in the facility about their sexual orientation and gender identity by directly inquiring if they identify as LGBTI (in addition to making a subjective determination about perceived status).
- Confirmed that screening staff use additional sources of information, outlined in the Standards, to complete the initial risk screening assessment.
- Confirmed completion of the risk screening instrument returns a subsequent "score" or determination of risk of being sexually abused or being sexually abusive.

**115.41 (b): IDOC confirmed that intake screening shall ordinarily take place within 72 hours of arrival at the facility.**

115.41 (b)-1 IDOC confirmed a policy that requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section VII. Screening for Risk of Sexual Victimization and Abusiveness, Subsection A. Screening for Risk of Sexual Victimization and Abusiveness (effective 08/15/2024), pages 22-25, confirms all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.

115.41 (b)-2 The number of inmates entering the facility (either through intake of transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: 521.

**115.41 (c): Such assessments shall be conducted using an objective screening instrument.**

115.41 (c)-1 IDOC confirmed during this audit that the risk assessment is conducted using an objective screening instrument.

Upon review, the Auditor verified that the IDOC risk assessment is performed using an objective screening tool called Delta (revised 12/06/2022). This tool utilizes all criteria (1-10), at a minimum, to evaluate risk. The Auditor examined 20 risk assessments completed by the facility during this reporting period. All assessments and reassessments were finished within the timeframe specified in this standard. Of the 20 assessments and reassessments sampled, four (4) inmates were convicted sex offenders, and two inmates had a history of prior childhood sexual victimization in the community.

During this audit, the Auditor interviewed the Staff Responsible for Risk Screening. The Staff Responsible for Risk Screening confirmed that the risk screening instrument utilized by IDOC was objective, and the instrument included factors identified in this standard. Furthermore, the same staff explained the process for conducting the initial screening. IDOC Delta System is objective and has a set format.

**115.41 (d): The intake screening shall 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; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.**

**115.41 (e): The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.**

See 115.41 (c)-1.

**115.41 (f): Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.**

115.41 (f)-1 The policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.

See 115.41 (c)-1.

During the onsite portion of this audit, the Auditor interviewed the Staff Responsible for Risk Screening, who indicated that inmate reassessments are completed within 30 days after an inmate's arrival.

During this audit, the Auditor interviewed a select sample of inmates (40). Records of initial assessment and reassessment for risk of sexual victimization or abusiveness. Each inmate was asked if they knew if staff had asked them these types of questions again while they have been here. The inmates sampled provided the following response:

32/40 confirmed being asked risk assessment questions on arrival and again within 30 days of placement in the facility.

5/20 denied being asked risk assessment questions on arrival and again within 30 days of placement in the facility.

2/40 arrived between 1993 and 2017.

1/40 indicated that he did not pay much attention during the process.

**115.41 (g): An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.**

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section VII. Screening for Risk of Sexual Victimization and Abusiveness, Subsection A. Screening for Risk of Sexual Victimization and Abusiveness (effective 08/15/2024), pages 24, indicates that an inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

115.41 (g)-1 The policy requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

See 115.41 (f)-1.

**115.41 (h): Inmates may not be 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.**

115.41 (h)-1 The policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section VII. Screening for Risk of Sexual Victimization and Abusiveness, Subsection A. Screening for Risk of Sexual Victimization and Abusiveness (effective 08/15/2024), pages 24, inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked under paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this

section.

**115.41 (i): The agency shall implement 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.**

IDOC Policy 01-04-104 The Establishment, Maintenance, and Disposition of Offender Records (effective 3/01/2017), pages 1-26.

Staff Responsible for Risk Screening confirmed that inmates are not disciplined in any way for refusing to respond to (or for not disclosing complete information related to) questions contained in the risk assessment such : (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's perception of vulnerability.

During this audit, the Auditor interviewed the PREA Compliance Manager. The PCM indicated during the interview that the agency has outlined who should have access to an inmate's risk assessment within the agency. Access to sensitive information is limited and password-protected to prevent unauthorized exploitation.

During this audit, the Auditor interviewed the PREA Coordinator, who stated that the agency has established clear guidelines on who can access an inmate's risk assessment. Access to sensitive information is restricted and secured with passwords to prevent unauthorized use.

#### **PREA Audit Site Review RECORDS STORAGE**

During the site review, the Auditor:

- Observe the physical and electronic storage area of any information/ documentation collected and maintained in hard copy under the PREA Standards (e.g., risk screening information, medical records, sexual abuse allegations) to determine if the area is secured (e.g., lock and key, password protection).
- Observe the electronic safeguards for any information/documentation collected and maintained electronically under the PREA Standards (e.g., risk screening information) to determine how access to the information is secured (e.g., password-protected, accessible only in certain areas, role-based security).

#### **Evidence relied upon:**

1. Pre-audit questionnaire

	<ol style="list-style-type: none"> <li>2. PREA facility tour and site review. <ol style="list-style-type: none"> <li>1. Storage of records</li> <li>2. Use of passwords</li> </ol> </li> <li>3. Delta Risk Assessment Manual</li> <li>4. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section VII. Screening for Risk of Sexual Victimization and Abusiveness, Subsection A. Screening for Risk of Sexual Victimization and Abusiveness (effective 08/15/2024), pages 22-25.</li> <li>5. IDOC Policy 01-04-104 The Establishment, Maintenance, and Disposition of Offender Records (effective 3/01/2017), pages 1-26.</li> <li>6. Interview with Staff Responsible for Risk Screening (1)</li> <li>7. Interview with a select sample of inmates (40)</li> <li>8. Examination of inmate risk assessments (20)</li> <li>9. Examination of the inmate risk reassessments (20)</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.42 (a): The agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</b></p> <p>115.42 (a)-1 The agency/facility uses information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Use of Screening Information (effective 08/15/2024), pages 25-27, indicates that IDOC/facility uses information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>Upon examination of the Delta Risk Screening Instrument, and 20 assessment and reassessment, this Auditor determined that IDOC use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program</p>

assignments to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

During this audit, the Auditor interviewed the PREA Compliance Manager. The PCM confirmed that the agency uses information from the risk screening during intake (per 115.41) to protect inmates from sexual victimization or abuse. Staff consider PII when making individualized decisions about inmates' safety, housing, bed placement, programs, and services.

The Staff Responsible for Risk Screening was interviewed during the audit. The Auditor asked how the agency or facility uses information from the risk screening during intake to keep residents safe from sexual abuse and harassment. The staff confirmed that information collected during intake is used to protect residents from being victimized or becoming abusive.

**115.42 (b): The agency shall make individualized determinations about how to ensure the safety of each inmate.**

115.42 (b)-1 The agency/facility makes individualized determinations about how to ensure the safety of each inmate.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Use of Screening Information (effective 08/15/2024), page 25. The agency/facility makes individualized determinations about how to ensure the safety of each inmate.

**115.42 (c): In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.**

115.42 (c)-1 IDOC confirmed during this audit that in deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Use of Screening Information (effective 08/15/2024), pages 1-48. The agency/facility makes individualized determinations about how to ensure the safety of each inmate.

IDOC Policy 02-01-118 Inclusive Gender Practices for Incarcerated Individuals (effective 3/01/2023), pages 1-6 guides decisions whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

115.42 (c)-2 In making housing and programming assignments, the facility shall consider on a case-by-case basis whether a placement of a transgender or intersex

inmate would present management or security problems.

IDOC Policy 02-01-118 Inclusive Gender Practices for Incarcerated Individuals (effective 3/01/2023), pages 1-6 guides decisions whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

PREA Compliance Manager confirmed during this audit that the facility uses information obtained during the intake process to make individualized determinations and decisions on housing and program assignments for all inmates, including transgender or intersex inmates.

During this audit, the facility identified 23 inmates who identify as transgender and zero intersex inmates. Of the 23 inmates who identify as transgender, three (3) inmates were interviewed. All confirm good communication between themselves and the administration. All deny having been placed in a housing unit only for transgender or intersex inmates. All denied ever being strip-searched for the sole purpose of determining their genital status.

**115.42 (d): IDOC confirmed during this audit that placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.**

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section C. Use of Screening Information (effective 8/15/25), pages 25-27. IDOC confirmed that in making housing and programming assignments, the facility shall consider on a case-by-case basis whether a placement of a transgender or intersex resident would present management or security problems.

During this audit, the Auditor interviewed the PCM. The PCM indicated that the facility re-evaluate placement and programming assignments for each transgender or intersex inmate at least biannually to reassess any threats to safety experienced by the inmate.

Staff responsible for risk screening confirmed during this audit that placement and programming assignments for each transgender or intersex inmate are reassessed at least twice each year to review any threats to the inmate's safety, with serious consideration given to their views regarding their safety.

**115.42 (e): A transgender or intersex inmate's views for his or her safety shall be given serious consideration.**

Staff responsible for risk screening confirmed during this audit that placement and programming assignments for each transgender or intersex inmate are reassessed at least twice each year to review any threats to the inmate's safety, with serious

consideration given to their views regarding their safety. Problematic, the facility omitted evidence of compliance with this standard. Corrective action is required.

**115.42 (f): Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.**

During this audit, the Auditor interviewed three (3) inmates who self-identify as transgender. All confirmed being given the opportunity to shower separately from other inmates.

**115.42 (g): The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment to protect such inmates.**

During this audit, the Auditor interviewed three (3) inmates who self-identify as transgender. All denied placement is in a dedicated facility, unit, or wing solely based on such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment to protect such inmates.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Use of Screening Information (effective 08/15/2024), pages 25-27.
3. Interview with Staff Responsible for Risk Screening
4. Interview with the PCM
5. Interview with a sample of transgender inmates (3)

**Corrective Action:**

1. 115.42 (e): A transgender or intersex inmate's views for his or her safety shall be given serious consideration. Staff responsible for risk screening confirmed during this audit that placement and programming assignments for each transgender or intersex inmate are reassessed at least twice each year to review any threats to the inmate's safety, with serious consideration given to their views regarding their safety. However, the facility failed to provide evidence of compliance with this standard. Corrective action is required.

**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination and corrective action, the Auditor's analysis and reasoning, and the Auditor's conclusions.

115.43	Protective Custody
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.43 (a): Inmates at high risk for sexual victimization shall not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</b></p> <p>115.43 (a)-1 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 a determination has been made that there is no available alternative means of separation from likely abusers.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E. Protective Custody (effective 08/15/2024), pages 27-28. IDOC confirmed during this audit that inmates at high risk for sexual victimization shall not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p>115.43 (a)-2 The number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0.</p> <p>During this audit, the Auditor interviewed the Warden. The Warden confirmed that the agency policy prohibits placing inmates at high risk for sexual victimization who have alleged sexual victimization—abuse in involuntary segregated housing instead of other housing areas unless an assessment has determined that there are no available alternative means of separation from a potential abuser. The Warden confirmed, as indicated in the PAQ, that zero inmates were placed in involuntary segregation for PREA-related reasons during this reporting period. Therefore, no records and documentation exist of housing assignments of inmates at high risk of sexual victimization.</p> <p><b>115.43 (b): Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.</b></p>

During this audit, the Auditor interviewed Staff who Supervise Inmates in Segregated Housing. The Staff who Supervise Inmates in Segregated Housing indicated that inmates placed in involuntary segregation who identify as a victim in an incident shall have access to programs, privileges, education, and, to the extent possible, work opportunities. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.

For information on inmates in Segregated Housing (for risk of sexual victimization/ who allege to have suffered sexual abuse), see 115.43 (a)-2.

**115.43 (c): The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.**

115.43 (c)-1 In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: 0.

During this audit, the Auditor interviewed the Warden. The Warden confirmed that inmates are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. Generally, inmates are placed in involuntary segregated housing for less than several days until a transfer to other accommodations can be made.

During this audit, the Auditor interviewed a Staff member who supervises inmates in Segregated Housing, who confirmed that inmates are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. Generally, inmates are placed in involuntary segregated housing for less than several days.

For information on inmates in Segregated Housing (for risk of sexual victimization/ who allege to have suffered sexual abuse), see 115.43 (a)-2.

**115.43 (d): If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall document: (1) The basis for the facility's concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged.**

115.43 (d)-1 From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged: 0.

The Warden identified zero case files of inmates at risk of sexual victimization held in involuntary segregated housing in the past 12 months.

	<p><b>115.43 (e): Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.</b></p> <p>115.43 (e)-1 If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p>The Warden identified zero case files of inmates at risk of sexual victimization held in involuntary segregated housing in the past 12 months. Not applicable.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E. Protective Custody (effective 08/15/2024), pages 27-28.</li> <li>3. Interview with the Warden</li> <li>4. Interview with Staff who Supervise Inmates in Segregation</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions.</p>
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<b>115.51</b>	<b>Inmate reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.51 (a): The agency shall provide multiple internal ways for inmates to privately report 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.</b></p> <p>115.51 (a)-1 IDOC confirmed during this audit that the agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section VIII. Reporting, Subsection A, Incarcerated Individual Reporting (effective 8/15/24), pages 29-30.</p> <p>IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section VI. Training and Education,</p>

Subsection A. Employee Training (effective 8/15/24) pages 17-18.

