

# PREA Facility Audit Report: Final

**Name of Facility:** Troop F Westbrook

**Facility Type:** Lockups

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 06/17/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Latera M. Davis	<b>Date of Signature:</b> 06/17/2024

AUDITOR INFORMATION	
<b>Auditor name:</b>	Davis, Latera
<b>Email:</b>	laterad@yahoo.com
<b>Start Date of On-Site Audit:</b>	05/01/2024
<b>End Date of On-Site Audit:</b>	05/01/2024

FACILITY INFORMATION	
<b>Facility name:</b>	Troop F Westbrook
<b>Facility physical address:</b>	315 Spencer Plains Road, Westbrook, Connecticut - 06498
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Sheriff/Chief/Director</b>	
<b>Name:</b>	Lt. Adam Litwin #064
<b>Email Address:</b>	adam.litwin@ct.gov
<b>Telephone Number:</b>	860-779-4900

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	4
<b>Current population of facility:</b>	0
<b>Average daily population for the past 12 months:</b>	3
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Both females and males
<b>Age range of population:</b>	18-70
<b>Facility security levels/detainee custody levels:</b>	Temp Holding
<b>Does the facility hold juveniles or youthful detainees?</b>	Yes
<b>Number of staff currently employed at the facility who may have contact with</b>	90

<b>detainees:</b>	
<b>Number of individual contractors who have contact with detainees, currently authorized to enter the facility:</b>	0
<b>Number of volunteers who have contact with detainees, currently authorized to enter the facility:</b>	0

<b>AGENCY INFORMATION</b>	
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<b>Name of agency:</b>	Connecticut State Police
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	1111 Country Club Road, Middletown, Connecticut - 06457
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

<b>Agency Chief Executive Officer Information:</b>	
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<b>Name:</b>	Colonel Daniel Loughman
<b>Email Address:</b>	Daniel.Loughman@ct.gov
<b>Telephone Number:</b>	

<b>Agency-Wide PREA Coordinator Information</b>			
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<b>Name:</b>	Susan Cecil	<b>Email Address:</b>	Susan.cecil@ct.gov
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<b>Facility AUDIT FINDINGS</b>	
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<b>Summary of Audit Findings</b>	
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The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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

**Number of standards exceeded:**

1

- 115.111 - Zero tolerance of sexual abuse and sexual harassment

**Number of standards met:**

34

**Number of standards not met:**

0

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-05-01
2. End date of the onsite portion of the audit:	2024-05-01

#### 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:	Just Detention The Connecticut Alliance to End Sexual Violence

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	4
15. Average daily population for the past 12 months:	3
16. Number of inmate/resident/detainee housing units:	0
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input 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**

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	0
<b>37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	0

<p><b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>No text provided.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>50</p>

<p><b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>0</p>
<p><b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>0</p>
<p><b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>No text provided.</p>
<p><b>INTERVIEWS</b></p>	
<p><b>Inmate/Resident/Detainee Interviews</b></p>	
<p><b>Random Inmate/Resident/Detainee Interviews</b></p>	
<p><b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>0</p>
<p><b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p> <input type="checkbox"/> Age  <input type="checkbox"/> Race  <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)  <input type="checkbox"/> Length of time in the facility  <input type="checkbox"/> Housing assignment  <input type="checkbox"/> Gender  <input type="checkbox"/> Other  <input checked="" type="checkbox"/> None </p>
<p><b>If "None," explain:</b></p>	<p>There were no detainees onsite during the onsite process.</p>



<b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	There were no detainees onsite during the onsite process.
<b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>a. Explain why it was not possible to conduct the minimum number of random inmate/resident/detainee interviews:</b>	There were no detainees onsite during the onsite process.
<b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	0
<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>59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</b>	0

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:</b></p>	<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/detainees.</p> <p><input type="checkbox"/> The inmates/detainees in this targeted category declined to be interviewed.</p>
<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/detainees).</b></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>60. 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></p>	<p>0</p>
<p><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>	<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>
<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></p>	<p>There were no detainees onsite during the onsite process.</p>

<p><b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><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>	<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>
<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><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>	<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>

<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><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>	<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>
<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><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>	<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>

<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><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>	<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>
<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><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>	<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>

<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>0</p>
<p><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>	<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>
<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>0</p>
<p><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>	<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>

<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>
<p><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>	<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>
<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></p>	<p>There were no detainees onsite during the onsite process.</p>
<p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>No text provided.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>10</p>

<p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>a. Select the reason(s) why you were unable to conduct the minimum number of RANDOM STAFF interviews: (select all that apply)</b></p>	<p><input type="checkbox"/> Too many staff declined to participate in interviews.</p> <p><input type="checkbox"/> Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles).</p> <p><input checked="" type="checkbox"/> Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews.</p> <p><input type="checkbox"/> Other</p>
<p><b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>The troopers are field based and are not held onsite in the building. Several troopers were called off the road to complete the interviews in addition the auditor contacted additional troopers who were not onsite.</p>



**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.

<b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	20
<b>76. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>78. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>79. Were you able to interview the PREA Compliance Manager?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

**80. Select which SPECIALIZED STAFF roles were interviewed as part of this 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>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No text provided.
<b>SITE REVIEW AND DOCUMENTATION SAMPLING</b>	
<b>Site Review</b>	
<p>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.</p>	
<b>84. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Was the site review an active, inquiring process that included the following:</b>	
<b>85. 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)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p><b>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>88. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>No text provided.</p>
<p><b>Documentation Sampling</b></p>	
<p>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.</p>	
<p><b>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>No text provided.</p>

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

## Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

**Sexual Abuse and Sexual Harassment Investigation Outcomes**

**Sexual Abuse Investigation Outcomes**

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	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.

**96. 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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

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

**Sexual Abuse Investigation Files Selected for Review**

<b>98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:</b>	0
<b>a. Explain why you were unable to review any sexual abuse investigation files:</b>	There were no reported allegations.



<p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

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

<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>Staff-on-inmate sexual harassment investigation files</b></p>	
<p><b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b></p>	<p>There were no reported allegations.</p>

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the 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

116. 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

121. Who paid you to conduct this audit?

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

Identify the name of the third-party auditing entity

Diversified Correctional Services

<b>Standards</b>
<p><b>Auditor Overall Determination Definitions</b></p> <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>
<p><b>Auditor Discussion Instructions</b></p> <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>

<b>115.111 Zero tolerance of sexual abuse and sexual harassment</b>
<p><b>Auditor Overall Determination:</b> Exceeds Standard</p>
<p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination: Supporting Documents, Interviews and Observations: Documentation:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· Agency Organization Chart</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>· Agency PREA Coordinator</li> </ul> <p>Compliance Determination by Provisions and Corrective Actions: 115.111 (a)</p>

An 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. The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of detainees.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.1, Sec B.): "The Department of Emergency Services and Public Protection (DESPP), Division of State Police, has zero tolerance toward all forms of sexual abuse and sexual harassment (28 CFR 115.111). The Division of State Police will not tolerate retaliation against any person who reports sexual abuse or sexual harassment or who cooperates with a sexual abuse or sexual harassment investigation".
- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.3, Sec D.): "The PREA Coordinator has sufficient authority to develop, implement, and oversee the department's effort to comply with the PREA standards in all department lockups".
- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.1-3, Sec C.): provides a detailed list of definitions related to sexual abuse and sexual harassment.

Corrective Actions:

- N/A. There are no corrective actions for this provision.

A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.111 (b)

An agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- The agency/facility has PREA policies which ensure the sexual safety of facility

detainees and staff. The policy includes zero-tolerance philosophy from the agency central office through the front-line staff in its facilities. The agency/facility PREA coordinator has direct access to the head of the agency and regular communication with the senior leadership team.

- As reported in the PAQ, the agency employs or designates an upper-level, agency-side PREA coordinator. It was further reported that the PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities. The position of the PREA Coordinator is the Clinical Performance and Outcomes Director.

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.3-4, Sec D.): provides a description of the designation and responsibilities of the PREA Coordinator.

- Agency Organization Chart confirms the chain of command for the agency PREA Coordinator.

- In addition to the agency having a PREA Coordinator there is an agency wide PREA Compliance Manager that assists in the process of monitoring the agency for compliance and providing the necessary tools and resources to staff.

Interviews:

- PREA Coordinator: The interviewed staff reported that they have enough time to complete job duties. It was also reported that District commanders conduct annual spot inspections of each troop in their district to ensure we are following our PREA policy and all PREA standards. Troops have a sergeant assigned as the PREA liaison. The sergeants are responsible for day-to-day PREA spot checks and ensuring compliance. When there is a complaint, I am notified and follow along the investigation through closing. If there are any identifying issues with complying with the PREA standards, I look at the PREA standard, our policy, and identify if there is a need to change practice within our agency. Wherever there is a need for change, I will facilitate the change or coordinate additional training.

Corrective Actions:

- N/A. There are no corrective actions for this provision.

A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard. The agency exceeds the requirements in that there is an agency PREA Coordinator and supportive agency level staff to monitor, review and ensure compliance with the standards.

Overall Findings:

	<p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and Detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard. The agency exceeds the requirements in that there is an agency PREA Coordinator and supportive agency level staff to monitor, review and ensure compliance with the standards.</p>
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<b>115.112</b>	<b>Contracting with other entities for the confinement of detainees</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> </ul> <p>Findings (By Provision):</p> <p>115.112 (a). As reported in the PAQ, the agency has not entered or renewed any contract for the confinement of detainees. The number of contracts for the confinement of detainees 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: 0. The number of above contracts that DID NOT require contractors to adopt and comply with PREA standards: 0.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· The agency/facility does not contract with another entity for the confinement of its Detainees.</li> </ul> <p>Corrective Actions:</p> <ul style="list-style-type: none"> <li>· N/A. There are no corrective actions for this provision.</li> </ul> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>115.112 (b). As reported in the PAQ, the agency has not entered or renewed any</p>



	<p>contract for the confinement of detainees.</p> <p>The facility has demonstrated substantial compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· The agency/facility does not contract with another entity for the confinement of its Detainees.</li> </ul> <p>Corrective Actions:</p> <ul style="list-style-type: none"> <li>· N/A. There are no corrective actions for this provision.</li> </ul> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.113</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <p>Pre-Audit Questionnaire (PAQ)</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· PREA Notice and Screening Form Blank</li> <li>· Staffing Plan</li> </ul> <p>Interviews:</p> <p>Director or Designee</p> <p>PREA Coordinator</p> <p>Security Staff (3)</p>

Findings (By Provision):

115.113(a). As reported in the PAQ, 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. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of detainees: 3. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of detainees on which the staffing plan was predicated: 4.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standards because:

- The facility has cameras to supplement supervision of detainees. They are on the inside and outside area of the facility to help eliminate blind spots and to assist in monitoring detainees. Cameras monitor for site and sound. Additionally, staff can deploy body cameras if needed. Troopers are expected to keep body cameras on while in the lock up area.
- Staffing Plan: The facility did not have a PREA staffing plan, however during the audit process the agency developed a staffing plan for the site.
- Site Review: Upon observation the auditor observes adequate staffing levels at the site. The staffing levels for field troopers will vary based on the troopers being onsite upon the detaining of an individual. When there is a detainee onsite staff are located in direct proximity, conducting the processing of the detainee. A staff member in dispatch provides continuous monitoring of the cameras. The cameras have sound and site capabilities. When detainees are in a holding cell and using the restroom, the camera blurs out the area below the waist (automatically). Juveniles are held in a separate room separate from adults. Movement of a detainee is restricted to the holding area and to the release waiting room. During informal and formal conversations, staff reported that they typically do not have individuals onsite for more than an hour. It was further reported that they will also try to separate the male and female detainees; particularly if they are onsite for more than one hour. Additionally it was reported that they typically do same gender transports and direct supervision.

Interviews

- Chief, Sheriff, or Director- The interviewed staff reported that the facility has a staffing plan, there is minimal staffing onsite to include a desk trooper and a supervisor. A desk trooper does consistent video monitoring, and it is recorded. The plan is documented and located in the dispatch area. The staffing plan varies from shift to shift and weekdays to weekends. Video monitoring is constantly occurring in the prison processing area regardless of staffing levels. The site does not house detainees any longer than necessary. Detainees are held until transported to a correctional facility. Every effort is made to separate detainees of the opposite sex and juveniles are not placed in the adult area. Additional staff can be called as

necessary. The staffing plan will be reviewed as necessary and as problem arise. Troopers are on call 24/7.

- PREA Coordinator - The interviewed staff reported that they are involved in the development of the staffing plan. Our agency continuously monitors 24/7 with video monitoring in addition to body cameras worn by our troopers and officers. We have a desk officer assigned to each shift and it is their responsibility to monitor all activity in the processing room and temporary holding facilities.

- a. Each lockup has single cell housing. The minimum staffing outlined in the plan is determined based upon the physical layout of the facility. If the facility is full, the plan outlines where the overflow of detainees would be transported.

- b. Each lockup has single cell housing. If there ever was an overflow of detainees and we are not able to house them appropriately, we transport them to other state/local facilities or DOC.