IDOC Sexual Abuse Prevention and Reporting, Staff Information Brochure

IDOC Zero Tolerance Poster (English/Spanish)

- How to report abuse
  - #80
  - Tell staff
  - File grievance
  - Family by email at idocprea@idoc.in.gov or 1(877) 385-5877

IDOC PREA CBT Transcript -lesson plan

During this audit, the Auditor interviewed a select sample of random staff (12). This staff was asked how inmates can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting such abuse, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual misconduct. Random staff responded in the following manner:

- Tell a trusted staff person, unless they are the source of the allegation
- File grievance
- Verbally report an incident
- Family
- Kite-note
- Anonymously
- #80

The Auditor interviewed a select sample of random and targeted inmates (40). All inmates interviewed provided the Auditor with multiple ways to make a PREA report such as:

1. #80
2. Tell family
3. Tell the courts or a lawyer
4. Tell a trusted staff person
5. File a grievance

### **PREA Audit Site Review**

#### **Signage**

#### **During the site review, the Auditor:**

1. Observed PREA-related signage in all living units and common areas in English and Spanish.
2. Confirmed that the information was age-appropriate, clear, concise, and understandable for most persons.

3. Reporting information was accurate and consistent throughout the facility.
4. Confirmed that the information posted included multiple ways for an inmate to report
5. Observed PREA audit notices were accurate
6. Observed placement of reporting information was accessible to most persons
7. Observed mailboxes are only accessible by a designated agency or facility official(s).
9. Observed locked grievance boxes were secure
10. Confirmed accessibility to writing instruments

## **RECORD STORAGE**

During the site review, the Auditor:

- Observe the physical and electronic methods used to maintain PII information/ documentation collected and maintained in hard copy under the PREA Standards (e.g., risk screening information, medical records, sexual abuse allegations) to determine if the area is secured (e.g., lock and key).
- Observe electronic safeguards of any information/documentation- password protection

**115.51 (b): The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.**

115.51 (b)-1 The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency.

The IDOC confirmed that the agency offers at least one way for residents to report abuse or harassment to a public or private entity not affiliated with the agency. IDOC uses the Ombudsman's Office.

115.51 (b)-2 The agency has a policy requiring inmates detained solely for civil immigration purposes to be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security. Not applicable.

During this audit, the Auditor interviewed the PCM. The PCM confirmed that the agency has at least one designated point of contact for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. The PCM explains that inmates can contact the Ombudsman's Office, and the procedures for making contact enable the receipt and immediate transmission of inmate reports of sexual abuse and sexual harassment to agency officials that allow the inmate to remain anonymous upon request.

An inmate can select the "GTL Request" option and then choose Ombudsman. This option is for submitting a report if the resident is threatened with or has experienced sexual abuse or harassment by another inmate, staff, volunteer, or contractor, and does not feel comfortable reporting it to staff at this facility. The report will be sent to the Indiana Ombudsman. The Indiana Ombudsman will then forward your report to the IDOC PREA Coordinator and the facility PREA Compliance Manager. During the facility tour, the Auditor submitted a GTL request to the Ombudsman's Office to test accessibility. Within hours, the Ombudsman's Office emailed the IDOC PREA Coordinator to confirm the test.

During the audit, the Auditor interviewed a select sample of random inmates. Do you know if you are allowed to make a report without providing your name? All inmates responded yes. Each inmate was asked, how would they report any sexual abuse or sexual harassment that happened to them or someone else?

- Personal tablet/Kiosk (14)
- Dorm Representative (1)
- Tipline/Hotline (3)
- Counselor (10)
- PCM (1)
- #66 (4)
- #80 (4)
- Grievance (2)
- Tell staff/guard (9)
- Seek information found near the phones (3)
- I wouldn't report (3)
- I don't know (2)

Is there someone who does not work at this facility whom you could report to about sexual abuse or sexual harassment?

- Family (2)
- PC (1)
- Ombudsman's Office (3)

**115.51 (c): Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.**

115.51 (c)-1 The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section VIII. Reporting, Subsection A, Incarcerated Individual Reporting (effective 8/15/24), pages 29-30.

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section VI. Training and Education,

Subsection A. Employee Training (effective 8/15/24) pages 17-18.

115.51 (c)-2 IDOC confirmed during this audit that IDOC staff are required to document verbal reports. "Yes", immediately report the incident to a supervisor.

During this audit, the Auditor interviewed a select sample of random staff (12). All confirmed that inmates can report sexual abuse and sexual harassment verbally, in writing, anonymously, and from a third-party.

During this audit, the Auditor interviewed a random sample of inmates (40). All confirmed that inmates can report sexual abuse or harassment, either in person or in writing, anonymously. Reports are also accepted from friends, family members, or fellow inmates.

**115.51 (d): The agency shall provide a method for staff to report sexual abuse and sexual harassment of inmates privately.**

115.51 (d)-1 IDOC confirmed that the agency has established procedures for staff to report sexual abuse and sexual harassment of inmates privately.

Refer to the IDOC Sexual Prevention and Reporting Staff Information Brochure.

115.51 (d)-2 Staff are informed of these procedures in the following ways:

- The Warden
- Investigation and Intelligence
- Tell another staff person
- Call the hotline
- Write to the Ombudsman's Office
- Email post to the IDOC website

During the facility tour, the Auditor submitted a GTL request to the Ombudsman's Office to test accessibility. Within hours, the Ombudsman's Office emailed the IDOC PREA Coordinator to confirm the test.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. Facility tour and site review
3. IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section VIII. Reporting, Subsection A, Incarcerated Individual Reporting (effective 8/15/24), pages 29-30.
4. IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section VI. Training and Education, Subsection A. Employee Training (effective 8/15/24) pages 17-18.
5. IDOC Sexual Abuse Prevention and Reporting, Staff Information Brochure
6. IDOC Zero Tolerance Poster (English/Spanish)
7. Auditor submitted a GTL request to the Ombudsman's Office to test accessibility.

	<p>8. Interviewed a random sample of inmates (40)</p> <p>9. Interviewed a random sample of staff (12)</p> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.52 (a): An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse.</b></p> <p>115.52 (a)-1 IDOC confirmed during this audit that the agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse. The agency is not exempt.</p> <p>IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section B. Exhaustion of Administrative Remedies (effective 8/15/24), pages 29-31.</p> <p>IDOC Policy 00-02-301 Offender Grievance Process (effective 9/01/2020), pages 1-15.</p> <p><b>115.52 (b): (1) The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.</b></p> <p>115.52 (b)-1 Agency policy or procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.</p> <p>IDOC confirmed that the agency policy or procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.</p>

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section B. Exhaustion of Administrative Remedies (effective 8/15/24), pages 29-31.

115.52 (b)-2 Agency policy requires an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.

IDOC denies that the agency's policy mandates a resident to use an informal grievance process or to try to resolve an alleged sexual abuse incident with staff.

**115.52 (c): The agency shall ensure that— (1) 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 (2) Such grievance is not referred to a staff member who is the subject of the complaint.**

115.52 (c)-1 The agency's policy and procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.

IDOC confirmed that the agency's policy and procedure allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section B. Exhaustion of Administrative Remedies (effective 8/15/24), pages 29-31.

IDOC Policy 00-02-301 Offender Grievance Process (effective 9/01/2020), pages 1-15.

115.52 (c)-2 The agency's policy and procedure requires that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.

IDOC confirmed that the agency's policy and procedure requires that an inmate's grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section B. Exhaustion of Administrative Remedies (effective 8/15/24), pages 29-31.

IDOC Policy 00-02-301 Offender Grievance Process (effective 9/01/2020), pages 1-15.

**115.52 (d): (1) The agency issues 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. (2) Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal. (3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) 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 may consider the absence of a response to be a denial at that level.**

115.52 (d)-1 IDOC confirmed during this audit that the agency's policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.

115.52 (d)-2 In the past 12 months, the number of grievances filed that alleged sexual abuse: 0.

115.52 (d)-3 In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed: 0.

115.52 (d)-4 In the past 12 months, the number of grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days: 0.

115.52 (d)-5 In cases where the agency requested an extension of the 90-day period to respond to a grievance and had reached final decisions by the time of the PREA audit, some grievances took longer than a 70-day extension period to resolve. No.

115.52 (d)-6 If YES, the number of grievances that took longer than a 70-day extension period to resolve: Not applicable.

115.52 (d)-7 The agency always notifies an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made. Not applicable.

From the investigative reports completed during this reporting period, the Auditor confirmed that IDOC notifies inmates in writing of any decisions made about their report. Residents were unaware that the facility was supposed to tell them of any decision within 90 days of making a report of sexual abuse, from a sample of investigative cases involving staff.

Sample of grievances from the 12 months preceding the audit that alleged sexual abuse and their final decision. Not applicable.

**115.52 (e): (1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. (2) 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 pursue any subsequent steps in the administrative remedy process personally. (3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.**

115.52 (e)-1 IDOC confirmed during this audit that the agency policy and procedure permits third parties, including fellow inmates, staff members, family members,

attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates.

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section B. Exhaustion of Administrative Remedies (effective 8/15/24), page 30.

115.52 (e)-2 Agency policy and procedure require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section B. Exhaustion of Administrative Remedies (effective 8/15/24), page 31.

115.52 (e)-3 The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline: 0.

### **PREA Audit Site Review SIGNAGE**

During the site review, the Auditor:

- Observe whether signage throughout the facility can be easily read/accessed by persons in the facility
- Observed that language on PREA-related signage posted throughout the facility was clear and easy to understand.
- Signage specific to services, such as emotional support services, and external reporting, clearly details what services are available and for what purposes.
- Signage was provided in English and Spanish.
- PREA-related signage text size, formatting, and physical placement accommodate most readers, including those of average height, low vision/visually impaired, or those physically disabled/in a wheelchair, etc.
- The information provided by the signage was not obscured, unreadable due to graffiti, or missing due to damage or other causes, and was otherwise legible.
- Observe that the Auditor's notice on signage throughout the facility was consistent, accurate, and readable by most persons.
- Observed that the Auditor's information included her name and contact information.
- Observe where signage is placed in the facility to assess whether it is accessible to staff/or those confined in the facility, and other persons who may need the information or services provided.
- Observed that Third-party notices were placed on all living units and in common areas visited by family members, friends, advocates, and attorneys (e.g., family visitation areas, attorney visiting areas, public-facing websites) as well as any areas frequented by persons confined in the facility.

## TESTING THIRD-PARTY REPORTING

This Auditor submitted a third-party report via email to the IDOC. The PREA Coordinator notified the Auditor of his receipt of her third-party email.

**115.52 (f): (1) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall 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, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.**

115.52 (f)-1 IDOC confirmed that the agency has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.

IDOC Policy 00-02-301 Offender Grievance Process (effective 9/01/2020), pages 5-6.

IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section B. Exhaustion of Administrative Remedies (effective 8/15/24), page 31. The Department shall establish procedures for the filing of an emergency grievance alleging that an incarcerated individual is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging an incarcerated individual is subject to a substantial risk of imminent sexual abuse, the Department shall 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, shall provide an initial response within forty-eight (48) hours, and shall issue a final Department decision within five (5) calendar days. The initial response and final Department decision shall document the Department's determination whether the incarcerated individual is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

115.52 (f)-2 The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. Refer to Standard 115.52 (f)-1.

115.52 (f)-3 The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months: 0.

115.52 (f)-4 The number of those grievances in 115.52(e)-3 that had an initial response within 48 hours: 0.

115.52 (f)-5 IDOC confirmed that the agency's policy and procedure for emergency

	<p>grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within 5 days.</p> <p>115.52 (f)-6 The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days: 0.</p> <p><b>115.52 (g): The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.</b></p> <p>115.52 (g)-1 IDOC confirmed that the agency has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith.</p> <p>115.52 (g)-2 In the past 12 months, the number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith: 0.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. Facility tour and site review</li> <li>3. Third-party Test</li> <li>4. DOC Policy 00-02-301 Offender Grievance Process (effective 9/01/2020), pages 5-6.</li> <li>5. IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section B. Exhaustion of Administrative Remedies (effective 8/15/24), page 31</li> <li>6. Examination of a sample of investigative reports.</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.53 (a): IDOC confirmed during this audit that each correctional facility shall 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, and, for persons detained solely for civil immigration</b></p>

**purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.**

115.53 (a)-1 Wabash confirms that the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Incarcerated Individuals Access to Outside Confidential Support Services (effective 08/15/2024), pages 31-32.

Upon review, this Auditor verified that IDOC has a contractual agreement with Indiana Coalition Against Domestic Violence, Inc. (E-Contract 48021-A3) from July 2024 through September 30, 2025.