- c. We are a temporary holding facility with single cell housing. If there was a substantiated incident of sexual abuse it would most likely be against an employee, who would be terminated. If there were numerous unsubstantiated incidents, we may determine the need for more supervision at such location and there would be a constant review of the camera systems by my unit.

- d. We will make changes as we deem necessary.

Corrective Actions:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.113(b). N/A-As reported in the PAQ, there were no deviations in the staffing plan.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standards because:

- In situations in which a deviation is made from the staffing plan, written justification for such deviation is documented and sent to the PREA coordinator by the facility supervisors.

Interviews

- Sheriff, Chief, or Director - The interviewed staff reported that the site has mandatory minimums. If an unforeseen event was to take place which would cause us to fall below mandatory minimums, another Trooper will be called to return staffing levels to minimum.

Corrective Actions:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.113(c). As reported in the PAQ, at least once every year the facility, reviews the staffing plan to see whether adjustments are needed in (1) the staffing plan, (2) prevailing staffing patterns, (3) the deployment of video monitoring systems and other monitoring technologies, or (4) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standards because:

- Staffing Plan: The facility did not have a PREA staffing plan, however during the audit process the agency developed a staffing plan for the site.

Interviews

- PREA Coordinator - The interviewed staff reported that the staffing plan is reviewed at least once every year. We have a command meeting to discuss a review of each staffing plan. At the meeting we also discussed any necessary adjustments.

Corrective Actions:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.113(d). As reported in the PAQ, the facility utilizes a screening process required by § 115.141 to identify vulnerable detainees. Vulnerable detainees are provided with heightened protection.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standards because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.4, Sec E.): "All detainees shall be screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees. 1. 2. Troopers and police officers shall ask the detainee about his or her own perception of vulnerability; and the following criteria shall also be considered, to the extent that the information is available: [a] [b] [c] [d] [e] Whether the detainee has a mental,

physical, or developmental disability. The age of the detainee. The physical build and appearance of the detainee. Whether the detainee has previously been incarcerated. The nature of the detainee’s alleged offense and criminal history”.

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.5, Sec E.): “If after a risk assessment screening, as outlined in section E(2) above, any trooper or police officer determines that a detainee is identified as a vulnerable detainee, the trooper or police officer shall provide such detainee with heightened protection. Unless no such measure is determined to be feasible after consultation with the duty supervisor, such protection measures shall include (in order of preference): 1. 2. 3. Single-cell housing; Continuous direct sight and sound supervision; or Placement in a cell actively monitored on video by an employee sufficiently proximate to intervene. Such heightened protection measure(s) for the detainee shall continue to be employed for the duration of the detainment, and any post-screening transportation (i.e. prisoner transport) provided in a department vehicle or vehicle operated by a police officer under the jurisdiction and direction of the Division of State Police to or from court, a medical facility, a correctional center, or other entity”.

- PREA Notice and Screening Form (20): The screening tool and process used confirms the process to assess detainees for vulnerabilities.

#### Interviews

Security Staff - The interviewed staff reported that if vulnerable staff are identified during screening the actions taken to protect them include keep separated, increase monitoring, go over the PREA information with them, and provide them for community related victim services if needed. Juveniles would always be kept separate, and we try to separate genders as well.

#### Corrective Actions:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

#### Overall Findings:

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The following evidence was analyzed in making compliance determination:

Supporting Documents, Interviews and Observations:

Documentation:

- Pre-Audit Questionnaire
- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures
- Juvenile Arrest (Resolving Juvenile Matters)
- Detainee List over 12 months

Interviews:

- Sheriff, Chief of Director
- Random Sample of Staff (10)

Compliance Determination by Provisions and Corrective Actions:

115.114 (a). An 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. The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of detainees.

In the past 12 months, the number of juveniles/youthful detainees held in the facility: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.5, Sec E.): "Juveniles and youthful detainees (under the age of 18) shall be held separately from adult detainees."
- Juvenile Arrest (Resolving Juvenile Matters)-provides police officers with a number of options when handling incidents involving a child who is accused or has been convicted of committing a crime.

	<ul style="list-style-type: none"> <li>· Detainee List over 12 months: The auditor reviewed the detainee list onsite. The logbook contains a list of all detainees over the past year.</li> <li>· Site Review: The auditor reviewed the location in which juveniles' detainees would be held. The room is separate from the adults and does not contain any holding cells. The room has camera observations, and it was further reported that the juvenile will be monitored on a continuous basis by staff.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>· Sheriff, Chief, or Director - The interviewed staff reported that the site does not have segregated housing.</li> <li>· Random Sample of Staff - Troopers stated that juvenile detainees are held separately from adult detainees. It was also reported that they are typically not held in the lock up area but in a room with a trooper until transferred or released.</li> <li>· Juveniles/Youthful Detainees - There were no juvenile/youthful detainees while onsite.</li> </ul> <p>Corrective Actions:</p> <ul style="list-style-type: none"> <li>· N/A. There are no corrective actions for this provision.</li> </ul> <p>A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and Detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.115</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul>

· Policy: Strip Searches and Body Cavity Searches

Interviews:

Random Sample of Staff (10)

Compliance Determination by Provisions and Corrective Actions:

115.115 (a). As reported in the PAQ, the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of detainees. In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of detainees: 0

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

· The facility does not conduct strip searches or body cavity searches. Such searches would only occur in exigent circumstances such as contraband or weapon search.

· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.5, Sec E (4).): "Troopers and police officers shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (Refer to A&O § 19.2.8). Consistent with A&O § 19.01.17(4)d, detainees shall be enabled to shower, perform bodily functions, and change clothing without non-medical employees of the opposite gender viewing the detainee's breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. 1. Employees of the opposite gender of the detainee shall announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing".

· Audit Site Review: During the site review the auditor observed the intake/ processing area. The area is a small location that conducts processing for detainees. The detainees are onsite for a limited time frame typically of one hour for processing. Unless exigent circumstances strip searches would not occur. Through informal conversation the staff reported that they seek to first have same gender searches along with observation.

Corrective Actions:

· N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.115 (b). As reported in the PAQ, facility policy does not require that all cross-gender strip searches and cross-gender visual body cavity searches be documented. It should be noted that the site does not conduct said searches.



The facility has demonstrated compliance with this provision of the standard because:

- The facility does not conduct strip searches or body cavity searches except in exigent circumstances.
- Policy: Strip Searches and Body Cavity Searches provides guidelines of the strip search procedures, and all strip searches shall be conducted by the same sex as the arrested person.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Corrective Action:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.115 (c). As reported in the PAQ, the facility has implemented policies and procedures that enable detainees 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). Policies and procedures require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.5, Sec E (4).): "Troopers and police officers shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (Refer to A&O § 19.2.8). Consistent with A&O § 19.01.17(4)d, detainees shall be enabled to shower, perform bodily functions, and change clothing without non-medical employees of the opposite gender viewing the detainee's breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. 1. Employees of the opposite gender of the detainee shall announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing".
- Site Review: Unless exigent circumstances, detainees should not be undressed at the site. There is a private bathroom and there are toilets in the

holding cells. The toilets have direct observation however it was reported that if placed in a holding cell the same gender staff would conduct monitoring. The auditor observed the camera set up and spoke to the dispatch team regarding observation of the toilet. Staff reported that the camera will automatically fuzzi, waist down, when camera is near the toilet area.

#### Interviews

- Detainee Interview Questionnaire - There were no detainees onsite during the audit process.
- Random Sample of Staff - The troopers reported that detainees are held in a single person holding cell while being processed and if needed to use restroom a door that separates the processing area and the holding cells can be closed. Troopers stated they do not normally announce themselves due to the small area and detainees are only in processing area for brief period before being transported to another location or released. It was further reported that while there are cameras in the area, the cameras block near the toilet. The auditor was able to verify through onsite testing.

#### Corrective Action:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.115 (d). As reported in the PAQ, the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex detainee for the sole purpose of determining the detainee's genital status. There have been no such searches in the past 12 months

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p.5, Sec E (4).): "Troopers and police officers shall not search or physically examine any a transgender or intersex detainee for the sole purpose of determining the detainee's genital status".
- PREA Audit Site Observation:
  - o During the site review, the auditor observed the facility critical function of cross-gender viewing. The auditor observes areas where detainees may be held. Detainees are not held overnight and there is no shower area. They have access to a toilet in a holding cell and a private bathroom. The toilets can have direct observation however the cameras blur out near the toilet area.

- o During the site review, the auditor observed the facility critical function of cross-gender announcements. It was further determined that cross-gender announcements do not occur as they will deploy same gender staff in the holding area. The auditor observed that there are both genders housed at the site.
- o During the site review, the auditor observed the facility critical function of cross-gender viewing. The auditor viewed the placement and angle of electronic surveillance monitoring in the main control room. The cameras do not show Detainees using the restroom.
- o During the site review, the auditor observed the facility critical function of the physical storage area of any information/documentation collected and maintained as hard copy. The hard copies of the PREA Screening are kept in the detainees' files and maintained in lock file drawer and then moved to the headquarters storage location. Files were onsite for the audit process.

#### Interviews

- Random Sample of Staff - The troopers reported that CT State Police prohibits staff from searching or physically examining a transgender or intersex detainee for the purpose of determining that detainee's genital status.
- Transgender/Intersex Detainees - There were no transgender/intersex detainees onsite during the onsite audit process.

#### Correction Actions:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.115 (e). As reported in the PAQ, the percent of all law enforcement staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex detainees in a professional and respectful manner, consistent with security needs: 100

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Training Curriculum (module 6 Handcuffing): the training curriculum provides documentation that troopers received training on cross gender pat down searches of transgender and intersex detainees.
- Staff Training Log: the training log provides documentation that troopers received training on cross gender pat down searches of transgender and intersex detainees.

	<p>Interviews</p> <ul style="list-style-type: none"> <li>· Random Sample of Staff - The training for troopers during the academy included instructions on performing pat-down searches for individuals of different genders, including transgender and intersex individuals. This training emphasized using the back of the hand, ensuring body camera is recording and if possible, search person in the front of cruiser to ensure the dash camera is also recording. Troopers reported specifically that a cross-gender search should only be conducted if it's not possible to have another trooper of the same gender perform the search. Troopers stated that they have received in the last year they have reviewed training in PowerDMS regarding searching.</li> </ul> <p>Corrective Actions:</p> <ul style="list-style-type: none"> <li>· N/A. There are no corrective actions for this provision.</li> </ul> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.116</b>	<b>Detainees with disabilities and detainees who are limited English proficient</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Interviews:</p> <p>Agency Head</p>

Random Sample of Staff (10)

Findings (By Provision):

115.116 (a). As reported in the PAQ, the agency has established procedures to provide disabled detainees 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.5-6, Sec E (6).): "Detainees with disabilities include detainees who are deaf or hard of hearing, blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities. Troopers and police officers shall take appropriate steps to ensure that detainees with disabilities or detainees with limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include:

1. When necessary to ensure effective communication with detainees who are deaf or hard of hearing, or who are limited English proficiency, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

2. Providing written materials in formats or through methods that ensure effective communication with detainees with disabilities, including detainees who have intellectual disabilities, limited reading skills, or who are blind or have low vision".

· The agency has documents in Spanish and English. The site utilizes a language line service if there is limited English speaking individual.

· Site Review: During the onsite audit the auditor informally discussed with staff how interpreter services are addressed. The staff would seek interpreter services through Language Line. The auditor observed PREA related information in the lock up area in English/Spanish.

Interviews

· Agency Head - The agency head or designee reported that if needed officers will be asked to assist with translation services or access the language line services.

· Detainees (with disabilities or who are limited English proficient) - There were no limited English proficient or disabled detainees onsite during the onsite audit process.

Corrective Actions:

N/A. There are no corrective actions.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.116 (b). As reported in the PAQ, the agency has established procedures to provide detainees 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 or sexual harassment.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.5-6, Sec E (6).): "Detainees with disabilities include detainees who are deaf or hard of hearing, blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities. Troopers and police officers shall take appropriate steps to ensure that detainees with disabilities or detainees with limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include:

1. When necessary to ensure effective communication with detainees who are deaf or hard of hearing, or who are limited English proficiency, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

2. Providing written materials in formats or through methods that ensure effective communication with detainees with disabilities, including detainees who have intellectual disabilities, limited reading skills, or who are blind or have low vision".

- Staff Training: provided adequate information on how troopers would appropriately engage individuals with disabilities and/or limited English proficient.

- Site Review: Site Review: During the onsite audit the auditor informally discussed with staff how interpreter services are addressed. It was determined that staff are aware of accessing the language line services.

Interviews

- Detainees (with disabilities or who are limited English proficient) – There were no limited English proficient or disabled detainees onsite during the onsite audit process.

Corrective Actions:

N/A. There are no corrective actions.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.116 (c). As reported in the PAQ, the agency policies prohibit other use of detainee interpreters, detainee readers, or other type of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties, or the investigation of the detainees' allegations. Furthermore, the agency or facility does not document the limited circumstances in individual cases where detainee interpreters, readers, or other types of detainee assistants are used. As those circumstances have not occurred.