Posters identified during the Auditor's facility tour and site visit identified services provided by Indiana Coalition Against Domestic Violence, Inc. (E-Contract 48021-A3):

- Confidential crisis intervention
- Emotional support
- Referrals to services that provide ongoing support

How to make contact:

- From the living unit #66
- Write
  - 1915 W. 18th Street
  - Indianapolis, IN 46202

115.53 (a)-2 **Wabash** confirmed during this audit that the facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations.

115.53 (a)-3 **Wabash** confirmed during this audit that the facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes.

115.53 (a)-4 **Wabash** confirmed during this audit that the facility provides inmates with access to such services by enabling reasonable communication between inmates and these organizations in as confidential a manner as possible.

During the on-site portion of this audit, the Auditor interviewed a randomly selected sample of inmates. Inmates were asked if they knew about services available outside of this facility for addressing sexual abuse, and if they needed them. All inmates responded yes, but none could specify what outside services were available. These same inmates were able to identify a location on their living unit where information about emotional services was posted, in case they needed it. By examination, this

Auditor confirmed that the posted notices for emotional services included a mailing address for these outside services.

Posters identified during the Auditor's facility tour and site visit identified services provided by Indiana Coalition Against Domestic Violence, Inc. (E-Contract 48021-A3):

- Confidential crisis intervention
- Emotional support
- Referrals to services that provide ongoing support
- How to make contact:
  - From the living unit #66
  - Write 1915 W. 18th Street, Indianapolis, IN 46202

### **PREA Audit Site Review**

#### **SIGNAGE**

During the site review, the Auditor observed:

- Posted or printed signage throughout the facility (e.g., posters).
- Signage includes current audit notices with the Auditor's contact information, which are consistent for the service provider/organization name(s), addresses, and phone number(s).
- How to report sexual abuse and sexual harassment
- How to access outside victim emotional support services
- Other relevant PREA information

Information about the signage. The Auditor observed:

- The information provided on all signage was observed to be readable, accessible, consistent, and placed throughout the facility to convey vital sexual safety information specific to the facility.

During the site review, the Auditor:

- Observe whether signage throughout the facility can be easily read/accessed by persons in the facility, specifically
- Observed that the signage language was clear and easy to understand.
- Observed services, such as emotional support services and external reporting, with language that clearly details what services are available and for what purposes.
- Signage is provided in English/Spanish
- Observed the signage text size, formatting, and physical placement accommodate most readers, including those of average height, low vision/visually impaired, or those physically disabled/in a wheelchair, etc.
- Observed that the information provided by the signage was not obscured, unreadable due to graffiti, or missing due to damage

- Observe whether the information on the signage is accurate and consistent throughout the facility.
- Observe where signage is placed in the facility to assess whether it is accessible to staff/inmates and the community.
- Observed the placement of the following types of signage:
  - Access to outside confidential (emotional) support services
- Observed PREA-related information posted in all areas common to inmates in the facility, including housing/living units, programming areas, work areas, education areas, etc.

### **TESTING THIRD-PARTY REPORTING**

Post-onsite, the Auditor:

- Complete and submit a test third-party report using the same method(s) provided to the public (e.g., via the agency/facility website).
- Confirm that the method(s) to submit third-party reports are easily accessible and understandable and can be found in reasonably conspicuous and appropriate locations (e.g., facility/agency website).
- Confirm that the third-party reporting method is not the general contact information for the facility, but is specific to reporting sexual abuse and sexual harassment in the facility.

**115.53 (b): The facility shall 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.**

115.53 (b)-1 **Wabash** confirmed during this audit that the facility informs inmates, before giving them access to outside support services, the extent to which such communications will be monitored.

115.53 (b)-2 **Wabash** confirmed during this audit that the facility informs inmates, before giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

During this audit, the Auditor interviewed a select sample of inmates (40). All inmates were aware that calls from the telephone located in the living units could be monitored. The Auditor tested phones on all living units during the facility tour. Each telephone tested began with an alert advising all inmates that calls could be monitored.

This Auditor interviewed three inmates who reported sexual abuse during this reporting period. Two (2) of three (3) inmates denied the incident. One of the three same inmates indicated that he alleged sexual harassment rather than sexual abuse and was informed about access to outside emotional services by SART. This inmate

also confirmed that he was aware of information posted on his unit regarding outside emotional services located near the telephones.

**115.53 (c): The agency shall 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. The agency shall maintain copies of agreements or documentation showing attempts to enter into such contracts.**

115.53 (c)-1 IDOC confirmed during this audit that the agency or facility maintains a memorandum of understanding (MOUs) or other agreements with community service providers that can provide inmates with emotional support services related to sexual abuse.

Upon review, this Auditor verified that IDOC has a contractual agreement with Indiana Coalition Against Domestic Violence, Inc. (E-Contract 48021-A3) from July 2024 through September 30, 2025.

115.53 (c)-2 IDOC confirmed during this audit that the agency or facility maintains copies of those agreements. Yes.

Upon review, this Auditor verified that IDOC has a contractual agreement with Indiana Coalition Against Domestic Violence, Inc. (E-Contract 48021-A3) from July 2024 through September 30, 2025.

115.53 (c)-3 IDOC confirmed during this audit that the agency or facility has attempted to enter into MOUs or other agreements with community service providers that are able to provide such services.

115.53 (c)-4 IDOC confirms that the agency maintains documentation of attempts to enter into such agreements.

Upon review, this Auditor verified that IDOC has a contractual agreement with Indiana Coalition Against Domestic Violence, Inc. (E-Contract 48021-A3) from July 2024 through September 30, 2025.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Incarcerated Individuals Access to Outside Confidential Support Services (effective 08/15/2024), pages 31-32
3. IDOC has a contractual agreement with Indiana Coalition Against Domestic Violence, Inc. (E-Contract 48021-A3) from July 2024 through September 30, 2025.
4. Interview with a select sample of random inmates (40)
5. Interview with inmates who reported sexual abuse (3)

	<p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.54 (a): The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.</b></p> <p>115.54 (a)-1 IDOC confirmed during this audit that the agency or facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment.</p> <p>IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section D. Third-party reporting (effective 8/15/24), page 32. Third-party reporting by families, friends, and other members of the public can be made by electronically submitting an email to IDOCPREA@idoc.in.gov or telephoning (toll-free) the agency's Sexual Assault Hotline (877) 385-5877.</p> <p>115.54 (a)-2 IDOC confirmed during this audit that the agency or facility publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates.</p> <p>During this audit, the Auditor searched the agency's webpage. She confirmed that the agency publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates.</p> <p><b>PREA Audit Site Review</b></p> <p><b>SIGNAGE</b></p> <p>During the site review, the Auditor observed:</p> <ul style="list-style-type: none"> <li>• Posted or printed signage throughout the facility (e.g., posters).</li> <li>• Signage includes current audit notices with the Auditor's contact information, which are consistent for the service provider/organization name(s), addresses, and phone number(s).</li> <li>• How to report sexual abuse and sexual harassment</li> <li>• How to access outside victim emotional support services</li> <li>• Other relevant PREA information</li> </ul>

**Information about the signage. The Auditor observed:**

- The information provided on all signage was observed to be readable, accessible, consistent, and placed throughout the facility to convey vital sexual safety information specific to the facility.

During the site review, the Auditor:

- Observe whether signage throughout the facility can be easily read/accessed by persons in the facility, specifically
- Observed that the signage language was clear and easy to understand.
- Observed services, such as emotional support services and external reporting, with language that clearly details what services are available and for what purposes.
- Signage is provided in English/Spanish
- Observed the signage text size, formatting, and physical placement accommodate most readers, including those of average height, low vision/visually impaired, or those physically disabled/in a wheelchair, etc.
- Observed that the information provided by the signage was not obscured, unreadable due to graffiti, or missing due to damage
- Observe whether the information on the signage is accurate and consistent throughout the facility.
- Observe where signage is placed in the facility to assess whether it is accessible to staff/inmates and the community.
- Observed the placement of the following types of signage: Access to outside confidential (emotional) support services
- Observed PREA-related information posted in all areas common to inmates in the facility, including housing/living units, programming areas, work areas, education areas, etc.

**TESTING THIRD-PARTY REPORTING**

Post-onsite, the Auditor:

- Complete and submit a test third-party report using the same method(s) provided to the public (e.g., via the agency/facility website).
- Confirm that the method(s) to submit third-party reports are easily accessible and understandable and can be found in reasonably conspicuous and appropriate locations (e.g., facility/agency website).
- IDOC Website
  - Contact Us
    - Report Sexual Harassment and Sexual Abuse
    - View the policy
    - Six categories- Family and Friends, General Public, Previously Incarcerated, Victims Resources, Work with Us, and Media
      - Family and Friends

	<ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>■ Prison Rape Elimination Act           <ul style="list-style-type: none"> <li>■ Two categories - View National Reports and Report Abuse               <ul style="list-style-type: none"> <li>■ Report Abuse                   <ul style="list-style-type: none"> <li>■ Indiana Parole Board</li> </ul> </li> <li>■ National Report                   <ul style="list-style-type: none"> <li>■ Indiana Parole Board</li> </ul> </li> </ul> </li> </ul> </li> </ul> </li> <li>• IDOC Website           <ul style="list-style-type: none"> <li>◦ Contact Us               <ul style="list-style-type: none"> <li>■ Report Sexual Harassment and Sexual Abuse                   <ul style="list-style-type: none"> <li>■ View the policy</li> <li>■ Six categories- Family and Friends, General Public, Previously Incarcerated, Victims Resources, Work with Us, and Media</li> </ul> </li> </ul> </li> </ul> </li> <li>• Report an incident           <ul style="list-style-type: none"> <li>◦ Call (877)385-5877</li> <li>◦ Email IDOCPREA@idoc.in.gov</li> </ul> </li> <li>• Confirm that the third-party reporting method is not the general contact information for the facility, but is specific to reporting sexual abuse and sexual harassment in the facility. Completed and submitted a test third-party report using the same method(s) provided to the public (e.g., via the agency/facility website). Confirm that the method(s) to submit third-party reports are easily accessible and understandable and can be found in reasonably conspicuous and appropriate locations (e.g., facility/agency website).</li> </ul> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 (Sexual Abuse Prevention), Section D. Third-party reporting (effective 8/15/24), page 32.</li> <li>3. Internet search</li> <li>4. Tested third-party method</li> </ol>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>115.61 (a): The agency shall 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; retaliation against inmates</b>

**or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.**

115.61 (a)-1 The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section IX. Official Response  
Following an Incarcerated Individual Report (effective 08/15/2024), pages 32-34. IDOC requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency.

115.61 (a)-2 IDOC confirms that the agency requires all staff to report immediately and according to agency policy any retaliation against inmates or staff who reported such an incident.

115.61 (a)-3 IDOC confirms that the agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

During this audit, the Auditor interviewed a select sample of random staff (12). All staff interviewed confirmed the agency requires all staff to report immediately and, according to agency policy, any retaliation against inmates or staff who report such an incident. Affirms that the agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff indicated reporting methods include;

- Face-to-face meeting
- Hotline
- Incident report
- Tipline
- Investigations (I&I)

**115.61 (b): Apart from reporting to designated supervisors or officials, staff shall not reveal 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.**

115.61 (b)-1 IDOC confirmed during this audit that, apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section IX. Official Response

Following an Incarcerated Individual Report (effective 08/15/2024), page 32.

During this audit, the Auditor interviewed a select sample of random staff (12). All staff interviewed confirmed that the agency provides for staff to report to designated supervisors or officials, as well as to state or local services agencies. Agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

**115.61 (c): Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.**

During this audit, the Auditor interviewed a medical practitioner. The medical practitioner confirmed that at the initiation of services to an inmate, the practitioner discloses the limitations of confidentiality and the practitioner's duty to report. The same practitioner confirmed an agency requirement to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official, immediately upon learning of it. Furthermore, the practitioner affirmed becoming aware of such an incident and immediately notifying a supervisor.

During this audit, the Auditor interviewed a mental health practitioner. The mental health practitioner confirmed that at the initiation of services to an inmate, the practitioner discloses the limitations of confidentiality and the practitioner's duty to report. The same practitioner confirmed an agency requirement to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official, immediately upon learning of it. Furthermore, the practitioner affirmed becoming aware of such an incident and immediately notifying a supervisor.

**115.61 (d): If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.**

This facility does not house inmates under the age of 18. Not applicable. IDOC has an agency requirement for all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official, immediately upon learning of it.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section IX. Official Response  
Following an Incarcerated Individual Report (effective 08/15/2024), pages 32-34.