In the past 12 months, the number of instances where detainee interpreters, readers, or other types of detainee assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the detainee's safety, the performance of first-response duties under § 115.164, or the investigation of the detainee's allegations: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- The program has not relied on detainee interpreters, detainee readers, or other types of detainee assistants.
- All staff indicated that they would not let detainees serve as interpreters. The facility has staff interpreters. The facility will use language line services if a member of staff is not available.
- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.5-6, Sec E(6).): "Troopers and police officers shall not rely on other detainees for assistance with interpreting, reading, or similar activities except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under section G of this policy, or the investigation of a detainee's allegations of sexual abuse, sexual harassment, or retaliation".

Interviews

- Random Sample of Staff - The interviewed troopers affirmed that they would not rely on another detainee to interpret or assist a disabled or limited English proficiency detainee in reporting any allegations of sexual abuse or harassment. Instead, the troopers stated that arrangements would be made for a staff member to provide interpretation assistance if needed, they would contact the language line, call local police, or dispatch.

	<p>Detainees (with disabilities or who are limited English proficient) – There were no limited English proficient or disabled detainees onsite during the onsite audit process.</p> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant</p>
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<b>115.117</b>	<b>Hiring and promotion decisions</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· Personnel File:</li> <li>· 5-year background checks</li> <li>· Initial Background Check</li> <li>· Hiring/Application Process</li> </ul> <p>Interviews:</p> <p>Administrative (Human Resources) Staff</p> <p>Findings (By Provision):</p> <p>115.117 (a). As reported in the PAQ, the agency policy does not prohibit hiring or promoting anyone who may have contact with detainees and prohibits enlisting the</p>



services of any contractor who may have contact with detainees who:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.
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).

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.15-16, Sec O.): "The department shall not hire or promote anyone who may have contact with detainees, and shall not enlist the services of any contractor who may have contact with detainees who: (a) (b) (c) 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); Has been convicted of engaging or attempting to engage in sexual activity 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 Has been civilly or administratively adjudicated to have engaged in the activity described in subsection O(1)(b) above".
- Personnel Files

Corrective Actions:

N/A. There are no corrective actions.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.117 (b). As reported in the PAQ, 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 detainees.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.15-16,

Sec O.): states that "The department 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 detainees".

#### Interviews

- Administrative (Human Resources) Staff - The interviewed staff reported that the agency does consider prior incidences of sexual harassment. It was further reported that such considerations are outlined in policy.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.117 (c). As reported in the PAQ, the agency policy requires that before it hires any new employees who may have contact with detainees, 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.

In the past 12 months, the number of persons hired who may have contact with detainees who have had criminal background record checks: 10.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.15-16, Sec O.): states that "Before hiring new employees who may have contact with detainees, the department shall: (a) (b) Perform a criminal background records check; and 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".

- Personnel Files

#### Interviews

- Administration (Human Resources Staff): The interviewed staff reported that the agency conducts criminal background checks at the state and federal level, in addition to conducting motor vehicle checks. The agency runs SPRC (State police record check), FLIQ (NLETS criminal history identity, and FLQW (person query form).

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.117 (d). As reported in the PAQ, the agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with detainees. 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 detainees: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.15-16, Sec O.): states that “The department shall also perform a criminal background record check before enlisting the services of any contractor who may have contact with detainees”.

Interviews

- Administration (Human Resources Staff): The interviewed staff reported that the agency conducts criminal background checks at the state and federal level, in addition to conducting motor vehicle checks. The agency runs SPRC (State police record check), FLIQ (NLETS criminal history identity, and FLQW (person query form).

Corrective actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.117 (e). As reported in the PAQ, the 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 detainees, or who may have contact with detainees, or that a system is in place for otherwise capturing such information for current employees.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.15-16, Sec O.): states that “The department shall either conduct criminal background

record checks at least every five (5) years of current employees and contractors who may have contact with detainees or have in place a system for otherwise capturing such information for current employees”.

- 5- year background check (entire troop): The agency is conducting its first PREA Audit, all staff had a refresh background check run on them during the audit phase.

#### Interviews

- Administrative (Human Resources) Staff - The interviewed staff stated that every employee at the agency is required to complete a successful background check prior to being employed officially by the agency. In 2024 the agency is running all active CSP and constables. All personnel will be run again in five years. The agency conducts law enforcement background checks on all state troopers.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.117 (f). As reported in the PAQ, the agency shall ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions 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.

#### Compliance Determination:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.15-16, Sec O.): states that the facility has demonstrated compliance with this provision of the standard because: “The department shall ask all applicants and employees who may have contact with detainees directly about previous misconduct described in subsection O(1) above 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. All employees who may have contact with detainees shall have a continuing affirmative duty to disclose any misconduct described in subsection O(1) above. Material omissions regarding such misconduct described in this section, or the provision of materially false information, shall be grounds for termination”.

#### Interviews

- Administrative (Human Resources) Staff - The interviewed staff reported that new hires and staff considered for promotion in our detainee areas must complete a PREA Employment Questionnaire. It was further reported that law enforcement officers are subjected to a polygraph examination and policy outlines the duty to

disclose any arrests, not only for sexual misconduct.

Corrective Actions:

N/A. There are no corrective actions.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.117. (g). Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

Compliance Determinations:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 16, Sec O.): states that "Material omissions regarding such misconduct described in this section, or the provision of materially false information, shall be grounds for termination."

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.117 (h). 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.

Compliance Determinations:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.15-16, Sec O.): states that "Unless prohibited by law, the department 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".

Interviews

- Administrative (Human Resources) Staff - The interviewed staff stated that the agency does disclose sexual abuse or sexual harassment information to other

	<p>institutional employers about former employees, upon request from that institution. The legal affairs unit will work with HR on said requests.</p> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.118</b>	<b>Upgrades to facilities and technologies</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Camera Upgrade: NCS Work Order</li> </ul> <p>Interviews:</p> <p>Agency Head</p> <p>Director</p> <p>Findings (By Provision):</p> <p>115.118 (a). As reported in the PAQ, the agency/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>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p>

- Camera Upgrade: NCS Work Order

· Site Review: During the site review and interviews with staff there was no information that indicated that the site had made any expansions or modifications.

#### Interviews

- Agency Head - The agency has not made any recent modifications to facilities. If changes were made the agency would follow the PREA and CALEA guidelines.
- Sheriff, Chief, or Director - The interviewed staff reported that there have been no expansions or modifications except replacing computer equipment.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.118 (b). As reported in the PAQ, the facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit. The facility provided documentation of the upgrades made to the video monitoring system.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Upgrade to camera system: Monitor Technology Upgrade Work Orders

· Site Review: During the onsite portion of the audit, the auditor checked the monitoring system. The monitoring system is located in the dispatch area. The office is utilized to watch cameras and make announcements; along with other duties/responsibilities of staff.

#### Interviews:

- Agency Head - The agency continuously monitors all detainees via camera (visual and audio).
- Sheriff, Chief, or Director- The interviewed staff reported that security cameras within the cell block/processing area are always recording, and the cameras are pixelated to maintain privacy of the genital area if detainees use the toilet.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and

	<p>review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.121</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· Crime Scene Evidence</li> <li>· Juvenile Arrest Procedure</li> <li>· Resolving Juvenile Matters Training Log</li> </ul> <p>Interviews:</p> <p>Random Sample of Staff (10)</p> <p>Findings (By Provision):</p> <p>115.121 (a). As reported in the PAQ, the agency/facility is responsible for conducting administrative sexual abuse investigations (including detainee-on-detainee sexual abuse or staff sexual misconduct). The agency/facility is responsible for conducting criminal sexual abuse investigations (including detainee-on-detainee sexual abuse or staff sexual misconduct).</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp.6, Sec H.): “Investigators shall gather and preserve direct and circumstantial</li> </ul>



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. 1. When conducting investigations into allegations of sexual abuse within a department lockup, troopers and police officers shall follow uniform evidence protocol that maximizes the potential for obtaining usable physical evidence. Refer to A&O § 18.2.7 for additional details”.

- Crime Scene Evidence policy provides a detailed description on the protocol on the handling of crime scene (pp.22-23)

#### Interviews

- Random Sample of Staff – The troopers were aware of the agency’s protocols. Troopers were able to describe the process and steps required to obtain usable physical evidence to include separating the detainees in custody, using body camera to record scene, securing the area, bagging clothes in certain bags, notifying the supervisor and transporting too medical. The troopers stated that supervisor or major crime unit would conduct sexual abuse investigations

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.121 (b). As reported in the PAQ, the protocol is developmentally appropriate for youth. The protocol was adapted from or otherwise based on the most recent edition of the DOJ’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011. Employees and volunteers who may have contact with detainees receive basic training regarding how to detect and respond to victims of sexual abuse.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- The Juvenile Arrest Procedures provides guidance on the uniform evidence protocol while working with youth.
- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 15, Sec N.): “The department shall train all troopers and any other employee or volunteer who may have contact with lockup detainees to fulfill their responsibilities under the department’s sexual abuse prevention, detection, and response policies and procedures, including training on: (a) (b) (c) (d) (e) (f) The department’s zero-tolerance policy and detainees’ right to be free from sexual abuse and sexual

harassment; The dynamics of sexual abuse and sexual harassment in confinement settings, including which detainees are most vulnerable in lockup settings; The right of detainees and employees to be free from retaliation for reporting sexual abuse or sexual harassment; How to detect and respond to signs of threatened and actual sexual abuse; How to communicate effectively and professionally with all detainees; and How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities”

- PREA Training for Lockups
- Resolving Juvenile Matters Training Log

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.121 (c). As reported in the PAQ, the facility offers all detainees who experience sexual abuse access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.

The number of forensic medical exams conducted during the past 12 months: 0

The number of exams performed by SANEs/SAFEs during the past 12 months: 0

The number of exams performed by a qualified medical practitioner during the past 12 months: 0

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp. 9-10, Sec H.): When a sexual abuse allegation is made, a forensic medical examination shall be offered to all victims, without financial cost, when evidentiary or medically appropriate. 1. 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. Efforts to provide SAFEs or SANEs shall be documented in the investigator’s report. If a detainee is transported for a forensic examination to a medical facility that offers victim advocacy services, the detainee shall be permitted to use such services to the extent available, consistent with security needs. When a sexual abuse allegation is made by a

juvenile detainee, investigators shall ensure that developmentally appropriate protocols are implemented (e.g., Child Advocacy Center interviews, etc.)”.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.121 (d). As reported in the PAQ, Victims of sexual abuse are transported for forensic examination to an outside hospital. In the past 12 months, the number of detainees transported to outside hospital for forensic examination: 0. In the past 12 months, the number of detainees transported to outside hospital for forensic examination who were offered victim advocacy services: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp. 9-10, Sec H): When a sexual abuse allegation is made, a forensic medical examination shall be offered to all victims, without financial cost, when evidentiary or medically appropriate. 1. 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. Efforts to provide SAFEs or SANEs shall be documented in the investigator’s report. If a detainee is transported for a forensic examination to a medical facility that offers victim advocacy services, the detainee shall be permitted to use such services to the extent available, consistent with security needs.

Interviews

- PREA Coordinator - The interviewed staff reported that victims are transported to a hospital and receive a forensic examination. Our agency does not have medical staff that complete any of these services, so all medical services are always completed by a local hospital.

a. The hospital offers victim advocacy services, and we also provide the victim with a victim advocacy card to continue to receive services in case they are released from the hospital and/or our custody.

b. Victims are encouraged to continue to use advocacy services. There may be limitations if transported to DOC, however DOC has onsite services.

Corrective Actions:

N/A. There are no corrective actions for this provision.

	<p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>115.121 (e). N/A the agency is responsible for investigating administrative and/or criminal allegations of sexual abuse.</p> <p>115.121 (f). Auditor is not required to audit this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>115.121 (g). Auditor is not required to audit this provision.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.122</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· Website</li> </ul> <p>Interviews:</p> <p>Agency Head</p> <p>Investigative Staff (4)</p> <p>Findings (By Provision):</p> <p>115.122 (a). As reported in the PAQ, the agency ensures that an administrative or</p>

criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including detainee-on-detainee sexual abuse or staff sexual misconduct).

In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received: 0.

In the past 12 months, the number of allegations resulting in an administrative investigation: 0.

In the past 12 months, the number of allegations referred for criminal investigation: 0.

Compliance Determinations:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 9, Sec H): "DESPP shall ensure that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment".

Interviews

- Agency Head - The interviewed agency head reported that administrative and criminal allegations are investigated by the agency. A call for service is generated and the appropriate investigator is assigned. The PREA policy is followed.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.122 (b). N/A-the agency does not utilize another law enforcement agency to conduct investigations of allegations of sexual abuse or sexual harassment.

Compliance Determinations:

The facility has demonstrated compliance with this provision of the standard because:

- Policy on website: Home (ct.gov): Agency policy on the investigation process can be located on the agency website.