During this audit, the Auditor interviewed the Warden. The Warden affirmed that all allegations of sexual abuse or sexual harassment, including those made by someone

	<p>under the age of 18 or someone considered a vulnerable adult under state or local law, are investigated by the agency.</p> <p>During this audit, the Auditor interviewed the PREA Coordinator. The PC confirmed that all allegations of sexual abuse or sexual harassment, including those made by someone under the age of 18 or someone considered a vulnerable adult under state or local law, are investigated by the agency.</p> <p><b>115.61 (e): The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.</b></p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section IX. Official Response Following an Incarcerated Individual Report (effective 08/15/2024), pages 32-34.</li> <li>3. Interview with a medical practitioner (1)</li> <li>4. Interview with a mental health practitioner (1)</li> <li>5. Interview with a select sample of random staff (12)</li> <li>6. Interview with the Warden</li> <li>7. Interview with the PREA Coordinator</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>115.62 (a): When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</b></p> <p>115.62 (a)-1 When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).</p>

	<p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Indiana Department of Correction Protection Duties (effective 08/15/2024), page 34.</p> <p>115.62 (a)-2 In the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse: 0.</p> <p>115.62 (a)-3 If the agency or facility made such determinations in the past 12 months, the average amount of time (in hours) that passed before taking action: 0.</p> <p>115.62 (a)-4 The longest time passed (in hours or days) before you took action. Refer to 115.62 (a) 2-3.</p> <p>During this audit, the Auditor interviewed the Agency Head. The Agency Head indicated that when the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate, I&amp;I is notified, the PREA Coordinator, and the facility Warden.</p> <p>During this audit, the Auditor interviewed the Warden. The Warden indicated that when he learns that an inmate is subject to a substantial risk of imminent sexual abuse, the inmate is safety guarded and separated from the alleged abuse, and an investigation is initiated immediately.</p> <p>During this audit, the Auditor interviewed a select sample of random staff (12). All staff interviewed confirmed an immediate duty to protect the victim and separate the victim from the alleged abuser, then notify a supervisor and document the incident.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Indiana Department of Correction Protection Duties (effective 08/15/2024), page 34.</li> <li>3. Interview with the Agency head</li> <li>4. Interview with the Warden</li> <li>5. Interview with a select group of random staff (12)</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

**115.63 (a): Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.**

115.63 (a)-1 The agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the agency or the appropriate office of the agency or facility where sexual abuse is alleged to have occurred.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Reporting to Other Confinement Facilities (effective 08/15/2024), page 34.

115.63 (a)-2 In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility: 4.

115.63 (a)-3 Please describe your facility's response to these allegations: Letters were written to each Warden, and an investigation was initiated.

**115.63 (b): Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.**

115.63 (b)-1 Agency policy requires that the facility head provide such notification as soon as possible, but no later than 72 hours after receiving the allegation.

According to the PCM, the notification was initially sent to the Warden. From the Warden's Office, notices were sent within 72 hours as required in this standard.

**115.63 (c): The agency shall document that it has provided such notification.**

115.63 (c)-1 The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.

**115.63 (d): The facility head or agency office that receives such notification shall make sure that the allegation is investigated in accordance with these standards.**

115.63 (d)-1 IDOC confirmed that the agency or facility policy requires that allegations received from other facilities and agencies be investigated in accordance with the PREA standards.

115.63 (d)-2 In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Reporting to Other Confinement Facilities (effective 08/15/2024), page 34.

	<ol style="list-style-type: none"> <li>3. Warden Notification Letters (7)</li> <li>4. Interview with the Agency head</li> <li>5. Interview with the Warden</li> <li>6. Interview with the PREA Coordinator</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.64 (a): Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</b></p> <p>Wabash Valley Correctional Facility, Facility Directive, Sexual Assault Response Team (effective 5/15/2023), pages 1-6. The directive coordinates the action taken in response to an incident of sexual assault among first responders, the health services department, mental health practitioners, investigators, and facility executive staff.</p> <p>115.64 (a)-1 IDOC confirmed during this audit that the agency has a first responder policy for allegations of sexual abuse.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Staff First Responders Duties (effective 08/15/2024), pages 34-35, states that when an allegation of sexual abuse by an inmate is reported, the first security staff member to respond must: (1) Separate the alleged victim and the alleged abuser; (2) Preserve and protect any crime scene until proper steps can be taken to collect evidence; (3) If the abuse</p>

occurred within a timeframe that still allows for physical evidence collection, request that the alleged victim avoid actions that could destroy evidence, such as washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a timeframe that still allows for physical evidence collection, ensure that the alleged abuser does not perform any actions that could destroy evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

115.64 (a)-2 IDOC confirms that the policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report separate the alleged victim and abuser.

Wabash Valley Correctional Facility, Facility Directive, Sexual Assault Response Team (effective 5/15/2023), page 3.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Staff First Responders Duties (effective 08/15/2024), pages 34-35.

115.64 (a)-3 IDOC confirms that the policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.

Wabash Valley Correctional Facility, Facility Directive, Sexual Assault Response Team (effective 5/15/2023), page 3.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Staff First Responders Duties (effective 08/15/2024), pages 34-35.

115.64 (a)-4 IDOC confirms that the policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.

Wabash Valley Correctional Facility, Facility Directive, Sexual Assault Response Team (effective 5/15/2023), page 3.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Staff First Responders Duties (effective 08/15/2024), pages 34-35.

115.64 (a)-5 IDOC confirms that the policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.

Wabash Valley Correctional Facility, Facility Directive, Sexual Assault Response Team (effective 5/15/2023), page 3.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Staff First Responders Duties (effective 08/15/2024), pages 34-35.

115.64 (a)-6 In the past 12 months, the number of allegations that an inmate was sexually abused: 9.

**115.64 (a)-7 Of these allegations of sexual abuse in the past 12 months, the number of times the first security staff member to respond to the report separated the alleged victim and abuser: 9.**

115.64 (a)-8 In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence: 1.

115.64 (a)-9 Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence: 1.

115.64 (a)-10 Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested 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: 1.

115.64 (a)-11 Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating: 1.

This Auditor interviewed a Security Staff First Responder during the onsite portion of this audit. The first responder indicated that the action he would take as a first responder to an allegation of sexual abuse would include the following:

- Safeguard the victim
- Separate the victim from the alleged abuser
- Protect the crime scene
- Notify a supervisor
- Document the incident
- Request that the victim/abuser not take the following actions;
  - Washing
  - Eating
  - Brushing their teeth
  - Urinating

- Drinking
- Eating

This Auditor interviewed a Non-Staff First Responder during the onsite portion of this audit. The first responder indicated that the action she would take as a first responder to an allegation of sexual abuse would include the following:

- Safeguard the victim
- Separate the victim from the alleged abuser
- Notify a supervisor
- Document the incident
- Request that the victim/abuser not take the following actions;
  - Washing
  - Eating
  - Brushing their teeth
  - Urinating
  - Drinking
  - Eating

Several inmates who reported a Sexual Abuse incident (3) were sampled during this audit. Two of the three inmates denied reporting sexual abuse, and one of the same three inmates indicated that he reported sexual abuse and not sexual abuse.

**115.64 (b): If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.**

115.64 (b)-1 IDOC confirmed the agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence.

115.64 (b)-2 IDOC confirmed the agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to notify security staff.

115.64 (b)-3 IDOC confirmed that of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: 0.

115.64 (b)-4 IDOC confirmed that of those allegations responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence: 0.

115.64 (b)-5 IDOC confirmed that of those allegations responded to first by a non-security staff member, the number of times that staff member notified security staff: 0.

	<p>Refer to 115.64 (a)-11.</p> <p>During this audit, the Auditor confirmed with a select sample of random staff (12) that if they were the first person to be alerted that an inmate has allegedly been the victim of sexual abuse, their responsibility would include the following actions.</p> <ul style="list-style-type: none"> <li>• Safeguard the victim</li> <li>• Separate the victim and alleged abuser</li> <li>• Protect the crime scene</li> <li>• Notify the supervisor unless the supervisor is the subject of the allegation</li> <li>• Document the incident</li> </ul> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. Wabash Valley Correctional Facility, Facility Directive, Sexual Assault Response Team (effective 5/15/2023), pages 1-6.</li> <li>3. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Staff First Responders Duties (effective 08/15/2024), pages 34-35.</li> <li>4. Interview with Security First Responders</li> <li>5. Interview with NON-security First Responders</li> <li>6. Examination of investigative reports referred for prosecution (9)</li> <li>7. Interview with a random sample of staff (12)</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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115.65	Coordinated response
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.65 (a): The facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</b></p> <p>115.65 (a)-1 The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E. Coordinated Response</p>

	<p>(effective 08/15/2024), pages 35-37, directs the Warden to establish a Sexual Assault Response Team and a written institutional plan to coordinate actions in response to an incident of sexual abuse, among first responders, medical and behavioral health practitioners, investigators, and facility staff.</p> <p>Wabash Valley Correctional Facility, Facility Directive, Sexual Assault Response Team (effective 5/15/2023), pages 1-6.</p> <p>During this audit, the Auditor interviewed the Warden. The Warden confirmed that the facility has a plan to coordinate actions among staff, first responders, medical, emergency personnel, mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. Wabash Valley Correctional Facility, Facility Directive, Sexual Assault Response Team (effective 5/15/2023), pages 1-6.</li> <li>3. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section E. Coordinated Response (effective 08/15/2024), pages 35-37</li> <li>4. Interview with the Warden</li> <li>5. Examination of the written institutional plan</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.66 (a): Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits 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.</b></p> <p>115.66 (a)-1 IDOC <u>denied</u> that the agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or</p>

	<p>renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>According to the Agency Head, the State of Indiana does not have a collective bargaining unit for State employees with the agency. IDOC does not collectively bargain on the agency's behalf and has <u>not entered</u> into or renewed any collective bargaining agreement or other agreement.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section F. Preservation of Ability to Protect Incarcerated Individuals from Contact with Abusers (effective 08/15/2024), pages 38.</p> <p><b>115.66 (b): Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or (2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.</b></p> <p>An Auditor is not required to audit this provision.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section F. Preservation of Ability to Protect Incarcerated Individuals from Contact with Abusers (effective 08/15/2024), pages 38.</li> <li>3. Interview with the Agency Head</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>115.67 (a): The agency shall establish 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, and shall designate which staff members or departments are charged with monitoring retaliation.</b>

115.67 (a)-1 IDOC confirmed during this audit that the agency has a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G. Protection Against Retaliation (effective 08/15/2024), pages 38-39, has a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff

115.67 (a)-2 The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G. Protection Against Retaliation (effective 08/15/2024), pages 38-39.

**115.67 (b): The agency shall 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.**

During this audit, the Auditor interviewed the Agency Head. The Agency Head stated that victims of sexual abuse are separated from the alleged abuser, which may include moving to another room, dorm, or facility. Involuntary segregation would be a last resort, used only as a temporary measure. Staff at each facility would be assigned to monitor the victim for at least 90 days.

During this audit, the Auditor interviewed the Warden, who confirmed that in cases of sexual abuse or sexual harassment allegations, the facility would protect the victim (e.g., by relocating or transferring them), separate the victim and the perpetrator, start an investigation, provide a SART during the investigative process, refer the victim to outside emotional support services, and monitor for retaliation.

During the audit, the Auditor spoke with Designated Staff Charges with Monitoring (1), who confirmed that when sexual abuse or harassment allegations occur, the facility takes protective measures such as relocating or transferring the victim, separating the victim from the perpetrator, initiating an investigation, involving a SART during this process, referring the victim to external emotional support services, and watching for retaliation. An inmate who is a victim of sexual abuse would be monitored for a minimum of 90 days.

During the facility tour and site review, which included segregation, the Auditor's informal conversations with inmates revealed that none of the inmates indicated being placed in segregation for risk of sexual victimization.

During this audit, the Auditor interviewed a random sample of inmates who reported sexual abuse. Two of the three inmates sampled denied reporting sexual abuse, while the third inmate also denied reporting sexual abuse but confirmed reporting an

allegation of sexual harassment.

This Auditor examined investigations that included retaliation monitoring documents refer to 115.67 (c).

**115.67 (c): For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.**

115.67 (c)-1 IDOC confirmed during this audit that the agency/facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff.

115.67 (c)-2 The length of time that the agency/facility monitors the conduct or treatment: 90 days.

115.67 (c)-3 IDOC confirmed during this audit that the agency/facility acts promptly to remedy any such retaliation.

115.67 (c)-4 IDOC confirmed during this reporting period that the agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

115.67 (c)-5 The number of times an incident of retaliation occurred in the past 12 months: 0.

During this audit, the Auditor interviewed the Warden, who confirmed that in cases of sexual abuse or sexual harassment allegations, the facility would protect the victim (e.g., by relocating or transferring them), separate the victim and the perpetrator, start an investigation, provide a SART during the investigative process, refer the victim to outside emotional support services, and monitor for retaliation.

During this audit, the Auditor interviewed the Designated Staff Member Responsible for Monitoring Retaliation, who stated that signs of retaliation include inmate disciplinary reports, housing changes, program adjustments, negative performance reviews, or staff reassignments. Retaliation monitoring also involved periodic status checks. Monitoring the behavior and treatment of inmate victims of abuse and staff who report the abuse would continue for at least 90 days and longer if necessary.