Interviews

- Investigative Staff - The interviewed staff reported that 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

	<p>115.122 (c). Auditor is not required to audit this provision.</p> <p>115.122 (d). Auditor is not required to audit this provision.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.131</b>	<b>Employee and volunteer training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· PREA Training Curriculum (PPT)</li> <li>· PREA Training Log</li> </ul> <p>Interviews:</p> <p>Random Sample of Staff (10)</p> <p>Findings (By Provision):</p> <p>115.131 (a). As reported in the PAQ, trains all employees and volunteers who may have contact with detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on the agency's zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment. The agency trains all employees and volunteers who may have contact with detainees on the dynamics of sexual abuse and harassment in confinement settings, including which detainees are most vulnerable in lockup settings. The agency trains all employees and volunteers who may have contact with detainees on the right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment.</p> <p>The agency trains all employees and volunteers who may have contact with detainees on how to detect and respond to signs of threatened and actual abuse.</p>

The agency trains all employees and volunteers who may have contact with detainees on how to communicate effectively and professionally with all detainees. The agency trains all employees and volunteers who may have contact with detainees on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp. 15-16, Sec N): "The department shall train all troopers and any other employee or volunteer who may have contact with lockup detainees to fulfill their responsibilities under the department's sexual abuse prevention, detection, and response policies and procedures, including training on: (a) (b) (c) (d) (e) (f) The department's zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment; The dynamics of sexual abuse and sexual harassment in confinement settings, including which detainees are most vulnerable in lockup settings; The right of detainees and employees to be free from retaliation for reporting sexual abuse or sexual harassment; How to detect and respond to signs of threatened and actual sexual abuse; How to communicate effectively and professionally with all detainees; and How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities"
- PREA Training Curriculum (PPT): provides verification that staff receive the above-mentioned training.
- PREA Training Log: provides verification of the above-mentioned training completion.
- Employee PREA Training Acknowledgement New hire and refresher-Acknowledge is completed electronically in the training management system.

Interviews

- Random Sample of Staff - All Interviewed troopers affirmed that they received PREA education as part of the academy training as well as they have regular training in PowerDMS system, Roll Call briefings will discussed updates and handouts are given out by supervisors to cover clear understanding of the Zero Tolerance Policy, the rights of both employees and detainee in custody, recognizing signs and symptoms of sexual abuse, and the procedures for reporting and responding to such incidents. Furthermore, the troopers was able to articulate the appropriate actions to prevent, detect, report, and respond to instances of sexual abuse and harassment include recognizing if they notice physical harm, sadness, shame or isolation. The troopers could articulate ways to avoid inappropriate relationships with detainees as well as ensuring they comply under mandated reporting laws.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.131 (b). As reported in the PAQ, between trainings the agency provides employees and volunteers who may have contact with detainees with information about current policies regarding sexual abuse and sexual harassment. The frequency with which employees and volunteers who may have contact with detainees receive refresher training on PREA requirements: annually.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- PREA Training Log: provides verification of the above-mentioned training completion.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.131 (c). The agency documents that employees who may have contact with detainees understand the training they have received through employee signature or electronic verification.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp. 15-16, Sec N): "All troopers and other employees who may have contact with lockup detainees shall acknowledge either in written or electronic format as designated by the department, that he or she understands the training / refresher information they have received. (a) The department shall maintain documentation confirming that such training / refresher information has been received, and such records shall be made available to the PREA Coordinator".

- New Hire Staff PREA Understanding Acknowledgement Signed-staff sign electronically

- PREA Training Log: provides verification of the above-mentioned training



	<p>completion.</p> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.132</b>	<b>Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· Intake/Vulnerability Assessment Tool (20)</li> <li>· Detainee Logbook (Juvenile/Adult)</li> <li>· Victim pocket card</li> </ul> <p>Interviews:</p> <p>Intake Staff (3)</p> <p>Findings (By Provision):</p> <p>115.132 (a). As reported in the PAQ, during the intake process, employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Of detainees admitted during the past 12 months, the number who were given this information at intake (if available): 1.</p>

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 4, Sec E): "During the initial intake of a detainee into a department lockup facility, the processing trooper or police officer shall read to all detainees the PREA Notification which notifies all detainees of the following: 1. The department's zero-tolerance policy for all forms of detainee sexual abuse and sexual harassment".
- Victim pocket card provides a list/contact information of victim related resources and services.
- Intake Records/Assessment Tool (20)
- PREA Audit Site Review: During the site review the auditor was notified that all troopers can conduct intake. When a trooper brings in a detainee, they will immediately process them. The intake area has three holding cells and processing cell and a separate area for juveniles. The detainee is typically onsite for one hour. The auditor observed that the site had PREA related written documentation and documentation on the walls near the holding area. Through informal conversation it was further reported that the staff will read over the material with the detainee. The troopers also have a pocket card that they can provide the detainee with victim related services. The auditor reviewed the detainee logbook. The site has a separate logbook for juveniles as the adult logbook is open for public recording.

Interviews:

- Intake staff - The interviewed staff reported that detainees are provided a sheet at intake on PREA. The information is provided when conducted the risk assessment and it is also on the Prison Property Form. Further information is posted on the wall in the lock up area.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.132 (b). As reported in the PAQ, that contractors and any inmates who work in the facility are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment upon entering the facility. The number of contractors and inmates currently working in the facility who were given this information upon entering the facility: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard

	<p>because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 15, Sec N): “Any contractors or (DOC) inmates assigned to work in the lockup and who may have contact with lockup detainees shall be informed of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment”.</li> </ul> <p>Interviews</p> <ul style="list-style-type: none"> <li>· Contractor(s) and Inmates who work in the Lockup (who may have contact with Detainees - There were not contractors and inmates who work in the lock up.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.134</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· Specialized Training for Investigators (23)</li> </ul> <p>Interviews</p> <p>Investigative Staff (4)</p> <p>Findings (By Provision):</p>

115.134 (a). As reported in the PAQ, the agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 15, Sec N): "In addition to the general training requirements listed above, the department shall ensure that department investigators that conduct detainee sexual abuse investigations have received training in conducting such investigations in confinement settings. (a) Specialized training shall include: 1. 2. 3. 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".
- PREA Resource Center Specialized Training: Investigating Sexual Abuse in Confinement Settings (9 modules)
- Specialized Training for Investigators (23): confirm that investigators have received specialized training to investigate allegations of sexual abuse in a confinement setting. It should be noted that all troopers are law enforcement personnel.

Interviews

- Investigative Staff - The interviewed staff stated that they have completed training specific to conducting sexual abuse investigations. The training included a wide array of topics from the language that should be used, interview techniques, statistics, application of Miranda and Garrity warnings, the culture of inmates (i.e. code of silence), understanding/recognizing trauma responses in victims, an overview of forensic examinations, evidence collection procedures specific to confinement, different techniques used to interview adults versus juveniles, and finally the outcome following the investigation/report. What will qualify for administrative versus criminal prosecution.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.134 (b). 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- PREA Resource Center Specialized Training: Investigating Sexual Abuse in Confinement Settings (9 modules)
- Specialized Training for Investigators (23): confirm that investigators have received specialized training to investigate allegations of sexual abuse in a confinement setting.

Interviews:

- Investigative Staff - The interviewed staff stated that the topics included in the training were: techniques for interviewing sexual abuse victims, Miranda and Garrity warnings, sexual abuse evidence collection, and criteria to substantiate a case.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.134 (c). As reported in the PAQ, the agency maintains documentation showing that investigators have completed the required training. The number of investigators currently employed who have completed the required training: 50.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- PREA Resource Center Specialized Training: Investigating Sexual Abuse in Confinement Settings (9 modules)
- Specialized Training for Investigators (23): confirm that investigators have received specialized training to investigate allegations of sexual abuse in a confinement setting.
- PREA Training Log

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

	<p>115.134 (d). Auditor is not required to audit this provision.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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115.141	Screening for risk of victimization and abusiveness
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· PREA Screening Risk Assessment (20)</li> </ul> <p>Interviews:</p> <p>Staff Responsible for Risk Screening (3)</p> <p>PREA Coordinator</p> <p>Random Sample of Staff (10)</p> <p>Findings (By Provision):</p> <p>115.141 (a). As reported in the PAQ, Juveniles and youthful detainees shall be held separately from adult detainees. In the past 12 months, the number of juveniles/ youthful detainees held in the facility: 0.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 15, Sec N): “All detainees shall be screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees. 1. Troopers and police officers shall ask the detainee about his or her own perception of vulnerability”.</li> </ul>

- Audit Site Review: During the site review the auditor observed some PREA signage in the main area of the site where detainees are held. It should be noted that the detainees are never held overnight, and they are always under the direct supervision of a trooper.

#### Interviews

- Staff Who Perform Screening for Risk of Victimization – The interviewed staff reported that detainees are interviewed for risk of sexual abuse victimization. The tool is new to the agency. However, the screening will look to see if they feel that they are at risk of being abused, if they have been abused, and whether or not they feel safe.

- Random Sample of Staff – The troopers reported that detainees are held in a single person holding cell. The troopers stated that if they determine a detainee is at high risk of sexual abuse, they would share this information with their supervisor, ensure they are separated from other detainees and notify the next facility, such as the jail, where the detainee is being transferred.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.141 (b). According to the PAQ, the agency has a policy that requires that detainees be screened to assess their risk of sexual victimization or risk of sexually abusing other detainees. In the past 12 months, the number of detainees who were screened for risk of sexual victimization or risk of sexually abusing other detainees: 1.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 4, Sec E): “All detainees shall be screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees”.

- PREA Screening Risk Assessment (20): The screening instrument provided was completed in full and upon being brought to the holding site.

- PREA Audit Site Review: Through random and direct interview questions it was determined that all troopers are trained to complete the vulnerability assessment tool. The tool is completed by any trooper who brings a detainee in. The tool is completed as a part of processing. The auditor was able to observe the area in which processing occurs for juveniles and adults. The juveniles are held in a

separate holding area. Detainees are only brought to the site for processing and then are either released or transferred to detention/correction center.

#### Interviews

Staff Who Perform Screening for Risk of Victimization - The interviewed staff reported that detainees are interviewed for risk of sexual abuse victimization. The tool is new to the agency. However, the screening will look to see if they feel that they are at risk of being abused, if they have been abused, and whether or not they feel safe.

Random Sample of Staff - The site does not house detainees overnight. Detainee Interview Questionnaire - There were no detainees onsite during the audit process.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.141 (c). As reported in the PAQ, the staff ask detainees about his or their perception of vulnerability.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- PREA Screening Risk Assessment (20): addresses detainees' perception of vulnerability.

#### Interviews

Staff Who Perform Screening for Risk of Victimization - The interviewed staff reported that detainees are interviewed for risk of sexual abuse victimization. The tool is new to the agency. However, the screening will look to see if they feel that they are at risk of being abused, if they have been abused, and whether or not they feel safe.

Random Sample of Staff - The site does not house detainees overnight.

Detainee Interview Questionnaire - There were no detainees onsite during the audit process.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.



Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.141 (d). The screening process in the lockups described in paragraph (b) of this section shall also consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: (1) Whether the detainee has a mental, physical, or developmental disability; (2) The age of the detainee; (3) The physical build and appearance of the detainee; (4) Whether the detainee has previously been incarcerated; and (5) The nature of the detainee's alleged offense and criminal history.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- PREA Screening Risk Assessment (20): the tool considers all of the above-mentioned areas. Staff thoroughly completed all sections.

Interviews

Staff Who Perform Screening for Risk of Victimization - The interviewed staff reported that detainees are interviewed for risk of sexual abuse victimization. The tool is new to the agency. However, the screening will look to see if they feel that they are at risk of being abused, if they have been abused, and whether or not they feel safe.

Random Sample of Staff - The site does not house detainees overnight.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

Overall Findings:

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The following evidence was analyzed in making compliance determination:

Supporting Documents, Interviews and Observations:

- Pre-Audit Questionnaire (PAQ)
- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures

Interviews:

Random Sample of Staff (10)

PREA Coordinator

Findings (By Provision):

115.151 (a). As reported in the PAQ, the agency has established procedures allowing for multiple internal ways for detainees to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other detainees or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 7, Sec F): "Detainees may report in multiple ways the following: 1. Page 7 Sexual abuse and/or sexual harassment that occurred within a department lockup; 2. 3. (b) Retaliation by other detainees, department employees, or police officers under the jurisdiction and direction of the Division of State Police for reporting sexual abuse and/or sexual harassment; and Staff neglect or violation of responsibilities that may have contributed to such an incident".
- Zero Tolerance Poster (English/Spanish) provides multiple internal ways to report allegations of sexual abuse and sexual harassment.
- Audit Site Review: During the site review the auditor observed some PREA signage in the holding cell area. During the site review, the auditor observed the facility provides detainee access to writing instruments, paper, and forms to report with. During the site review, the auditor evaluated the facility systems by which detainees in the facility can report sexual abuse and/or sexual harassment. Detainee can report by using the internal process or written format or using the phone. It was further reported that at times the detainee will have there personal devices on them unless placed in a holding cell. Detainees are rarely placed in a holding cell as they are immediately released or transferred.

The agency/facility has multiple internal ways for detainees to privately report sexual abuse, sexual harassment, retaliation by other detainees or staff for reporting sexual abuse and sexual harassment, and staff violated their responsibilities that may have contributed to the sexual abuse. Detainees are informed of the different ways to report, and how to access the internal and external reporting process.