Documentation of reports of retaliation and agency response. Documentation of monitoring efforts requires corrective action.

Inmate CT reported sexual abuse on 12/12/24. The investigation was closed on 12/

20/24, substantiated—consensual inappropriate relationship with staff. Retaliation monitoring commenced after the investigation was closed and did not encompass the 90-day monitoring period required by this standard.

- Retaliation Monitoring initial meeting on 12/20/24 (face-to-face)
- Retaliation Monitoring 2/07/24 (?) reporting error (face-to-face)
- Retaliation Monitoring 2/18/25 (face-to-face)

Inmate DC reported sexual abuse on 5/21/24. The investigation was closed on June 19, 2024, with a substantiated finding.

**115.67 (d): IDOC confirmed during this audit that in the case of inmates, such monitoring shall also include periodic status checks.**

During this audit, the Auditor interviewed the Designated Staff Member Responsible for Monitoring Retaliation, who stated that signs of retaliation include inmate disciplinary reports, housing changes, program adjustments, negative performance reviews, or staff reassignments. Retaliation monitoring also involved periodic status checks. Monitoring the behavior and treatment of inmate victims of abuse and staff who report the abuse would continue for at least 90 days and longer if necessary.

Based on an examination of the retaliation documents, this Auditor confirmed that staff conducted periodic status checks. However, retaliation monitoring practices did not meet the requirements of this standard. Following an allegation of sexual abuse, the retaliation monitor in the investigations sample did not follow up on the report of sexual abuse or extend monitoring for at least 90 days after the report. This requires corrective action.

**115.67 (e): IDOC confirmed during this audit that if any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.**

During this audit, the Auditor spoke with the Agency Head. The Agency Head explained that victims of sexual abuse are separated from the alleged abuser, which could involve moving them to another room, dorm, or facility. Involuntary segregation is used only as a last resort and is temporary. Staff at each facility are responsible for monitoring the victim for at least 90 days.

During this audit, the Auditor spoke with the Warden, who confirmed that if there are allegations of sexual abuse or harassment, the facility would protect the victim by relocating or transferring them, separating the victim from the perpetrator, initiating an investigation, involving a SART during the process, referring the victim to external emotional support services, and monitoring for retaliation.

**115.67 (f): IDOC confirms that an agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.**

	<p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section G. Protection Against Retaliation (effective 08/15/2024), pages 38-39.</li> <li>3. Interviewed a random sample of inmates who reported sexual abuse (3).</li> <li>4. Interviewed the Agency Head</li> <li>5. Interviewed the Warden</li> <li>6. Interviewed the Designated Staff Member Responsible for Monitoring Retaliation</li> <li>7. Examination of the retaliation documents(5).</li> </ol> <p><b>Corrective action:</b></p> <ol style="list-style-type: none"> <li>1. 115.67 (c): For at least 90 days after a report of sexual abuse, the agency must monitor the conduct and treatment of inmates or staff who reported the abuse, as well as inmates reported to have suffered sexual abuse. This Auditor will continue to oversee the retaliation monitoring process to ensure compliance with this standard during the corrective action period.</li> <li>2. The PREA Coordinator will retrain the PREA Compliance Manager on this standard and the monitoring requirements as stated in Section 115.67.</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination and corrective action, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.68 (a): Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43.</b></p> <p>115.68 (a)-1 The agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section H. Post-Allegation Protective Custody (effective 08/15/2024), page 39 indicates any use of restrictive housing to protect an incarcerated individual who is alleged to have suffered sexual abuse shall</p>

be subject to the requirements of 115.43 for adult facilities and 115.342 for DYS Facilities.

115.68 (a)-2 IDOC confirmed during this audit that the number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0.

115.68 (a)-3 IDOC confirmed during this audit that the number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement: 0.

115.68 (a)-4 IDOC confirmed during this audit that from a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged: 0.

115.68 (a)-5 IDOC confirmed during this audit that if an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population, which was 0.

During the audit, the Auditor interviewed the Warden. The Warden stated that inmates in restricted housing due to victimization risk still have access to certain programs, privileges, and education, but not work. All restrictions on these activities are documented, including the reasons, duration, and justification. The same staff member also confirmed that placement in restricted housing for victimization risk is reviewed every 30 days and remains in place only until an alternative separation from the abuser is arranged, typically for less than 30 days.

During this audit, the Auditor interviewed Staff who supervise inmates in segregated housing (1). The staff member confirmed that inmates in restricted housing due to risk of victimization still have access to some programs, privileges, and education, but not work. Any restrictions on programs, privileges, or education are documented, including the reason for the restriction, its duration, and the justification. Additionally, the same staff member confirmed that placement in restricted housing for risk of victimization is reviewed every 30 days and only until an alternative means of separation from the abuser can be arranged, but for less than 30 days.

During the facility tour and site review, this Auditor conducted informal conversations with inmates in the unit. She confirmed that zero inmates were placed in restrictive housing for the risk of sexual victimization/who allege to have suffered sexual abuse.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. Facility tour and site review.

	<p>3. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section H. Post-Allegation Protective Custody (effective 08/15/2024), page 39.</p> <p>4. Interview with the Warden</p> <p>5. Interview with Staff who supervise inmates in segregated housing</p> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>115.71 (a): When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.</b></p> <p>115.71 (a)-1 The agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section X. Investigations: Subsection A., Criminal and Administrative Indiana Department of Correction Investigations, pages 39-40.</p> <p>IDOC Policy 00-01-103 Investigations and Intelligence (effective 6/1/2022) pages 1-40.</p> <p>During an interview with the PREA investigator, the investigator confirmed receiving specialized training specific to conducting sexual abuse and sexual harassment investigations in correctional settings. He confirmed that his training included topics such as techniques for interviewing juvenile sexual abuse victims.</p> <p>Proper use of Miranda and Garrity warnings.</p> <ul style="list-style-type: none"> <li>• Sexual abuse evidence collection in confinement settings. <ul style="list-style-type: none"> <li>◦ DNA</li> <li>◦ Clothing</li> <li>◦ Witness statements</li> <li>◦ Video footage</li> </ul> </li> </ul>

Furthermore, the investigator explained that the investigation would start immediately upon notification of a PREA incident. The initial actions would be to protect the victim and gather evidence. Allegations of sexual abuse or harassment can be made anonymously, by a third party, or from an internal source, and are treated the same as verbally reported allegations to staff.

Documentation review conducted by the Auditor included a sample of investigative records/reports for allegations of sexual abuse or sexual harassment.

**115.71 (b): IDOC confirmed during this audit that where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34.**

Refer to 115.71 (a)-1.

**115.71 (c): IDOC confirmed during this audit that investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.**

Refer to 115.371 (a)-1.

**115.71 (d): IDOC confirmed that when the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.**

IDOC (Investigative Staff) confirmed that the agency does not terminate an investigation solely because the source of the allegation recants the allegation.

**115.71 (e): IDOC confirmed that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.**

During this audit, the Auditor interviewed Investigative Staff. The staff member indicated that the credibility of an alleged victim, suspect, or witness is assessed based on the evidence. Additionally, there are no circumstances that require an inmate who claims sexual abuse to undergo a polygraph examination or truth-telling device as a condition for continuing an investigation.

During this audit, the Auditor interviewed three inmates who reported sexual abuse. Two of the three inmates denied reporting sexual abuse. The third inmate denied reporting sexual abuse but affirmed reporting sexual harassment.

**115.71 (f): IDOC confirmed during this audit that administrative**

**investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.**

During this audit, the Auditor spoke with Investigative Staff. The staff member described the efforts made during an administrative investigation to assess whether staff actions or omissions contributed to the sexual abuse. The investigator confirmed that all allegations of sexual abuse and sexual harassment investigative reports are documented in writing, and the facility conducts incident reviews for all allegations, whether substantiated or not. The written report includes evidence such as witness statements, physical evidence, DNA analysis, video or audio recordings, and forensic medical reports.

**115.71 (g): IDOC confirmed during this audit that criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.**

During this audit, the Auditor spoke with Investigative Staff. The staff member described the efforts made during an administrative investigation to assess whether staff actions or omissions contributed to the sexual abuse. The investigator confirmed that all allegations of sexual abuse and sexual harassment investigative reports are documented in writing, and the facility conducts incident reviews for all allegations, whether substantiated or not. The written report includes evidence such as witness statements, physical evidence, DNA analysis, video or audio recordings, and forensic medical reports.

**115.71 (h): IDOC confirmed during this audit that substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.**

115.71 (h)-1 IDOC confirmed during this audit that substantiated allegations of conduct that appear to be criminal are referred for prosecution.

115.71 (h)-2 IDOC confirmed during this audit that the number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later: 3.

During this audit, the Auditor examined four (4) samples of cases referred for prosecution. Two cases involve the same employee. Four substantiated. Four were referred for prosecution. The reporting noted in 115.71 (h)-2 was in error.

**115.71 (i): IDOC confirmed during this audit that the agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.**

115.71 (i)-1 IDOC confirmed during this audit that the agency retains all written

reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

**115.71 (j): IDOC confirmed during this audit that the departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.**

During this audit, the Auditor interviewed an Investigative Staff (1) who confirmed during this audit that the departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

During this audit, the Auditor examined four investigative reports that were either closed or ended during an investigation into sexual misconduct with an inmate, with investigations continuing after their departure or termination.

**115.71 (k): IDOC confirmed during this audit that any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.**

An Auditor is not required to audit this provision.

**115.71 (l): IDOC confirmed during this audit that when outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.** Not applicable.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section X. Investigations: Subsection A., Criminal and Administrative Indiana Department of Correction Investigations, pages 39-40.
3. IDOC Policy 00-01-103 Investigations and Intelligence (effective 6/1/2022) pages 1-40.
4. Interview with an Investigative Staff (1)
5. Review of investigative reports

**Corrective/Clarification Action:**

1. 115.71 (a)-1 Documentation review conducted by the Auditor included a sample of investigative records/reports for allegations of sexual abuse or sexual harassment.
2. 115.71 (h)-2 IDOC confirmed during this audit that the number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later: 3.

	<p>During this audit, the Auditor examined four (4) samples of cases referred for prosecution.</p> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination and corrective action/clarification, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.72 (a): The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</b></p> <p>115.72 (a)-1 IDOC confirmed during this audit that the agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Evidentiary Standards for Administrative Investigations, page 40.</p> <p>During this audit, the Auditor interviewed Investigative Staff who explained that the agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Evidentiary Standards for Administrative Investigations, page 40.</li> <li>3. Interviewed Investigative Staff (1)</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
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<b>Auditor Overall Determination:</b> Meets Standard
<b>Auditor Discussion</b>
<p><b>115.73 (a): Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</b></p> <p>115.73 (a)-1 The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Reporting to Incarcerated Individuals (effective 8/15/2024), pages 40-41.</p> <p>115.73 (a)-2 The number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months: 9.</p> <p>115.73 (a)-3 Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigation: 9.</p> <p><b>115.73 (b): If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.</b></p> <p>115.73 (b)-1 If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the inmate of the outcome of the investigation. Not applicable.</p> <p>115.73 (b)-2 The number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months: 0.</p> <p>The agency/facility is responsible for conducting administrative and criminal investigations.</p> <p>115.73 (b)-3 Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, the number of inmates alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation: Not applicable.</p> <p><b>115.73 (c): Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3)</b></p>

**The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.**

115.73 (c)-1 IDOC confirmed during this audit that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently informs the inmate (unless the agency has determined that the allegation is unfounded) whenever:

- The staff member is no longer posted within the inmate's unit;
- The staff member is no longer employed at the facility;
- The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

115.73 (c)-2 IDOC confirmed during this audit that there has been a substantiated or unsubstantiated complaint (i.e., not unfounded) of sexual abuse committed by a staff member against an inmate in an agency facility in the past 12 months.

115.73 (c)-3 IDOC confirmed during this reporting period in each case, the agency subsequently informed the inmate whenever:

The staff member was no longer posted within the inmate's unit;

The staff member was no longer employed at the facility;

The agency learned that the staff member has been indicted on a charge related to sexual abuse within the facility; or

The agency learned that the staff member has been convicted on a charge related to sexual abuse within the facility.

**115.73 (d): Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.**

115.73 (d)-1 IDOC confirmed during this reporting period that following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever:

The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or

The agency learns that the alleged abuser has been convicted of a charge related to sexual abuse within the facility.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Reporting to Incarcerated Individuals (effective 8/15/2024), page 41.