During the facility onsite inspection, the auditor observed intake process/location, where the PREA screening occurs.

Records are only held onsite temporarily in the supervisor's office. Records are transported to the state headquarters. It was further reported that if vulnerability is identified they will notify the receiving site of the detainee.

#### Interviews

- Random Sample of Staff - The troopers stated that detainees have the option to report verbally. Troopers reported that detainees are only detained for a brief period of time at their processing area and not allowed to have writing instruments therefore would be unable to write report. If a detainee does choose to report verbally, the troopers affirmed that they would promptly notify their supervisor, complete the necessary PREA form, and take immediate action.

- Detainee Interview Questionnaire - There were no detainees onsite during the onsite audit.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.151 (b). As reported in the PAQ, the agency shall also inform detainees of at least one way to report abuse or harassment to a public or private entity or office that is not part of the agency.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 7, Sec F): "Detainees may report in multiple ways the following: 1. Page 7 Sexual abuse and/or sexual harassment that occurred within a department lockup; 2. 3. (b) Retaliation by other detainees, department employees, or police officers under the jurisdiction and direction of the Division of State Police for reporting sexual abuse and/or sexual harassment; and Staff neglect or violation of responsibilities that may have contributed to such an incident".

- Zero Tolerance Poster (English/Spanish) provides multiple internal ways to report allegations of sexual abuse and sexual harassment.

- Audit Site Review: During the site review the auditor observed some PREA signage in the holding cell area. During the site review, the auditor observed the facility provides detainee access to writing instruments, paper, and forms to report with. During the site review, the auditor evaluated the facility systems by which detainees in the facility can report sexual abuse and/or sexual harassment. Detainee can report by using the internal process or written format or using the phone. It was further reported that at times the detainee will have their personal devices on them unless placed in a holding cell. Detainees are rarely placed in a holding cell as they are immediately released or transferred.

#### Interviews

- PREA Coordinator - The interviewed staff reported that outside agencies have a system in place to report the alleged incident immediately. Reports can also be made anonymously or by a third party. All complaints will be immediately reported to an investigator and investigated upon receipt. The detainees are provided with a phone number to report the incident to an outside agency and will be allowed to make a phone call to report it. In addition, they can make a phone call to have someone else report it on their behalf.

- Detainee Interview Questionnaire - There were no detainees onsite during the onsite audit.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.151 (c). As reported in the PAQ, 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. Staff are required to document verbal reports.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 7, Sec F): "Staff shall accept reports made verbally, in writing, and anonymously. 1. 2. Any verbal reports of sexual abuse and/or sexual harassment shall be documented by means of a written incident report. Detainees shall be informed of at least one way to report sexual abuse or sexual harassment to public or private entity or office that that is not part of DESPP, and that is able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to DESPP officials, allowing

the detainee to remain anonymous upon request”

#### Interviews

- Random Sample of Staff – The troopers stated that detainees have the option to report verbally. Troopers reported that detainees are only detained for a brief period of time at their processing area and not allowed to have writing instruments therefore would be unable to write report. If a detainee does choose to report verbally, the troopers affirmed that they would promptly notify their supervisor, complete the necessary PREA form, and take immediate action.
- Detainee Interview Questionnaire – There were no detainees onsite during the onsite audit.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.151 (d). The agency has established procedures for staff to privately report sexual abuse and sexual harassment of detainees.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 8, Sec F): “Staff, including police officers under the jurisdiction and direction of the Division of State Police, may privately report sexual abuse and/or sexual harassment by contacting the PREA Coordinator, filing a complaint with the Internal Affairs Unit, or utilizing the third-party contact phone number posted on the DESPP website”.
- Audit Site Review: As previously stated, the auditor observed signage for making a report and victim related services in the holding area. The signage was in English and Spanish.

#### Interviews

- Random Sample of Staff – The troopers reported if a report needed to be done privately, they could notify supervisor, or PREA hotline. All troopers stated they felt comfortable speaking to supervisor if report was needed. It was further reported that many of the individuals still have their cellphone on them while being processed.

#### Corrective Actions:

	<p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.154</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Findings (By Provision):</p> <p>115.154 (a). As reported in the PAQ, the agency or facility provides a method to receive third-party reports of detainee sexual abuse or sexual harassment. The agency or facility publicly distributes information on how to report detainee sexual abuse or sexual harassment on behalf of detainees.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <p>Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp. 7-8, Sec F): "All reports of sexual abuse and sexual harassment of detainees that are made from third parties shall be received and investigated. This includes anonymous reports".</p> <ul style="list-style-type: none"> <li>· Posters and information for third party reporting are posted and available in the holding area. Interviews with staff confirmed they have been trained to take all allegations and reports seriously and to report them immediately, including those reported by third parties. The verbal reports are to be followed up with a written</li> </ul>

	<p>report immediately.</p> <ul style="list-style-type: none"> <li>· The agency/facility has established a method for receiving reports of sexual abuse and sexual harassment from third parties and ensure that the reports are handle the same way as other reports of sexual abuse or sexual harassment, including ensuring that any identified or potential victims are safe and receive necessary support services, and that reports are thoroughly investigated.</li> <li>· The agency/facility publicizes information on third-party reporting, through websites; by posting in public areas of the facility lobby or visitation area and pamphlets. Website: Home (ct.gov)</li> <li>· Site Review: As previously stated, the auditor observed signage for making a report and victim related services near the holding cells. The signage was in English and Spanish.</li> </ul> <p>Corrective Actions:</p> <ul style="list-style-type: none"> <li>· N/A. There are no corrective actions for this provision.</li> </ul> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.161</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· Website: Home (ct.gov)</li> <li>· State Statute: Mandatory Reporting</li> </ul> <p>Interviews:</p>

Random Sample of Staff (10)

Sheriff, Chief or Director

PREA Coordinator

Findings (By Provision):

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

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 7, Sec F): states that “all employees shall immediately report to the on-duty shift supervisor: 1. 2. 3. Any knowledge, suspicion, or information regarding an incident of detainee sexual abuse and/or sexual harassment that occurred within a department lockup; Any retaliation against detainees, department employees, or police officers under the jurisdiction and direction of the Division of State Police who reported such an incident; and Any employee neglect or violation of responsibilities that may have contributed to an incident of retaliation”.
- Audit Site Review: The auditor observed that staff were fully knowledgeable about reporting to the immediate supervisor or duty officer. The staff further reported that there is a PREA binder that shows all the ways the can make a report.

Interviews

- Random Sample of Staff – Troopers indicated a clear understanding of the duty to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the processing center or holding cells. Troopers also reported using the PREA Checklist during the intake process to determine if detainee has been sexually abused or harassed. The various ways trooper indicated that a report could be made included, but was not limited to:
  - o Report to supervisor
  - o Major Crime
  - o PREA Hotline



Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.161 (b). As reported in the PAQ, 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 7, Sec F): states that "Troopers, police officers, and any other staff shall not reveal any information related to a sexual abuse report to anyone other than the extent necessary to make treatment and investigatory decisions"
- Audit Site Review: The auditor observed that the PREA related assessments were held in the supervisor office temporarily. It was further reported that the reports are then transferred to the state headquarters locked records room.

Interviews

- Random Sample of Staff - The troopers stated that if they were the first to be notified about alleged sexual abuse, they would inform their supervisor, fill out the necessary PREA form, and obtain any additional statements required from the supervisor.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.161 (c). 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- State Statute: Mandatory Reporting

## Interviews

- Sheriff, Chief, or Director - The interviewed staff reported that if an allegation of sexual abuse or sexual harassment is made by someone under the age of 18, a supervisor would obtain the minimum facts of the allegation and seek input from major crime health professionals and DCF to determine the best way to proceed with the investigation.
- PREA Coordinator - The interviewed staff reported that when a sexual abuse allegation is made by a juvenile or vulnerable adult detainee, investigators shall ensure that developmentally appropriate protocols are implemented (e.g., Child Advocacy Center interviews, etc.).

### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.161 (d). The agency shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.

### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- There were no reported allegations of sexual abuse or sexual harassment in the last 12 months.

## Interviews

- Sheriff, Chief, or Director - The interviewed staff reported that any report of sexual harassment would be investigated by an investigator.

### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

### Overall Findings:

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and

	<p>online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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115.162	Agency protection duties
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination:  Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Interviews:</p> <p>Agency Head</p> <p>Sheriff, Chief or Director</p> <p>Random Sample of Staff (10)</p> <p>Findings (By Provision):</p> <p>115.162 (a). As reported in the PAQ, when the agency or facility learns that a detainee is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the detainee (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).</p> <p>In the past 12 months, the number of times the agency or facility determined that a detainee was subject to a substantial risk of imminent sexual abuse: 0.</p> <p>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: N/A.</p> <p>The longest amount of time (in hours or days) elapsed before taking action--if not "immediate" (i.e., without unreasonable delay). If not immediate, please explain in the comments section. N/A.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 8,</li> </ul>

	<p>Sec G): states that “Take immediate action to protect the detainee from substantial risk of imminent sexual abuse; 1. Contact a supervisor to determine further actions to protect the detainee”.</p> <p>Interviews</p> <ul style="list-style-type: none"> <li>· Agency Head – When asked what protective measures are taken if a detainee is subject to substantial or imminent risk of sexual abuse; such measures would be to provide heightened protection while in custody.</li> <li>· Sheriff, Chief, or Director – The interviewed staff reported that they do not house detainees for long periods of time. There is no contact between detainees. Detainees do not share cells.</li> <li>· Random Sample of Staff – The interviewed troopers stated that if it's determined that a detainee is at imminent risk of sexual abuse, they would promptly separate the individual from others, relocate them to another site, notify their supervisor, and initiate these actions immediately.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.163</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul>

Interviews:

Agency head

Director or designee

Findings (By Provision):

115.163 (a). As reported in the PAQ, the agency has a policy requiring that, upon receiving an allegation that a detainee was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. During the past 12 months, the number of allegations the facility received that a detainee was abused while confined at another facility: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 8, Sec F): states that "Upon any trooper or police officer in the course of his or her duties receiving an allegation that a detainee was sexually abused while confined at a non-department facility (e.g., a Connecticut correctional facility or Judicial lockup), the following individuals shall be notified through the chain of command as soon as possible: 1. 2. The Commanding Officer of the Troop area having operational responsibility for the facility in question; and the department PREA Coordinator"

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.163 (b). As reported in the PAQ, the agency policy requires the facility head to provide such notification as soon as possible, but no later than 72 hours after receiving the allegation.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 8, Sec F): states that "Upon receiving such notification, the Commanding Officer of the Troop area having operational responsibility for the facility in question shall notify, or cause to be notified, the head of the facility or appropriate office of the agency where the alleged abuse occurred (e.g., Department of Correction (DOC) PREA Unit, Chief Judicial Marshal, etc.), according to any existing protocol arrangements. 1. 2.

Such notification shall be provided as soon as possible, but no later than seventy-two (72) hours after receiving the allegation; and Such notification shall be documented using a method prescribed by the PREA Coordinator”.

Corrective Actions:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.163 (c). As reported in the PAQ, the agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 8, Sec F): states that “Upon receiving such notification, the Commanding Officer of the Troop area having operational responsibility for the facility in question shall notify, or cause to be notified, the head of the facility or appropriate office of the agency where the alleged abuse occurred (e.g., Department of Correction (DOC) PREA Unit, Chief Judicial Marshal, etc.), according to any existing protocol arrangements. 1. 2. Such notification shall be provided as soon as possible, but no later than seventy-two (72) hours after receiving the allegation; and Such notification shall be documented using a method prescribed by the PREA Coordinator”.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.163 (d). As reported in the PAQ, the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 8, Sec F): states that “Upon receiving such notification, the Commanding Officer of the Troop area having operational responsibility for the facility in question shall notify,

or cause to be notified, the head of the facility or appropriate office of the agency where the alleged abuse occurred (e.g., Department of Correction (DOC) PREA Unit, Chief Judicial Marshal, etc.), according to any existing protocol arrangements. 1. 2. Such notification shall be provided as soon as possible, but no later than seventy-two (72) hours after receiving the allegation; and Such notification shall be documented using a method prescribed by the PREA Coordinator”.

Interviews

- Agency Head - if another agency or facility refers an allegation of sexual abuse or sexual harassment the PREA Coordinator would facilitate ensuring the allegation is investigated. An investigation team is sent out to investigate and notifications within the agency are made. There are no such examples of allegations.
- Sheriff, Chief, or Director - The interviewed staff reported that there is no segregated housing and that they do not house individuals overnight. The average length of time onsite is one hour.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

Overall Findings:

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

<b>115.164</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> </ul> <p>Interviews:</p>

Security Staff and Non-Security Staff First Responders/Random Sample of Staff (3)

Findings (By Provision):

115.164 (a). As reported in the PAQ, the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a detainee was sexually abused, the first law enforcement staff member to respond to the report shall be required to separate the alleged victim and abuser.

The policy requires that, upon learning of an allegation that a detainee was sexually abused, the first law enforcement staff member to respond to the report shall be required to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, upon learning of an allegation that a detainee was sexually abused, that if the abuse occurred within a time period that still allows for the collection of physical evidence, the first law enforcement staff member to respond to the report shall be 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. The policy requires that, upon learning of an allegation that a detainee was sexually abused, that if the abuse occurred within a time period that still allows for the collection of physical evidence, the first law enforcement staff member to respond to the report shall be 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.

In the past 12 months, the number of allegations that a detainee was sexually abused: 0

Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser: 0

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: 0

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: 0

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: 0

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: 0

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Interviews

- Law Enforcement Staff and Non-Law Enforcement Staff First Responders - The described process a first responder would take include the immediate investigation would be done a higher-ranking officer. Then you would separate the involved parties, secure the area, and gather all of the evidence. The person would be taken offsite for medical examinations. We would ask them if they would like medical care. It should also be noted that all law enforcement considered first responders.
- Through informal conversations and interviews with all Troopers, the Troopers are fully aware of the first responder protocols.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.164 (b). Agency policy does not require the following:

- Agency policy requires that if the first staff responder is not a law enforcement staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence:
- Agency policy requires that if the first staff responder is not a law enforcement staff member, that responder shall be required to notify law enforcement staff.

Of the allegations that a detainee was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: 0.

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.

Of those allegations responded to first by a non-security staff member, the number of times that staff member notified security staff: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard

	<p>because:</p> <p>Interviews</p> <p>Law Enforcement Staff and Non-Law Enforcement Staff First Responders/Random Sample of Staff – The described process a first responder would take include the immediate investigation would be done a higher-ranking officer. Then you would separate the involved parties, secure the area, and gather all of the evidence. The person would be taken offsite for medical examinations. We would ask them if they would like medical care. It should also be noted that all law enforcement considered first responders.</p> <p>Through informal conversations and interviews with all Troopers, the Troopers are fully aware of the first responder protocols.</p> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.165</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <p>Pre-Audit Questionnaire (PAQ)</p> <p>Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</p> <p>Interviews:</p> <p>Director</p>

Findings (By Provision):

115.165 (a). As reported in the PAQ, the agency 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp. 8-9, Sec D): states that “Upon learning of an allegation that a detainee was sexually abused, the first trooper or police officer to respond to such report shall: (a) (b) (c) (d) Separate the alleged victim and abuser; Take immediate action to protect the detainee from substantial risk of imminent sexual abuse; 1. Contact a supervisor to determine further actions to protect the detainee Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; 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: 1. 2. 3. 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, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate: 1. 2. 3. 4. 5. 6. 7. 8. H. INVESTIGATIONS (1) Washing; Brushing teeth; Changing clothes; Urinating; Defecating; Smoking; Drinking; or eating”.

Interviews

- Sheriff, Chief, or Director – The interviewed staff reported that it is standard procedure to notify the individual of the outcome of an investigation.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

Overall Findings:

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

115.165 (b). As reported in the PAQ, the agency is permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse, of the incident and the victim's potential need for medical or social services. If a victim is transferred from the lockup to a jail, prison, or medical facility, the agency informs the receiving facility of the incident and the victim's potential need for medical or social services, unless the victim requests otherwise.

In the past 12 months, the number of victims transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse: 0.

In the past 12 months, the number of those victims transferred as a result of an allegation of sexual abuse where the agency informed the receiving facility of the incident and the victim's potential need for medical or social services: 0.

In the past 12 months, the number of those victims transferred as a result of an allegation of sexual abuse who requested the agency not inform the receiving facility: 0.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp. 10-11, Sec I): states that "DESPP has implemented a coordinated response plan to ensure appropriate actions are taken in response to a lockup incident of sexual abuse. (1) If a victim is transferred from the lockup to a jail, prison, another agency's lockup, or medical facility, inform the receiving facility of the incident and the victim's potential need for medical or social services, unless the victim requests otherwise. Other state agencies have documented procedures for notifying the State Police regarding incidents in their respective prisons or lockups so that appropriate investigative action can be taken by State Police personnel. (3) (4) J. Victims shall have timely, unimpeded access to emergency medical treatment. (a) 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".

#### Interviews

- Sheriff, Chief, or Director - The interviewed staff reported that it is standard procedure to inform the facility of the incident and the potential for medical or social services unless otherwise requested by the victim.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the

	<p>provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.166</b>	<b>Preservation of ability to protect detainees from contact with abusers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> </ul> <p>Interviews:</p> <p>Agency Head</p> <p>Findings (By Provision):</p> <p>115.166 (a). The agency, facility, or any other governmental entity is not responsible for collective bargaining on the agency’s behalf has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· There are no current agreements that limit the agency’s ability to remove alleged staff sexual abusers from contact with Detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. There have not been any collective bargaining agreements since August 20, 2012.</li> <li>· The agency is not involved in any form of collective bargaining and can remove any staff alleged to have violated an agency sexual abuse or sexual harassment policy.</li> </ul>

	<p>Interviews</p> <ul style="list-style-type: none"> <li>· Agency Head – The interviewed agency head reported that the agency has not entered into any collective bargaining agreements.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>115.166 (b). N/A- Auditor is not required to audit this provision.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.167</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Interviews:</p> <p>Agency Head</p> <p>Sheriff, Chief of Director</p> <p>Designated Staff Member Charged with Monitoring Retaliation (or Director if nonavailable) (1)</p>

Findings (By Provision):

115.167 (a). As reported in the PAQ, the agency has a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff. The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 11, Sec J): states that "Detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other detainees or staff. The commanding officer of any troop or unit that contains one or more lockup facilities shall ensure that multiple measures are employed for the protection against retaliation, such as the following: (a) (b) Removing alleged staff or detainee abusers from contact with victims. Providing emotional support services, whether through existing employee support programs or not, for staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigators. The department shall monitor the conduct and treatment of detainees or staff who have reported sexual abuse and of detainees who were reported to have suffered sexual abuse. Commanders shall act promptly to remedy any such retaliation. If any other individual who cooperates with an investigation expresses a fear of retaliation, the department shall take appropriate measures to protect that individual against retaliation. The department's obligation to monitor shall terminate if the department determines that the allegation is unfounded".

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.167 (b). As reported in the PAQ, the agency shall employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Due to the setup of the site, the detainees do not stay overnight and typically no longer than two hours. If allegations are made the detainees will be released from the site location prior to the implementation of retaliation monitoring.

#### Interviews

- Agency Head – The agency seeks to protect from retaliation in that they would separate the accused and the victim and provide medical/support services to the victim.
- Sheriff, Chief, or Director – The interviewed staff reported that it isn't applicable if detainee on detainee in that they are not held onsite. However, if staff was involved, they would be held accountable according to CSP policies and union policies. Complainants or victims would be protected.
- Designated Staff Member Charged with Monitoring Retaliation (or Sheriff/Chief/Director if nonavailable) – The interviewed staff reported that as a duty supervisor if there was concern or if there was a need to prevent retaliation, we would separate the involved parties and conduct an investigation. The interviewed staff would look to monitor the involved parties, video monitoring, and increase monitoring if needed for a detainee. The detainees are only on site for 1-2 hours. If there are alleged or identified concerns of retaliation, the interviewed staff would directly speak to the involved parties and preserve any necessary evidence associated with the allegation.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.167 (c). As reported in the PAQ, the agency/facility monitors the conduct or treatment of detainees or staff who reported sexual abuse and of detainees who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by detainees or staff. The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

The number of times an incident of retaliation occurred in the past 12 months: 0.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 11, Sec J): states that "Detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations



shall be protected from retaliation by other detainees or staff. The commanding officer of any troop or unit that contains one or more lockup facilities shall ensure that multiple measures are employed for the protection against retaliation, such as the following: (a) (b) Removing alleged staff or detainee abusers from contact with victims. Providing emotional support services, whether through existing employee support programs or not, for staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigators. The department shall monitor the conduct and treatment of detainees or staff who have reported sexual abuse and of detainees who were reported to have suffered sexual abuse. Commanders shall act promptly to remedy any such retaliation. If any other individual who cooperates with an investigation expresses a fear of retaliation, the department shall take appropriate measures to protect that individual against retaliation. The department's obligation to monitor shall terminate if the department determines that the allegation is unfounded".

#### Interviews

- Sheriff, Chief, or Director – Depending on the complaint and the subsequent investigation, all efforts would be made to maintain a safe working environment while not violating anyone's rights. The detainees do not stay onsite.
- Designated Staff Member Charged with Monitoring Retaliation (or Sheriff/Chief/Director if not available) – When looking for signs of retaliation we would look to see if someone is not willing to talk or if the party directly reports concern. Since they are onsite for a limited time, we would typically have a detainee report any concerns. Once an allegation is made, we would immediately separate involved parties and secure the camera footage.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.167 (d). 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.

#### Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- There were reported allegations or reports of retaliatory allegations.

#### Interviews

- Agency Head – If an individual cooperates with an investigation expresses

	<p>fear of retaliation, we have the ability to hold individuals in single cells and continuously monitor all detainees. Consultation would occur with the supervisor.</p> <ul style="list-style-type: none"> <li>· Sheriff, Chief, or Director- Detainees do not stay onsite; however, if a staff member was found at fault, they would be held accountable according to CSP policies and union policies. All efforts would be made to maintain a safe working environment while not violating anyone’s union rights.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>115.167 (e). N/A the auditor is not required to audit this provision.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.171</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> <li>· Specialized Investigation Training (23)</li> </ul> <p>Interviews:</p> <p>PREA Coordinator</p> <p>Investigative Staff (4)</p> <p>Director</p>

Findings (By Provision):

115.171 (a). As reported in the PAQ, the agency/facility has a policy related to criminal and administrative agency investigations.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 11, Sec J): provides a detailed process for criminal and administrative investigations.

Interviews

- Investigative Staff - The interviewed staff stated that investigations are initiated immediately upon report of an allegation of sexual abuse or sexual harassment. All complaints/allegations should be handled the same regardless of who the reporter is.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (b). As reported in the PAQ, where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.134.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Investigator Specialized Training Record (23)

Interviews

- Investigative Staff - The interviewed staff stated that they have completed training to conduct sexual abuse investigations.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (c). 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Interviews

- Investigative Staff - The interviewed staff stated that when initiating an investigation the steps are:

Crime scene secured/preserved

- Separate victim and accused/alleged perpetrator
- Collect/Secure evidence
- These steps should be taken as quickly as possible

The investigation process is:

- Photograph the scene
- Collection of Evidence
- Conduct Interviews of victim, accused, witnesses using trauma informed techniques
- Review any prior reports or complaints related to the incident or involving the parties
- Analyze all information/evidence/interviews & determine if allegation can be substantiated, unsubstantiated, or unfounded
- Complete a detailed report documenting your process and findings.

Any statements or physical evidence from Victim and suspect as well as forensic medical exam of victim

- Any physical evidence/area canvases from the scene/secondary scenes
- Any statements/information collected from witnesses
- Other sources (i.e. phones, mail, security video, logbooks, etc.)

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (d). 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Interviews

- Investigative Staff - The interviewed staff reported that if it is discovered that evidence is prosecutable, they would consult with prosecutors before you conduct compelled interviews.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (e). 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 detainee or staff. No agency shall require a detainee 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Interviews

- Investigative Staff - The interviewed staff reported that credibility is assessed on an individual basis - and not based on the person's status as inmate or staff. Investigators are to include the basis of credibility assessment in their reports. We would not require polygraph testing.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and

review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (f). 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- PREA Audit Site Review: During the site review it was observed that confidential information is held in the supervisor's office. These documents are currently being held onsite temporarily and will subsequently be transferred to the records room at the state headquarters.

Interviews

- Investigative Staff - The interviewed staff reported that criminal investigations are documented. They include the original complaint/allegations, all investigative steps to include, but not limited to photographs, interviews, evidence collection, all relevant documentation, and findings. The preponderance of evidence is the standard of evidence used to determine findings.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (g). 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. There were no reported criminal investigations.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- PREA Audit Site Review: During the site review it was observed that confidential information is held in the supervisor's office. These documents are currently being held onsite temporarily and will subsequently be transferred to the records room at the state headquarters.

Interviews

· Investigative Staff – The interviewed staff reported that criminal investigations are documented. They include the original complaint/allegations, all investigative steps to include, but not limited to photographs, interviews, evidence collection, all relevant documentation, and findings. The preponderance of evidence is the standard of evidence used to determine findings.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (h). As reported in the PAQ, substantiated allegations of conduct that appear to be criminal are referred for prosecution. There were zero number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit. 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: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (pp. 9-11, Sec J): provides a detailed description of the investigation process.

There were no reported criminal investigations.

Interviews

· Investigative Staff – The interviewed staff reported that the State Police handles referral of cases for prosecution if there is a substantiated allegation of conduct that appears criminal.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (i). As reported in the PAQ, the agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual assault or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 10, Sec J) states that “Administrative investigations 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. 1. Administrative investigations shall also include an effort to determine whether staff actions or failures to act contributed to the abuse”.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (j). 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Interviews

- Investigative Staff - The interviewed staff reported that even if the alleged perpetrator is no longer employed, the investigation should still be completed. If the victim or alleged abuser is no longer present at the facility, the investigation should continue in order to gather as much evidence and information as possible about the incident.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.171 (k). Auditor is not required to audit this provision.