	<p>During this audit, the Auditor interviewed three inmates who reported sexual abuse. Two of the three inmates denied reporting sexual abuse. The third inmate denied reporting sexual abuse but affirmed reporting sexual harassment.</p> <p><b>115.73 (e): All such notifications or attempted notifications shall be documented.</b></p> <p>115.73 (e)-1 IDOC confirmed during this audit that the agency has a policy that all notifications to inmates described under this standard are documented.</p> <p>115.73 (e)-2 In the past 12 months, the number of notifications to inmates that were provided pursuant to this standard: 9.</p> <p>115.73 (e)-3 Of those notifications made in the past 12 months, the number that were documented: 9.</p> <p><b>115.73 (f): An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.</b></p> <p>This Auditor examined documentation of notifications to confirm the numbers provided in Standard 115.73 (e)-2 and 3. Problematically, the facility indicated in 115.22 (a)-2 115.22 (a)-2 In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received: 46. 115.22 (a)-5 Confirmed, referring to allegations received during the past 12 months, all administrative and/or criminal investigations were completed. This standard requires clarification or corrective action.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Reporting to Incarcerated Individuals (effective 8/15/2024), pages 40-41.</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>115.76 (a): Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual</b>

**harassment policies.**

115.76 (a)-1 Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XI. Disciplinary Sanctions for Staff, Subsection A., Disciplinary Sanctions for Staff (effective 8/15/2024), pages 41-42, indicates that all staff shall be subject to disciplinary sanctions up to and including termination for violating the agency's sexual abuse or sexual harassment policies.

**115.76 (b): IDOC confirmed during this audit that termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.**

115.76 (b)-1 In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: 3.

The Auditor reviewed a sample of records involving terminations, resignations, or other sanctions related to violations of sexual abuse or sexual harassment policies. It is important to note that one staff member was involved in two separate incidents with different inmates, and the agency confirmed both incidents.

115.76 (b)-2 In the past 12 months, the number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 3.

**115.76 (c): Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall 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.**

115.76 (c)-1 The disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

IDOC Policy 04-03-103 Information and Standards of Conduct for Departmental Staff (effective 4/1/2024), pages 1-37. Section M. Fraternization: Contact with another beyond that which is necessary to complete the assigned responsibilities. Fraternization between staff and inmates includes contact between an employee and an inmate, of either sex, beyond that necessary to carry out the employee's job responsibilities, including, but not limited to: romantic relationship; sexual activities; having an inmate work or provide any services to an employee not approved with Policy 04-06-102; living with an inmate; gossiping with an inmate; having contact with an inmate's family beyond that necessary to carry out assigned duties.

115.76 (c)-2 In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse): 0.

Based on examination, staff PREA-related investigations substantiated, as a result of the findings, were forwarded to the prosecutor's office for prosecutorial action.

**115.76 (d): 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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.**

115.76 (d)-1 All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XI. Disciplinary Sanctions for Staff, Subsection A, Disciplinary Sanctions for Staff (effective August 15, 2024), page 42, indicates that 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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. These referrals will be documented.

115.76 (d)-2 In the past 12 months, the number of staff from the facility who have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 3.

Three staff members were terminated and reported to law enforcement.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XI. Disciplinary Sanctions for Staff, Subsection A., Disciplinary Sanctions for Staff (effective 8/15/2024), pages 41-42
3. IDOC Policy 04-03-103 Information and Standards of Conduct for Departmental Staff (effective 4/1/2024), pages 1-37.
4. Examination of staff PREA-related investigations substantiated as a result of the findings.
5. Examination of sample records of terminations, resignations, or other sanctions for violation of sexual abuse or sexual harassment policies.

**Corrective Action/Clarification:**

	<ol style="list-style-type: none"> <li>1. Reports to law enforcement for violations of agency sexual abuse or sexual harassment policies. (Foodservice and correctional staff).</li> <li>2. 115.76 (d)-2 In the past 12 months, the number of staff from the facility who have been reported to law enforcement or licensing boards following their termination (or resignation before termination) for violating agency sexual abuse or sexual harassment policies: 3. Three staff members were terminated and reported to law enforcement. One staff member was substantiated in two separate incidents.</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>115.77 (a): Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</b></p> <p>115.77 (a)-1 Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Corrective Action for Contractors and Volunteers (effective 8/15/2024), pages 42.</p> <p>115.77 (a)-2 Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Corrective Action for Contractors and Volunteers (effective 8/15/2024), pages 42.</p> <p>115.77 (a)-3 IDOC indicates "no." In the past 12 months, contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Corrective Action for Contractors and Volunteers (effective 8/15/2024), pages 42. During a discussion with IDOC, it was determined that one staff member, a food service worker, had been substantiated for two separate violations of PREA standards that were potentially</p>

	<p>criminal. While she was a staff member of the facility, she was a contract employee. Furthermore, 115.77 (a)-3 was reported in error and should reflect that one (1) contractor was reported to law enforcement</p> <p>115.77 (a)-4 In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates: 0.</p> <p><b>115.77 (b): The facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</b></p> <p>115.77 (b)-1 The facility takes appropriate remedial measures. It considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Corrective Action for Contractors and Volunteers (effective 8/15/2024), pages 42.</li> <li>3. Investigative reports (9).</li> <li>4. Interview with the Warden.</li> </ol> <p><b>Corrective Action/Clarification:</b></p> <ol style="list-style-type: none"> <li>1. Is any contractor or volunteer who engages in sexual abuse reported to the relevant licensing bodies? (Clarification) <ol style="list-style-type: none"> <li>1. Foodservice (contractor)</li> <li>2. Correctional Officer (state employee)</li> <li>3. Commissionary staff (state employee)</li> </ol> </li> </ol> <p><b>Conclusion:</b></p> <p>The narrative includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions. During an interview with the PREA Coordinator, he indicated that correctional officers are trained but not certified or licensed.</p>
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<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

**115.78 (a): Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.**

115.78 (a)-1 Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Disciplinary Sanctions for Incarcerated Individuals (effective 8/15/2024), pages 42-43. Inmates shall be subject to disciplinary sanctions under a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

115.78 (a)-2 IDOC confirmed during this audit that inmates are subject to disciplinary sanctions only under a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.

IDOC Policy 02-04-101 The Disciplinary Code for Adult Offenders (effective 3/1/2020), pages 1-56.

IDOC Policy 02-04-101 The Disciplinary Code for Adult Offenders (effective 3/1/2020), page 38, indicates that in determining the appropriate sanction for an inmate found guilty of a disciplinary offense, a staff person may consider as aggravating or mitigating factors such as:

- Disciplinary history
- Mental health status
- Previously found guilty of the same or similar offense, and if so, how often.
- Whether the violation created a risk of serious disruption at the facility or whether the violation created a risk of serious injury to another person
- Whether the inmate was aware that his/her actions were an offense when the offense was committed
- Whether the offense created a risk to the safety and security of the facility, a staff person, an inmate, or the community

Indiana Department of Corrections, Adult Disciplinary Process, Appendix I: Offenses (effective 3/01/2020), pages 1-8.

115.78 (a)-3 IDOC confirmed during this audit in the past 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility: 0.

115.78 (a)-4 IDOC confirmed during this audit in the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility: 0.

**115.78 (b): IDOC confirmed during this audit that sanctions shall be**

**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.**

During this reporting period, the Auditor interviewed the Warden. The Warden explained that disciplinary sanctions for inmates following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse are determined by IDOC Policy 02-04-101, The Disciplinary Code for Adult Offenders (effective 3/1/2020), pages 1-56. They confirmed that sanctions are proportionate to the nature and circumstances of the abuses, and any history of mental disability or mental illness is considered when determining sanctions. Furthermore, sanctions are appropriate to the severity and details of the violation.

Refer to 115.78 (a)-4. Documentation Review: Investigative reports and documentation of sanctions imposed.

**115.78 (c): IDOC confirmed during this audit that the disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.**

During this reporting period, the Auditor interviewed the Warden. The Warden explained that disciplinary sanctions for inmates following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse are determined by IDOC Policy 02-04-101, The Disciplinary Code for Adult Offenders (effective 3/1/2020), pages 1-56. They confirmed that sanctions are proportionate to the nature and circumstances of the abuses, and any history of mental disability or mental illness is considered when determining sanctions. Furthermore, sanctions are appropriate to the severity and details of the violation.

IDOC Policy 02-04-101 The Disciplinary Code for Adult Offenders (effective 3/1/2020), page 38, indicates that in determining the appropriate sanction for an inmate found guilty of a disciplinary offense, a staff person may consider as aggravating or mitigating factors such as:

- Disciplinary history
- Mental health status
- Previously found guilty of the same or similar offense, and if so, how often.
- Whether the violation created a risk of serious disruption at the facility or whether the violation created a risk of serious injury to another person
- Whether the inmate was aware that his/her actions were an offense when the offense was committed
- Whether the offense created a risk to the safety and security of the facility, a staff person, an inmate, or the community

**115.78 (d): IDOC confirmed during this audit that if the facility offers therapy, counseling, or other interventions designed to address and correct**

**underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.**

115.78 (d)-1 IDOC confirmed during this audit that the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse.

115.78 (d)-2 IDOC confirmed during this audit that if the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

During this audit, the Auditor interviewed a Mental Health Practitioner. The practitioner confirmed that the facility would offer therapy, counseling, or other intervention services designed to address and correct the underlying reasons or motivations for sexual abuse and consider offering the same services to the offending inmate. The inmate's participation in the offer of services would not be a condition of access to programming or other benefits.

During this audit, the Auditor interviewed a Medical Practitioner. The practitioner confirmed that mental health would offer therapy, counseling, or other intervention services designed to address and correct the underlying reasons or motivations for sexual abuse and consider offering the same services to the offending inmate. The inmate's participation in the offer of services would not be a condition of access to programming or other benefits.

**115.78 (e): IDOC confirmed during this audit that the agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.**

115.78 (e)-1 IDOC confirmed during this audit that the agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

Additional records of disciplinary actions against inmates for sexual conduct with staff. None found.

**115.78 (f): IDOC confirmed during this audit that, for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.**

115.78 (f)-1 IDOC confirmed during this audit that the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish

evidence sufficient to substantiate the allegation.

IDOC Policy 02-04-101 The Disciplinary Code for Adult Offenders (effective 3/1/2020), page 38.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Disciplinary Sanctions for Incarcerated Individuals (effective 8/15/2024), pages 42-43.

**115.78 (g): IDOC confirmed during this audit that an agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.**

115.78 (g)-1 IDOC confirmed during this audit that the agency prohibits all sexual activity between inmates.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Disciplinary Sanctions for Incarcerated Individuals (effective 8/15/2024), pages 1-43.

Refer to IDOC Adult Disciplinary Process Brochure

- Major Offenses
  - Class A 114 Sexual Act with a Visitor
  - Class A 115 Nonconsensual Sexual Act
  - Class B 205 Abusive Sexual Contact with a Visitor
  - Class B 206 Abusive Sexual Contact with Another Inmate
  - Class B 216 Sexual Conduct
  - Class C 302 Sexual Harassment

115.78 (g)-2 IDOC confirmed during this audit that if the agency prohibits all sexual activity between inmates and disciplines inmates for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.

Refer to 115.78 (g)-1, IDOC Adult Disciplinary Process Brochure.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Adult Disciplinary Process Brochure
3. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Disciplinary Sanctions for Incarcerated Individuals (effective 8/15/2024), pages 1-43.
4. IDOC Policy 02-04-101 The Disciplinary Code for Adult Offenders (effective 3/1/2020), page 38.
5. Interview with the Warden
6. Interview with a Medical Practitioner
7. Interview with a Mental Health Practitioner
8. Refer to 115.78 (a)-4. Documentation Review: Investigative reports and

	<p>documentation of sanctions imposed.</p> <p><b>Corrective Action/Clarification:</b></p> <p>1. Additional records of disciplinary actions against inmates for sexual conduct with staff. (clarification) None found.</p> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, as well as clarification or corrective action, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.81 (a): If the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</b></p> <p>115.81 (a)-1 All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XII. Medical and Mental Health Care, Subsection A. Medical and Behavioral Health Screenings/History of Sexual Abuse (effective 8/15/2024), page 44. All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner within 14 days.</p> <p>115.81 (a)-2 IDOC confirmed that the follow-up meeting was offered within 14 days of the intake screening.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XII. Medical and Mental Health Care, Subsection A. Medical and Behavioral Health Screenings/History of Sexual Abuse (effective 8/15/2024), page 44. All inmates at this facility who have disclosed any prior sexual victimization during a screening under §115.41 are offered a follow-up meeting with a medical or mental health practitioner within 14 days.</p>

115.81 (a)-3 In the past 12 months, the percent of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner: 100.

115.81 (a)-4 IDOC confirmed during this audit that medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

Upload/select sample medical/mental health secondary materials. Corrective action.

Inmates who disclosed sexual Victimization at risk screening reported that staff asked if they wanted to meet with a mental health practitioner. A review of 10 referrals completed by the facility omitted critical information to confirm the timing. This standard requires two weeks. This involves corrective action.

During this audit, the Auditor interviewed the Staff Responsible for Risk Screening. The staff member confirmed that if a risk screening indicates that an inmate has experienced prior sexual victimization or has a history of perpetration of sexual abuse, whether in an institutional setting or in the community, the facility would offer a follow-up meeting with a mental health practitioner within 14 days of the inmate's arrival.

**115.81 (b): 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, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.**

115.81 (b)-1 If the facility is a prison, all prison inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.41, are offered a follow-up meeting with a mental health practitioner.

115.81 (b)-2 IDOC confirmed during this audit that a follow-up meeting was offered within 14 days of the intake screening.

115.81 (b)-3 In the past 12 months, the percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner: 100.

115.81 (b)-4 Mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

115.81 (c): See 115.81(a)

**115.81 (d): Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.**

115.81 (d)-1 IDOC indicates that information related to sexual victimization or abuse that occurred in an institutional setting is strictly limited to medical and mental health practitioners and management staff with a need to know based on their role and responsibility in the facility or in the agency.

115.81 (d)-2 IDOC confirmed during this audit that any information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.

**115.81 (e): Medical and mental health practitioners shall 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.**

115.81 (e)-1 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.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XII. Medical and Mental Health Care, Subsection A. Medical and Behavioral Health Screenings/ History of Sexual Abuse (effective 8/15/2024), page 44.
3. Review a select set of documented referrals of inmates who reported sexual victimization during intake.
4. Interview with a select sample of inmates who reported sexual victimization
5. Interview with Staff Responsible for Risk Screening (1)

**Corrective Action:**

1. 115.81 (a)-4 IDOC confirmed during this audit that medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services. Inmates who disclosed sexual Victimization at risk screening reported that staff asked if they wanted to meet with a mental health practitioner. A review of 10 referrals completed by the facility omitted critical information to confirm the timing. This standard requires two weeks. This involves corrective action. The facility will submit evidence of compliance with the time requirements as outlined in this standard.

**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence used in making the compliance or non-compliance determination, as well as any corrective action required to meet this standard. It also includes the Auditor's analysis and reasoning, along with the Auditor's conclusions.

115.82	Access to emergency medical and mental health services
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 1481 499"><b>115.82 (a): Inmate victims of sexual abuse shall 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.</b></p> <p data-bbox="256 539 1422 651">115.82 (a)-1 IDOC confirmed during this audit that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.</p> <p data-bbox="256 696 1406 763">IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Access to Emergency Medical and Behavioral Health Services (8/15/2024), pages 44-45.</p> <p data-bbox="256 808 1398 920">115.82 (a)-2 IDOC confirmed during this audit that medical and mental health practitioners determine the nature and scope of such services according to their professional judgment.</p> <p data-bbox="256 965 1477 1245">115.82 (a)-3 IDOC confirmed during this audit that medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.</p> <p data-bbox="256 1290 1453 1480">During this audit, the Auditor interviewed a medical practitioner. The medical practitioner affirmed that the nature and scope of services provided to a victim of sexual abuse would be determined based on her professional judgement. Inmates in need of access to emergency medical services receive immediate, timely, and unimpeded access to emergency medical treatment and crisis intervention services.</p> <p data-bbox="256 1525 1477 1760">During this audit, the Auditor conducted an interview with a mental health practitioner. The mental health practitioner also affirmed that the nature and scope of services provided to a victim of sexual abuse would be determined based on her professional judgment. Inmates requiring access to emergency medical services are granted immediate, prompt, and unobstructed access to urgent medical treatment and crisis intervention services.</p> <p data-bbox="256 1805 1414 2007">During this audit, the Auditor interviewed inmates who reported sexual abuse (3). Two of three denied reporting sexual abuse. One of the three indicated that he reported sexual harassment and not sexual abuse. None of the three inmates identified by the facility as reporting sexual abuse was transported to emergency facilities.</p> <p data-bbox="256 2051 1453 2085"><b>115.82 (b): IDOC confirmed during this audit that if no qualified medical or</b></p>

**mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.**

During this audit, the Auditor interviewed a Security Staff First Responder. The staff indicated that in their role as a first responder, their actions would be to protect the victim immediately, separate the victim from the alleged abuser, preserve the crime scene, and request that the victim refrain from washing, eating, or changing clothes to avoid destroying physical evidence, document the incident, and notify the shift supervisor. The shift supervisor would, in turn, immediately notify the appropriate medical and mental health practitioners.

During this audit, the Auditor interviewed a Security Staff First Responder. The staff indicated that in their role as a first responder, their actions would be to protect the victim immediately, separate the victim from the alleged abuser, triage the victim for life-threatening injuries, notify the shift supervisor, and inform the medical supervisor of the incident.

**115.82 (c): IDOC confirmed during this audit that inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.**

115.82 (c)-1 IDOC confirmed during this audit that inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, under professionally accepted standards of care, where medically appropriate.

During this audit, the Auditor interviewed a medical practitioner. The practitioner confirmed that victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis under professionally accepted standards of care, where medically appropriate

During this audit, the Auditor interviewed mental health practitioners who provide crisis intervention, emotional support, counseling as needed, and referrals to external community support services.

During this audit, the Auditor interviewed inmates who reported sexual abuse (3). Two of the three denied reporting sexual abuse. One of three inmates identified as reporting sexual abuse denied reporting sexual abuse but confirmed reporting sexual harassment instead.

**115.82 (d): IDOC confirmed during this audit that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.**

	<p>115.82 (d)-1 IDOC confirmed during this audit that treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section B. Access to Emergency Medical and Behavioral Health Services (8/15/2024), pages 44-45.</li> <li>3. Interview with a mental health practitioner</li> <li>4. Interview with a mental health practitioner</li> <li>5. Interview with inmates who reported sexual abuse (3)</li> <li>6. Interview with a Security Staff First Responder (1)</li> <li>7. Interview with a Non-Security Staff First Responder (1)</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.83 (a): The facility shall 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.</b></p> <p>115.83 (a)-1 The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers (8/15/2024), page 45 indicates that the facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p><b>115.83 (b): The evaluation and treatment of such victims shall 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.</b></p>

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers (8/15/2024), page 45, the evaluation and treatment of such victims shall 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.

During this audit, the Auditor interviewed a medical practitioner. The practitioner explained that from a physical health perspective, the practitioner would triage and treat serious life-threatening injuries, stabilize the victim, and then prepare the victim for transport to a local hospital for a SANE forensic examination. Upon returning to the facility, the practitioner would follow up on the orders issued by the hospital, including lab work, medications, treatment plans, and referrals for other services.

During the audit, the Auditor spoke with a mental health practitioner. The practitioner stated they would offer six months of clinically appropriate, individual counseling, including trauma-focused and solution-oriented crisis intervention, from an emotional health standpoint.

During this audit, the Auditor interviewed inmates who reported sexual abuse (3).

Two of three denied reporting sexual abuse. One of the three indicated that he reported sexual harassment and not sexual abuse. None of the three inmates identified by the facility as reporting sexual abuse was transported to emergency facilities.

**115.83 (c): The facility shall provide such victims with medical and mental health services consistent with the community level of care.**

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers (8/15/2024), page 45, the facility shall provide such victims with medical and mental health services consistent with the community level of care.

During this audit, the Auditor interviewed a medical and mental health practitioner separately. Each practitioner confirmed that the facility provides medical and mental health services to such victims consistent with the community level of care.

**115.83 (d): Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.**

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers (8/15/2024), page 45, inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

115.83 (d)-1 Female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests.

- Not applicable to an all-male facility.

**115.83 (e): If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.**

115.83 (e)-1 If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.

- Not applicable.

**115.83 (f): Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.**

115.83 (f)-1 Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers (8/15/2024), page 45, inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

During this audit, the Auditor interviewed inmates who reported sexual abuse (3). Two of three denied reporting sexual abuse. One of the three indicated that he reported sexual harassment and not sexual abuse. None of the three inmates identified by the facility as reporting sexual abuse was transported to emergency facilities.

A sample of medical records or secondary documentation that demonstrates victims were offered tests for sexually transmitted infections as medically appropriate was omitted as evidence. This requires corrective action..

**115.83 (g): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.**

115.83 (g)-1 Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers (8/15/2024), page 45, treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

During this audit, the Auditor interviewed inmates who reported sexual abuse (3). Two of three denied reporting sexual abuse. One of the three indicated that he reported sexual harassment and not sexual abuse. None of the three inmates

identified by the facility as reporting sexual abuse was transported to emergency facilities.

**115.83 (h): All prisons 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.**

115.83 (h)-1 If the facility is a prison, it attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history. IDOC offers treatment when deemed appropriate by mental health practitioners.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers (8/15/2024), page 45, all IDOC facilities shall 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.

During this audit, the Auditor interviewed a mental health practitioner. The practitioner confirmed that mental health practitioners conduct a mental health evaluation of all known inmate abusers and offer treatment if appropriate, after learning about the abuse history of such an inmate. Typically, the assessment is conducted within 60 days.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers (8/15/2024), page 45
3. Interview with a medical practitioner
4. Interview with a mental health practitioner
5. Interview with inmates who reported sexual abuse (3)

**Corrective Action/Clarification:**

1. 115.83 (f) A sample of medical records or secondary documentation that demonstrates victims were offered tests for sexually transmitted infections as medically appropriate was omitted as evidence. This requires corrective action. Non-substantiated.
2. 115.83 (h) Prisons 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. Non-substantiated.

**Conclusion:**

The narrative above provides a detailed discussion of all the evidence used in making

	the compliance or non-compliance decision, the corrective actions, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.86 (a): The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.</b></p> <p>115.86 (a)-1 The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XIII. Sexual Abuse Incident Reviews, Subsection A. Sexual Abuse Incident Reviews (effective 8/15/2024), page 46. The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded.</p> <p>115.86 (a)-2 In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents: 7.</p> <p>During this audit, the Auditor examined documentation of completed criminal or administrative investigations of sexual abuse. A review of the facility's PREA incidents from January to December 2024 shows 14 allegations of sexual abuse; one incident was unfounded, and one incident that occurred on 6/16/24 was forwarded to OII for action, involving allegedly sexually abusive contact (inmate/staff) referred to OII. The outcome was not provided. This means the number of criminal or administrative investigations completed at the facility, excluding those classified as unfounded, is 12. Additionally, the evidence provided does not cover the entire 12-month reporting period from April 28, 2024, to April 28, 2025. This deficiency requires corrective action.</p> <p><b>115.86 (b): Such review shall ordinarily occur within 30 days of the conclusion of the investigation</b></p> <p>115.86 (b)-1 IDOC confirmed that the facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XIII. Sexual Abuse Incident</p>

Reviews, Subsection A. Sexual Abuse Incident Reviews (effective 8/15/2024), page 46. The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.

During this audit, the Auditor interviewed the Warden. The Warden confirmed that the facility conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.

During this audit, the Auditor reviewed the documentation of the review team's minutes and report for this facility. A review of the facility's PREA incidents from January to December 2024 shows 14 allegations of sexual abuse; one incident was unfounded, and one incident that occurred on 6/16/24 was forwarded to OII for action, involving allegedly sexually abusive contact (inmate/staff) referred to OII. The outcome was not provided. This means the number of criminal or administrative investigations completed at the facility, excluding those classified as unfounded, is 12. Six substantiated and six unsubstantiated for the period January 2024 to December 2024. Additionally, the evidence provided does not cover the entire 12-month reporting period from April 28, 2024, to April 28, 2025. This requires corrective action.

115.86 (b)-2 In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents: 7.

During this audit, the Auditor examined documentation of completed criminal or administrative investigations of sexual abuse. The Auditor identified 9

**115.86 (c): The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.**

115.86 (c)-1 The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XIII. Sexual Abuse Incident Reviews, Subsection A. Sexual Abuse Incident Reviews (effective 8/15/2024), page 46.

During this audit, the Auditor interviewed the Warden. The Warden confirmed that the facility has a Sexual Abuse Incident Review Team, which conducts PREA Committee Incident Reviews, involving upper-level management officials and allowing input from line supervisors, investigators, and medical or mental health practitioners. For example, a review of PREA Committee Incident Review minutes dated **December 12, 2024, reveals** that the team is multidisciplinary, as confirmed by the Staff Sexual Misconduct (Substantiated) report. The investigation was closed on **December 20, 2024**, and the incident review was completed on **February 19, 2025. Staff present for the meeting included:**

- Caseworker Manager
- Lead Investigator
- Warden/Deputy Warden
- Major
- PCM
- Medical practitioner
- Teacher
- Nurse administrator

**115.86 (d): The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.**

115.86 (d)-1 The facility prepares a report of its findings from sexual abuse incident reviews, including, but not necessarily limited to, determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA Compliance Manager.

**115.86 (e): The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.**

115.86 (e)-1 The facility implements the recommendations for improvement or documents its reasons for not doing so.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XIII. Sexual Abuse Incident Reviews, Subsection A. Sexual Abuse Incident Reviews (effective 8/15/2024), page 46.
3. Examination of documentation of completed criminal or administrative investigations of sexual abuse.
4. Examination of documentation of completed incident reviews for the review period (6).
5. Interview with the Warden.