115.171 (l). 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.

Compliance Determination:



	<p>The facility has demonstrated compliance with this provision of the standard because:</p> <p>Interviews</p> <ul style="list-style-type: none"> <li>· Sheriff, Chief, or Director – The interviewed staff reported that an outside agency would not investigate there allegations of sexual abuse.</li> <li>· PREA Coordinator – The interviewed staff reported that the agency is investigating its own allegations.</li> <li>· Investigative Staff – The interviewed staff reported that when an outside agency, such as law enforcement, is conducting the investigation, the facility staff should cooperate fully. This may involve providing any requested information, documentation, or other assistance to support the external investigation.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.172</b>	<b>Evidentiary standard for administrative investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Interviews:</p>

	<p>Investigative Staff (4)</p> <p>Findings (By Provision):</p> <p>115.172 (a). As reported in the PAQ, the agency does not impose a standard of a preponderance of evidence or a lower standard of proof when determining whether allegations of sexual abuse of sexual harassment are substantiated.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 10, Sec J states that “DESPP shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</li> </ul> <p>Interviews</p> <ul style="list-style-type: none"> <li>· Investigative Staff - The interviewed staff reported that the agency will impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual harassment are substantiated.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.176</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

The following evidence was analyzed in making compliance determination:

Supporting Documents, Interviews and Observations:

- Pre-Audit Questionnaire (PAQ)
- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures

Findings (By Provision):

115.176 (a). As reported in the PAQ, staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 10, Sec J states that “DESPP employees shall be subject to disciplinary sanctions up to and including termination for violating agency detainee sexual abuse or detainee sexual harassment policies. Disciplinary sanctions for violations of DESPP 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 offense by other staff with similar histories. All terminations for violation of this policy, or resignations by staff who would have been terminated if not for their resignation, shall be reported to any relevant licensing bodies”.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.176 (b). As reported in the PAQ, that in the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: 0. In the past 12 months, the number of staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard. No corrective action is warranted.

115.176 (c). 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.

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

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 10, Sec J states that "DESPP employees shall be subject to disciplinary sanctions up to and including termination for violating agency detainee sexual abuse or detainee sexual harassment policies. Disciplinary sanctions for violations of DESPP 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 offense by other staff with similar histories. All terminations for violation of this policy, or resignations by staff who would have been terminated if not for their resignation, shall be reported to any relevant licensing bodies".

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.176 (d). As reported in the PAQ, 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. In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior

	<p>to termination) for violating agency sexual abuse or sexual harassment policies: 0.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 10, Sec J states that “DESPP employees shall be subject to disciplinary sanctions up to and including termination for violating agency detainee sexual abuse or detainee sexual harassment policies. Disciplinary sanctions for violations of DESPP 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 offense by other staff with similar histories. All terminations for violation of this policy, or resignations by staff who would have been terminated if not for their resignation, shall be reported to any relevant licensing bodies”.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.177</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Interviews:</p>

Director

Findings (By Provision):

115.177 (a). 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. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with detainees.

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 detainees: 0.

In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of detainees: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 10, Sec J states that "Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with detainees, a criminal investigation by the agency shall be initiated (unless the activity was clearly not criminal), and the sexual abuse shall be reported to any relevant licensing bodies. (b) The department shall take appropriate remedial measures and shall consider whether to prohibit further contact with detainees, in the case of any other violation of this policy by a contractor or volunteer".

Corrective Actions:

- N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.177 (b). As reported in the PAQ, the facility takes appropriate remedial measures and considers whether to prohibit further contact with detainees in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 10, Sec J states that "Any contractor or volunteer who engages in sexual abuse shall be

prohibited from contact with detainees, a criminal investigation by the agency shall be initiated (unless the activity was clearly not criminal), and the sexual abuse shall be reported to any relevant licensing bodies. (b) The department shall take appropriate remedial measures and shall consider whether to prohibit further contact with detainees, in the case of any other violation of this policy by a contractor or volunteer”.

Interviews

- Director or Designee – The interviewed staff reported that all independent individual contractors or volunteers must adhere to the agency zero tolerance policies and procedures included in the Code of Ethics and Unlawful Sexual Abuse and Sexual Harassment policies. CT Renaissance will not enlist and prohibit the services of contractors or volunteers who are known to have engaged in or attempted to engage in sexual abuse or sexual harassment.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

Overall Findings:

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

115.178	Referral for prosecution for detainee-on-detainee sexual abuse
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Interviews:</p> <p>Director</p>

Findings (By Provision):

115.178 (a). As reported in the PAQ, detainees are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that a detainee engaged in detainee-on-detainee sexual abuse. Detainees are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for detainee-on-detainee sexual abuse.

In the past 12 months, the number of administrative findings of detainee-on-detainee sexual abuse that have occurred at the facility: 0.

In the past 12 months, the number of criminal findings of guilt for detainee-on-detainee sexual abuse that have occurred at the facility: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 10, Sec J states that "When there is probable cause to believe that a detainee sexual abused another detainee in a lockup, the investigating trooper or police officer shall refer the matter to the appropriate prosecuting authority".

Interviews

· Sheriff, Chief, or Director – All allegations being investigated, and action would be taken based on the results of the investigation.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.178 (b). N/A-the agency is responsible for conducting administrative and criminal investigations.

115.178 (c). Any State entity or Department of Justice component that is responsible for investigating allegations of sexual abuse in lockups shall be subject to this requirement.

Overall Findings:

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.



115.182	Access to emergency medical and mental health services
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Interviews:</p> <p>Security Staff and Non-Security Staff First Responders/Random Staff (3)</p> <p>Findings (By Provision):</p> <p>115.182 (a). As reported in the PAQ, detainee victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 11, Sec I state that “Victims shall have timely, unimpeded access to emergency medical treatment. (a) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident”.</li> </ul> <p>Interviews</p> <ul style="list-style-type: none"> <li>· Sheriff, Chief, or Director - The victims shall receive timely, unimpeded access to medical treatment. Victims are immediately asked if they need medical treatment.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>115.182 (b). As reported in the PAQ, treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser</p>

	<p>or cooperates with any investigation arising out of the incident.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 11, Sec I state that “Victims shall have timely, unimpeded access to emergency medical treatment. (a) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident”.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.186</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Interviews:</p> <p>Director</p> <p>PREA Coordinator</p> <p>Incident Review Team (1)</p>

Findings (By Provision):

115.186 (a). As reported in the PAQ, 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. 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: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 12, Sec L states that “DESPP 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. Such review shall ordinarily occur within 30 days of the conclusion of the investigation”.

Interviews

- Sheriff, Chief, or Director – The facility does have a sexual abuse incident review team. The team would include the CO of each district, the CO of the training academy or designee and the PREA coordinator. The review team will consider all of the above along with examining where the incident took place, staffing levels and monitoring for technology.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.186 (b). As reported in the PAQ, 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. 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: 0.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 12, Sec L states that “DESPP 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. Such review shall ordinarily occur within 30 days of the conclusion of the investigation”.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.186 (c). 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.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 12, Sec L states that “The review team shall include the commanding officer of each district, commanding officer of the Training Academy or designee, and the PREA Coordinator”.

Interviews

- Sheriff, Chief, or Director – The facility does have a sexual abuse incident review team. The team would include the CO of each district, the CO of the training academy or designee and the PREA coordinator.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.186 (d). As reported in the PAQ, 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 Coordinator.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 12, Sec L) states that “Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 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 lockup; Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; Assess the adequacy of staffing levels in that area during different shifts; Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and The PREA Coordinator shall prepare a report of the review teams findings, including but not necessarily limited to determinations made pursuant to criteria reviewed above, and any recommendations for improvement, and submit such report to the commanding officer of the lockup and to the Office of the Colonel”.

#### Interviews

- Sheriff, Chief, or Director – Information from the sexual abuse incident review will be prepared in a report and the findings would make determination and will recommend any necessary improvements to the commanding officer of the facility and the Office of the Colonel.
- PREA Coordinator – The interviewed staff reported that the facility or the assigned department investigator will prepare the report. The report will be reviewed by me and the rest of the incident review team. The review team will see if there was a deviation from policy or a need for policy change. The reports will be forwarded to me for review; however, we do not have any PREA complaints to date. I review the report and the evidence (i.e. Video) to see if the report is accurate. I would then schedule a meeting with the incident review team or seek subject matter experts to gather a second opinion on policy violations.
- Incident Review Team – The interviewed staff reported that the incident review team considers all of the above when discussing what may have motivated the incident or allegations. The site has not had an incident but upon review, we would look at what contributed to the incident, what could have been done differently, what needs to change in the facility layout, and staffing. The goal will be to look at the entire picture. There are cameras in the holding cells, trooper cars, and body cameras. Site cameras have audio and visual capabilities. If there is an inoperable device, we will address getting it fixed.

#### Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

	<p>115.186 (e). The facility implements recommendations for improvement or documents its reasons for not doing so.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The recommendations for improvement shall be implemented at the lockup facility, or the reasons for not doing so shall be documented by the commanding officer of any troop or unit responsible for the lockup facility in question and forwarded through the chain of command to the PREA Coordinator”.</li> </ul> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.187</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <ul style="list-style-type: none"> <li>· Pre-Audit Questionnaire (PAQ)</li> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</li> </ul> <p>Findings (By Provision):</p> <p>115.187 (a). As reported in the PAQ, 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>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The PREA Coordinator shall ensure that accurate, uniform data</li> </ul>

for every allegation of sexual abuse at lockups under the direct control of the Division of State Police is collected. 1. Data Analysis (a) Such incident-based sexual abuse data shall be aggregated at least annually, and include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice and designated for lockups. [a] Upon request, DESPP shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.”

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.187 (b). The agency shall aggregate the incident-based sexual abuse data at least annually.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The PREA Coordinator shall ensure that accurate, uniform data for every allegation of sexual abuse at lockups under the direct control of the Division of State Police is collected. 1. Data Analysis (a) Such incident-based sexual abuse data shall be aggregated at least annually, and include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice and designated for lockups. [a] Upon request, DESPP shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.”
- This is the agency’s first PREA audit and the agency’s first annual report will occur next year.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.187 (C). As reported in the PAQ, the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The PREA Coordinator shall ensure that accurate, uniform data for every allegation of sexual abuse at lockups under the direct control of the Division of State Police is collected. 1. Data Analysis (a) Such incident-based sexual abuse data shall be aggregated at least annually, and include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice and designated for lockups. [a] Upon request, DESPP shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.”

- This is the agency’s first PREA audit and the agency’s first annual report will occur next year.

- SSV Report: The agency has not had to complete a SSV Report

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.187 (d). The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The PREA Coordinator shall ensure that accurate, uniform data for every allegation of sexual abuse at lockups under the direct control of the Division of State Police is collected. 1. Data Analysis (a) Such incident-based sexual abuse data shall be aggregated at least annually, and include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice and designated for lockups. [a] Upon request, DESPP shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.”

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the



	<p>provisions of this standard.</p> <p>115.187 (e). N/A the agency does not contract for the confinement of its detainees.</p> <p>115.187 (f). N/A the DOJ has not requested agency data.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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<b>115.188</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Supporting Documents, Interviews and Observations:</p> <p>Policy: Prison Rape Elimination Act (PREA) Standards and Procedures</p> <p>Website</p> <p>Interviews:</p> <p>Agency Head</p> <p>PREA Coordinator</p> <p>Findings (By Provision):</p> <p>115.188 (a). As reported in the PAQ, the agency reviews data collected and aggregated pursuant to §115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: (a) identifying problem areas; (b) taking corrective action on an ongoing basis; and (c) 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.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p>

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The PREA Coordinator or authorized designees shall review the data collected in subsection L(2) above in order to assess and improve the effectiveness of the department’s sexual abuse prevention, detection, and response policies, practices, and training, including: 1. 2. 3. (b) Identifying problem areas; Taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each lockup, as well as the department as a whole. [a] 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”.

- This is the agency’s first PREA audit and the agency’s first annual report will occur next year.

Interviews:

- Agency Head – The interviewed agency head reported that incident-based data will be assessed after the incident review team. The agency is always reassessing if there are any corrective actions or policy updates as needed.

- PREA Coordinator – The interviewed staff reported that the incident review team will assess the need for policy changes, training, or additional prevention after each incident. On an annual basis, I will analyze all data to determine the need for change. The PREA screenings are kept with the arresting trooper or desk officer. Once released, the PREA screenings are filed away in a locked filing cabinet. As of right now, we do not have any complaints. Our policy was approved in July of 2023. The first annual report will be completed in 2025. If there is a complaint, the incident review team will discuss corrective actions for the facility immediately. The incident review team will also suggest corrective actions or policy changes for the agency as a whole and implement them as necessary.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.188 (b). As reported in the PAQ, the annual report includes a comparison of the current year’s data and corrective actions with those from prior years. The annual report provides an assessment of the agency’s progress in addressing sexual abuse.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The PREA Coordinator or authorized designees shall review the

data collected in subsection L(2) above in order to assess and improve the effectiveness of the department's sexual abuse prevention, detection, and response policies, practices, and training, including: 1. 2. 3. (b) Identifying problem areas; Taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each lockup, as well as the department as a whole. [a] 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".