	<p>6. Interview with the PREA Compliance Manager.</p> <p>7. Interview with the Incident Review Team (1).</p> <p><b>Corrective Action:</b></p> <ul style="list-style-type: none"> <li>• 115.86 (a)-2 In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents: 7. A review of the facility's PREA incidents from January to December 2024 shows 14 allegations of sexual abuse; one incident was unfounded, and one incident that occurred on 6/16/24 was forwarded to OII for action, involving allegedly sexually abusive contact (inmate/staff) referred to OII. The outcome was not provided. This means the number of criminal or administrative investigations completed at the facility, excluding those classified as unfounded, is 12. Six substantiated and six unsubstantiated cases were reported for the period January 2024 to December 2024. Additionally, the evidence provided does not cover the entire 12-month reporting period from April 28, 2024, to April 28, 2025. This requires corrective action: <ul style="list-style-type: none"> <li>◦ Retraining</li> <li>◦ Monitoring of retaliation monitoring documents to confirm compliance.</li> </ul> </li> </ul> <p><b>Conclusion:</b></p> <p>The narrative includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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115.87	Data collection
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>115.87 (a): The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</b></p> <p>115.87 (a)-1 The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section III Definitions (effective 8/15/2024), page 52. The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p>

**115.87 (b): The agency shall aggregate the incident-based sexual abuse data at least annually.**

115.87 (b)-1 IDOC confirmed during this audit that the agency aggregates the incident-based sexual abuse data at least annually.

This Auditor examined samples of aggregated data from the IDOC website to confirm that the agency aggregates the incident-based sexual abuse data at least annually.

**115.87 (c): The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.**

115.87 (c)-1 IDOC confirmed during this audit that the agency uses a standardized instrument that includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

**115.87 (d): The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.**

115.87 (d)-1 IDOC confirmed during this audit that the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

**115.87 (e): The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.**

115.87 (e)-1 IDOC confirmed that the agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

115.87 (e)-2 IDOC confirmed during this audit that the data from private facilities complies with SSV reporting regarding content.

**115.87 (f): Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.**

115.87 (f)-1 IDOC confirmed during this audit that the agency provides the Department of Justice (DOJ) with data from the previous calendar year upon request.

**Evidence relied upon:**

1. Pre-audit questionnaire
2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section XIII. Sexual Abuse Incident Reviews, Subsection A. Sexual Abuse Incident Reviews (effective 8/15/2024), page 46.
3. Examined samples of aggregated data from the IDOC website to confirm that

	<p>the agency aggregates the incident-based sexual abuse data at least annually.</p> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor’s analysis and reasoning, and the Auditor’s conclusions.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>115.88 (a): The agency shall review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.</b></p> <p>115.88 (a)-1 IDOC confirmed during this audit that the agency reviews data collected and aggregated pursuant to §115.87 to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including:</p> <ul style="list-style-type: none"><li>• Identifying problem areas;</li><li>• Taking corrective action on an ongoing basis; and</li><li>• Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.</li></ul> <p>IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Data Review for Corrective Action (effective 8/15/2024), pages 47- 48.</p> <p>This Auditor examined the IDOC 2024 Sexual Abuse Prevention Program Annual Report, which included:</p> <ul style="list-style-type: none"><li>• A summary of 2024 SIR data</li><li>• Comparison of current and data from two prior years (2023,2022)</li><li>• Problems identified and corrective actions taken by the applicable facility</li><li>• Continued facility needs for PREA Compliance</li><li>• Summary</li></ul> <p>During this reporting period, the Auditor interviewed the Agency Head. He explained that the agency uses incident-based sexual abuse data to assess and improve sexual abuse prevention, detection, response policies, practices, and training by identifying problem areas and implementing corrective actions when necessary. Comparing current SIR data with data from two previous years helps managers recognize trends</p>

and develop corrective steps to address any negative trends identified in the report.

During this reporting period, the Auditor interviewed the agency's PREA Coordinator/Director. The agency prepares an annual report based on its data. He confirmed that the agency reviews data collected and aggregated according to 115.87 to evaluate and improve the effectiveness of its sexual abuse prevention, detection, and response policies and training. All data collected and aggregated by the agency is sent to him at least once a year. The data is collected and stored on an electronic platform that is password-protected and has limited access. IDOC follows a retention schedule that complies with PREA standards. As the PREA Coordinator, he is responsible for overall PREA compliance along with each facility's PREA Compliance Manager. The agency takes corrective actions regularly, as needed, based on this data.

During this audit, the Auditor interviewed the PREA Compliance Manager. The PCM confirmed that the facility and the agency review the data collected and aggregated under 115.87 to evaluate and enhance the effectiveness of their sexual abuse prevention, detection, and response policies and training. The PCM states that their role is to prepare an annual report for the Warden and the PREA Coordinator, using the facility's data to identify trends and determine if any corrective actions are needed.

The Auditor reviewed additional documentation of corrective action plans from the previous two years.

**115.88 (b): Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.**

115.88 (b)-1 IDOC confirmed that the annual report includes a comparison of the current year's data and corrective actions with those from prior years.

115.88 (b)-2 IDOC confirmed during this audit that the annual report provides an assessment of the agency's progress in addressing sexual abuse.

**115.88 (c): The agency's report shall be approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means.**

115.88 (c)-1 IDOC confirmed that the agency makes its annual report readily available to the public at least annually through its website.

By examination, this Auditor confirmed that IDOC makes its annual report readily available to the public at least annually through its website.

115.88 (c)-2 If NO, the agency makes it available through other means. Not applicable.

115.88 (c)-3 The annual reports are approved by the agency head.

During this reporting period, the Auditor interviewed the Agency Head. The Agency

	<p>Head confirmed that he reviews the annual reports before they are posted on the agency's official website.</p> <p><b>115.88 (d): The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.</b></p> <p>115.88 (d)-1 When the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.</p> <p>115.88 (d)-2 The agency indicates the nature of material redacted.</p> <p>IDOC confirmed during this audit that the agency would indicate the nature of any material redaction.</p> <p>During this reporting period, the Auditor interviewed the PREA Coordinator. The PREA Coordinator explained that the types of material typically redacted from the annual report include PII and other sensitive information. If such information is redacted, the agency would indicate the nature of the redaction.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section C. Data Review for Corrective Action (effective 8/15/2024), pages 47- 48.</li> <li>3. Interviewed the PREA Coordinator</li> <li>4. Interview with the PREA Compliance Manager</li> <li>5. Interview with the Agency Head</li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.89 (a): The agency shall ensure that data collected pursuant to § 115.87 are securely retained.</b></p> <p>115.89 (a)-1 The agency ensures that incident-based and aggregate data are securely retained.</p>

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Data Storage, Publication, and Destruction (effective 8/15/2024), page 48.

During this audit, the Auditor interviewed the PREA Coordinator. He confirmed that the agency reviewed data collected and aggregated under 115.87 to evaluate and enhance the effectiveness of its sexual abuse prevention, detection, and response policies, as well as training. Additionally, data is protected through encryption and the issuance of individual passwords by an agency's information technology administrator. Access is based on the individual's role and responsibilities. When needed, the agency takes corrective action continuously based on these data.

**RECORD STORAGE**

During the site review, the Auditor:

- Observed the physical storage area of any information/documentation collected and maintained in hard copy under the PREA Standards to determine if the area is secured (e.g., lock and key).
- Observed electronic safeguards of any information/documentation collected and maintained electronically under the PREA Standards (e.g., risk screening information) to determine how access to the information is secured (e.g., password-protected, accessible only in certain areas, role-based security).

**115.89 (b): The agency shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means.**

115.89 (b)-1 Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.

IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Data Storage, Publication, and Destruction (effective 8/15/2024), page 48.

115.89 (b)-2 If NO, the agency makes it available through other means. Not applicable.

During this audit reporting period, this Auditor examined the agency's website to confirm that as stated in IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Data Storage, Publication, and Destruction (effective 8/15/2024), page 48 aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.

**115.89 (c): Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.**

115.89 (c)-1 Before making aggregated sexual abuse data publicly available, the

	<p>agency removes all personal identifiers.</p> <p>115.89 (c)-2 The agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.</p> <p>During this audit reporting period, this Auditor examined the agency's website to confirm that as stated in IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Data Storage, Publication, and Destruction (effective 8/15/2024), page 48 aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website. The PREA Coordinator confirmed that the agency maintains sexual abuse data collected under §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.</p> <p><b>115.89 (d): The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</b></p> <p>Refer to 115.89 (c)-2.</p> <p><b>Evidence relied upon:</b></p> <ol style="list-style-type: none"> <li>1. Pre-audit questionnaire</li> <li>2. Facility tour and site review <ol style="list-style-type: none"> <li>1. Storage</li> </ol> </li> <li>3. IDOC Policy 02-01-115 Sexual Abuse Prevention, Section D. Data Storage, Publication, and Destruction (effective 8/15/2024), page 48.</li> <li>4. Internet search <ol style="list-style-type: none"> <li>1. Sample of publicly available sexual abuse data to check for identifiers</li> <li>2. Availability</li> </ol> </li> </ol> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>115.401 (a): During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on</b>

**behalf of the agency, is audited at least once.**

The Auditor confirmed that, during the three years starting on August 20, 2013, and during each subsequent three-year period, the IDOC ensured that each facility operated by the agency or by a private organization on its behalf was audited at least once.

**115.401 (b): During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.**

The Auditor confirmed that, during each year starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency or by a private organization on its behalf is audited.

**115.401 (h): The auditor shall have access to, and shall observe, all areas of the audited facilities.**

The Auditor confirmed that she had access to, and shall observe, all areas of the audited facilities.

**115.401 (i): The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).**

The Auditor confirmed she was permitted to request and obtain copies of any relevant documents, including electronically stored information.

**115.401 (m): The auditor shall be permitted to conduct private interviews with inmates.**

The Auditor confirmed she was permitted to conduct private interviews with inmates.

**115.401 (n): Inmates shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.**

The Auditor confirmed during interviews with inmates that they were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. The Auditor received zero correspondence from Wabash.

**Evidence relied upon:**

1. Pre-audit questionnaire

**Conclusion:**

The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's

	analysis and reasoning, and the Auditor's conclusions.
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>115.403 (f): The agency shall ensure that the auditor's final report is published on the agency's website if it has one, or is otherwise made readily available to the public.</b></p> <p>Through an internet search, the Auditor determined that the IDOC has published all Final Audit Reports on its agency website and made them publicly available. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT.</p> <p><b>Conclusion:</b></p> <p>The narrative above includes a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the Auditor's analysis and reasoning, and the Auditor's conclusions.</p>

**Appendix: Provision Findings****115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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**115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
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**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
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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
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**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.)	yes
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**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	yes
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	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.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	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?	no
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	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
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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

<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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	na

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	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
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	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	yes

	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?	
	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
<b>115.17 (b) Hiring and promotion decisions</b>		
	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
<b>115.17 (c) Hiring and promotion decisions</b>		
	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
<b>115.17 (d) Hiring and promotion decisions</b>		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	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.)	no
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	

	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.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	

	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
<b>115.22 (b) Policies to ensure referrals of allegations for investigations</b>		
	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
<b>115.22 (c) Policies to ensure referrals of allegations for investigations</b>		
	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).)	na
<b>115.31 (a) Employee training</b>		
	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
<b>115.31 (b)</b>	<b>Employee training</b>	
	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
<b>115.31 (c)</b>	<b>Employee training</b>	
	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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	

	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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	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
<b>115.33 (b)</b>	<b>Inmate education</b>	
	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
<b>115.33 (c)</b>	<b>Inmate education</b>	
	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
<b>115.33 (d)</b>	<b>Inmate education</b>	
	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
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	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
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	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	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(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
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	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	yes

	suspicious 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.)	
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	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.)	na
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
<b>115.42 (a) Use of screening information</b>		
	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
<b>115.42 (b) Use of screening information</b>		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c) Use of screening information</b>		
	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	yes

	present management or security problems?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	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	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (c)</b>	<b>Protective Custody</b>	

	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
<b>115.43 (d) Protective Custody</b>		
	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
<b>115.43 (e) Protective Custody</b>		
	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
<b>115.51 (a) Inmate reporting</b>		
	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
<b>115.51 (b) Inmate reporting</b>		
	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	yes

	anonymous upon request?	
	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
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	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
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	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.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	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	yes

	this standard.)	
	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
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	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
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	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,	na

	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.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	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
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	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	yes

	abuse or sexual harassment or retaliation?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	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
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	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	yes

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	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	yes

	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?	
	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
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	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
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations	yes

	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).)	
	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
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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).)	na
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	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.)	yes
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	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	yes

	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?	
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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	yes

	evidence sufficient to substantiate the allegation?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse</b>	

	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.403</b>	<b>Audit contents and findings</b>	

(f)			
	<table><tr><td data-bbox="306 165 1289 577">The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</td><td data-bbox="1289 165 1498 577">yes</td></tr></table>	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes
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