- This is the agency's first PREA audit and the agency's first annual report will occur next year.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.188 (c). As reported in the PAQ, the agency makes its annual report readily available to the public at least through its website.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Website: Home (ct.gov): this is the first set of agency audits. Upon completion of the audit, the agency will upload the audit and any annual reports to the website.

- This is the agency's first PREA audit and the agency's first annual report will occur next year.

Interviews

- Agency Head - The interviewed agency head reported that they approve the annual reports, and the first agency annual report should occur in 2025.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.188. (d). As reported in the PAQ, 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.

**Compliance Determination:**

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The department’s annual report prepared in subsection L(3)(a)3 above shall be approved by the Commissioner and made readily available to the public through the department’s public web site. 1. The department may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a lockup but must indicate the nature of the material redacted.”.
- Website: Home (ct.gov): this is the first set of agency audits. Upon completion of the audit, the agency will upload the audit and any annual reports to the website.
- This is the agency’s first PREA audit and the agency’s first annual report will occur next year.

**Interviews:**

- PREA Coordinator- The interviewed staff reported that specific information from all reports will be redacted to prevent any threat to the safety and security of secure facilities, victims, and staff. The PREA Annual Report will redact information concerning staff and personal identifiers. This information will be included in the annual report.

**Corrective Actions:**

N/A. There are no corrective actions for this provision.

**Discussion:** A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

**Overall Findings:**

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

<b>115.189</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

The following evidence was analyzed in making compliance determination:

Supporting Documents, Interviews and Observations:

Pre-Audit Questionnaire (PAQ)

Policy: Prison Rape Elimination Act (PREA) Standards and Procedures

Website: Home (ct.gov)

Interviews:

PREA Coordinator

Findings (By Provision):

115.189 (a). As reported in the PAQ, the agency ensures that incident-based and aggregate data are securely retained. The agency indicates the nature of material redacted.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “DESPP shall ensure that data collected pursuant to subsection (L)2 above are securely retained”.

Interviews

- PREA Coordinator - The interviewed staff reported that the incident review team will assess the need for policy changes, training, or additional prevention after each incident. On an annual basis, I will analyze all data to determine the need for change. The PREA screenings are kept with the arresting trooper or desk officer. Once released, the PREA screenings are filed away in a locked filing cabinet. As of right now, we do not have any complaints.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.189 (b). As reported in the PAQ, the agency ensures that incident-based and aggregate data is made available to the public.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “The department shall make all aggregated sexual abuse data from lockups under its control readily available to the public at least annually, through the department’s public web site. [a] Data Retention (a) Before making any aggregated sexual abuse data publicly available, the department shall ensure that all personal identifiers are removed”.

- Website: Home (ct.gov)

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.189 (c). As reported in the PAQ, before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected pursuant to §115.287 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.

Compliance Determination:

The facility has demonstrated compliance with this provision of the standard because:

- Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “Before making any aggregated sexual abuse data publicly available, the department shall ensure that all personal identifiers are removed. DESPP shall maintain sexual abuse data collected pursuant to subsection (L)2 above for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise”.

- This is the agency’s first PREA audit and the agency’s first annual report will occur next year.

Corrective Actions:

N/A. There are no corrective actions for this provision.

Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.

115.189 (d). As reported in the PAQ, the agency shall maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial

	<p>collection unless Federal, State, or local law requires otherwise.</p> <p>Compliance Determination:</p> <p>The facility has demonstrated compliance with this provision of the standard because:</p> <ul style="list-style-type: none"> <li>· Policy: Prison Rape Elimination Act (PREA) Standards and Procedures (p. 13, Sec L) states that “DESPP shall maintain sexual abuse data collected pursuant to subsection (L)2 above for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise”.</li> <li>· Website: Home (ct.gov): this is the first set of agency audits. Upon completion of the audit, the agency will upload the audit and any annual reports to the website.</li> </ul> <p>Corrective Actions:</p> <p>N/A. There are no corrective actions for this provision.</p> <p>Discussion: A review of the appropriate documentation, interviews with staff, and review of relevant policies indicate that the facility is in compliance with the provisions of this standard.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</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>
	<p>The following evidence was analyzed in making compliance determination:</p> <p>Findings (By Provision):</p> <p>115.401 (a). The current cycle of audits serves as the first round of audits for the agency.</p> <p>115.401 (b). The current cycle of audits serves as the first round of audits for the agency. All sites are being audited this year, and they will begin auditing one third of sites per year, effective 2025.</p>

	<p>115.401 (h). During the inspection of the physical plant the auditor and was escorted throughout the facility by the director. The auditor was provided unfettered access throughout the institution. Specifically, the auditor was not barred or deterred entry to any areas. The auditor had the ability to freely observe, with entry provided to all areas without prohibition. Based on review of documentation the facility is compliant with the intent of the provision.</p> <p>115.401 (i). During the on-site visit, the auditor was provided access to any and all documents requested. All documents requested were received to include, but not limited to employee and detainee files, sensitive documents, and supplemental reports. Based on review of documentation the facility is compliant with the intent of the provision.</p> <p>115.401 (m). The auditor was provided a private room to conduct interviews. There were no detainees onsite during the audit process.</p> <p>A review of the appropriate documentation and interviews with staff indicate that the facility is in compliance with the provisions of this standard.</p> <p>115.401 (n). Detainees were able to submit confidential information via written letters to the auditor PO Box or during the interviews with the auditor. The auditor did not receive any correspondence from the detainees of the facility.</p> <p>Overall Findings:</p> <p>The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.</p>
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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>The following evidence was analyzed in making compliance determination:</p> <p>Documents:</p> <p>Home (ct.gov)</p> <p>Findings (By Provision):</p> <ul style="list-style-type: none"> <li>· 115.403 (f). Website: Home (ct.gov): this is the first set of agency audits. Upon completion of the audit, the agency will upload the audit and any annual</li> </ul>



reports to the website.

Overall Findings:

The auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the facility, facility practices, interviewed staff and detainees, local and national advocates, and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

<b>Appendix: Provision Findings</b>		
<b>115.111 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.111 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its lockups?	yes
<b>115.112 (a)</b>	<b>Contracting with other entities for the confinement of detainees</b>	
	If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.)	na
<b>115.112 (b)</b>	<b>Contracting with other entities for the confinement of detainees</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".)	na
<b>115.113 (a)</b>	<b>Supervision and monitoring</b>	

	Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the detainee population?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
<b>115.113 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.113 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: 1. The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The lockup's	yes

	deployment of video monitoring systems and other monitoring technologies?	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The resources the lockup has available to commit to ensure adequate staffing levels?	yes
<b>115.113 (d)</b>	<b>Supervision and monitoring</b>	
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Continuous direct sight and sound supervision?	yes
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Single-cell housing or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible?	yes
<b>115.114 (a)</b>	<b>Juveniles and youthful detainees</b>	
	Are juveniles and youthful detainees held separately from adult detainees? (N/A if the facility does not hold juveniles or youthful detainees (detainees <18 years old).)	yes
<b>115.115 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the lockup always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.115 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
<b>115.115 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the lockup implement policies and procedures that enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent	yes

	circumstances or when such viewing is incidental to routine cell checks?	
	Does the lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing?	yes
<b>115.115 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status?	yes
	If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.115 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the agency train law enforcement staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
<b>115.116 (a)</b>	<b>Detainees with disabilities and detainees who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who are blind or have low vision?	yes

	Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other? (if "other," please explain in the overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with detainees who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: are blind or have low vision?	yes
<b>115.116</b>	<b>Detainees with disabilities and detainees who are limited</b>	

<b>(b)</b>	<b>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 detainees 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>115.116</b> <b>(c)</b>	<b>Detainees with disabilities and detainees who are limited English proficient</b>	
	Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations?	yes
<b>115.117</b> <b>(a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: o Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been	yes

	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?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
<b>115.117 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees?	yes
<b>115.117 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with detainees, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with detainees, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.117 (d)</b>	<b>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 detainees?	yes
<b>115.117 (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 detainees or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.117 (f)</b>	<b>Hiring and promotion decisions</b>	



	Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.117 (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>115.117 (h)</b>	<b>Hiring and promotion decisions</b>	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law. )	yes
<b>115.118 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new lockup or planned any substantial expansion or modification of existing lockups, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.118 (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	yes

	agency's ability to protect detainees from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	
<b>115.121 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse in its lockups, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.121 (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>115.121 (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>115.121 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs?	yes
<b>115.121 (e)</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 entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
<b>115.122 (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>115.122 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na

	Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
	Does the agency document all such referrals? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
<b>115.131 (a)</b>	<b>Employee and volunteer training</b>	
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees?	yes

	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.131 (b)</b>	<b>Employee and volunteer training</b>	
	Have all current employees and volunteers who may have contact with detainees received such training?	yes
	Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
<b>115.131 (c)</b>	<b>Employee and volunteer training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.132 (a)</b>	<b>Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy</b>	
	During the intake process, do employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
<b>115.132 (b)</b>	<b>Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy</b>	
	Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
<b>115.134 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees and volunteers pursuant to §115.131, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not)	yes

	conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a.)	
<b>115.134 (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 115.121(a).)	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	yes
<b>115.134 (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 115.121(a).)	yes
<b>115.141 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.)	yes
	When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.)	yes
<b>115.141</b>	<b>Screening for risk of victimization and abusiveness</b>	

<b>(b)</b>		
	If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.)	na
<b>115.141 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.)	na
<b>115.141 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability. (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense	na

	and criminal history? (N/A if lockup is NOT used to house detainees overnight.)	
<b>115.151 (a)</b>	<b>Detainee reporting</b>	
	Does the agency provide multiple ways for detainees to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
<b>115.151 (b)</b>	<b>Detainee reporting</b>	
	Does the agency also provide at least one way for idetainees to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the detainee to remain anonymous upon request?	yes
<b>115.151 (c)</b>	<b>Detainee reporting</b>	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment ?	yes
<b>115.151 (d)</b>	<b>Detainee reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees?	yes
<b>115.154 (a)</b>	<b>Third-party reporting</b>	



	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee?	yes
<b>115.161 (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 an agency lockup?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.161 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, and investigation decisions?	yes
<b>115.161 (c)</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>115.161 (d)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency report all allegations of sexual abuse, including third-party and anonymous reports, to the agency's designated investigators?	yes
<b>115.162</b>	<b>Agency protection duties</b>	

<b>(a)</b>		
	When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee?	yes
<b>115.163 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that a detainee was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.163 (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>115.163 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.163 (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>115.164 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating,	yes

	defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
<b>115.164 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff?	yes
<b>115.165 (a)</b>	<b>Coordinated response</b>	
	Has the agency developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to a lockup incident of sexual abuse?	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim's potential need for medical or social services?	yes
<b>115.165 (b)</b>	<b>Coordinated response</b>	
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the	yes

	receiving facility of the victim's potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	
<b>115.166 (a)</b>	<b>Preservation of ability to protect detainees 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 limits the agency's ability to remove alleged staff sexual abusers from contact with detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.167 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.167 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.167 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation?	yes
<b>115.167 (d)</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>115.171 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).)	yes
<b>115.171 (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 115.134?	yes
<b>115.171 (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>115.171 (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>115.171 (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 detainee or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.171 (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>115.171 (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>115.171 (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>115.171 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.171(f)	yes

	and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	
<b>115.171 (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 lockup or agency does not provide a basis for terminating an investigation?	yes
<b>115.171 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When outside agencies investigate sexual abuse, does the agency cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.121(a). )	na
<b>115.172 (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>115.176 (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>115.176 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.176 (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>115.176 (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: o Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.177 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.177 (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 detainees?	yes
<b>115.178 (a)</b>	<b>Referral for prosecution for detainee-on-detainee sexual abuse</b>	
	When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?	yes
<b>115.178 (b)</b>	<b>Referral for prosecution for detainee-on-detainee sexual abuse</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See	na



	115.121(a.)	
<b>115.182 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment?	yes
<b>115.182 (b)</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>115.186 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the lockup conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.186 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.186 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors and investigators?	yes
<b>115.186 (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 was motivated or otherwise caused by other group dynamics at the lockup?	yes
	Does the review team: Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in	yes

	the area may enable abuse?	
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.186(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator?	yes
<b>115.186 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the lockup implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.187 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions?	yes
<b>115.187 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.187 (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 Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups?	yes
<b>115.187 (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>115.187 (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 detainees? (N/A if the agency does not contract for the confinement of its detainees.)	na
<b>115.187 (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.)	na
<b>115.188 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each lockup, as well as the agency as a whole?	yes
<b>115.188 (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>115.188 (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	yes

	does not have one, through other means?	
<b>115.188 (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 lockup?	yes
<b>115.189 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.187 are securely retained?	yes
<b>115.189 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from lockups under its direct control and any private agencies with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.189 (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>115.189 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<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.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	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 (f)</b>	<b>Audit contents and findings</b>	
	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	na

	single facility agencies, there has never been a Final Audit Report issued.)	
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