

PREA Facility Audit Report: Final

Name of Facility: Brooklyn Correctional Institution

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/02/2025

Auditor Certification

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



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



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



Auditor Full Name as Signed: Joy Catrett-Bell

Date of Signature: 12/02/2025

AUDITOR INFORMATION

Auditor name: Catrett-Bell, Joy

Email: jcbell1111@gmail.com

Start Date of On-Site Audit: 11/05/2025

End Date of On-Site Audit: 11/06/2025

FACILITY INFORMATION

Facility name: Brooklyn Correctional Institution

Facility physical address: 59 Hartford Road, Brooklyn, Connecticut - 06234

Facility mailing address:

Primary Contact

Name:	Paul Senita
Email Address:	paul.senita@ct.gov
Telephone Number:	8607794572

Warden/Jail Administrator/Sheriff/Director	
Name:	Charletta Jones
Email Address:	Charlatta.Jones@ct.gov
Telephone Number:	8607794501

Facility PREA Compliance Manager	
Name:	Paul Senita
Email Address:	paul.senita@ct.gov
Telephone Number:	(860) 779-4572

Facility Health Service Administrator On-site	
Name:	Jennfier Sanchez
Email Address:	Jennifer.Sanchez@ct.gov
Telephone Number:	959-200-6869

Facility Characteristics	
Designed facility capacity:	456
Current population of facility:	378
Average daily population for the past 12 months:	417
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys

Age range of population:	20-74
Facility security levels/inmate custody levels:	Level 1=33, Level 2=170, Level 3=172, Level 4=0
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	117
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	118

AGENCY INFORMATION

Name of agency:	Connecticut Department of Correction
Governing authority or parent agency (if applicable):	
Physical Address:	24 Wolcott Hill Road , Wethersfield, Connecticut - 06109
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Antonio Santiago	Email Address:	antonio.santiago@ct.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

1

- 115.77 - Corrective action for contractors and volunteers

Number of standards met:

44

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

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

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-11-05
2. End date of the onsite portion of the audit:	2025-11-06

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	CT Alliance To End Sexual Violence

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	456
15. Average daily population for the past 12 months:	41
16. Number of inmate/resident/detainee housing units:	4
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	384
25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	2
30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0

31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	2
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	The population of inmates meeting the criteria in certain categories was not present.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	117
37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0

38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	Random staff were selected from all shift assignments. There were no barriers in completing interviews.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	13
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☒ Age ☒ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☒ Length of time in the facility ☒ Housing assignment ☐ Gender ☐ Other ☐ None
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The Auditor reviewed the roster and selected inmates based upon the above factors.
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No

44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	The Auditor reviewed the roster and selected inmates based upon the above factors.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	13
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	NA
54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	2

56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information received in the PAQ, site documentation review, and interviews with staff and inmates. There were no inmates who disclosed this information during the facility screening process.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The Auditor began conducting inmate interviews the first day of the on-site portion of the audit. Based upon the inmate population on day one of the audit, the PREA Auditor Handbook required that the auditor interview a minimum of 26 inmates, (13 random and 13 targeted) A total of 26 inmate interviews was conducted. All interviews with inmates occurred in a secure area to ensure privacy. Inmate interviews were conducted using the established DOJ interview protocols. If randomly selected inmate refused to be interviewed, an additional inmate from the same housing area would be selected to provide a cross-section review of the entire general population. There were no instances of refusal of selected inmates for interviews.

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

58. Enter the total number of RANDOM STAFF who were interviewed:

12

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)

- ☒ Length of tenure in the facility
- ☒ Shift assignment
- ☒ Work assignment
- ☒ Rank (or equivalent)
- ☐ Other (e.g., gender, race, ethnicity, languages spoken)
- ☐ None

60. Were you able to conduct the minimum number of RANDOM STAFF interviews?

- ☒ Yes
- ☐ No

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

Random staff were selected from all shift assignments. There were no barriers in completing interviews.

Specialized Staff, Volunteers, and Contractor Interviews

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

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

12

63. Were you able to interview the Agency Head?

- ☒ Yes
- ☐ No

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

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

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

	☒ Other
If "Other," provide additional specialized staff roles interviewed:	Facility Manager
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☐ Yes ☒ No
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	0
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☒ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	Random staff were selected from all shift assignments. There were no barriers in completing interviews.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	The Auditor had full, unimpeded access to all areas of the facility. During the review of the physical plant, the Auditor observed the facility layout, staff supervision of inmates, security rounds, interaction between staff and inmates, shower and toilet areas for inmates, observation of availability of PREA information located adjacent to and in the inmate housing areas, observation of staff communication in inmate housing units, search procedures, and availability access to medical and mental health services. The Auditor observed the video monitoring system and camera placement throughout the facility, including reviewing control room monitors.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☒ Yes ☐ No

78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

The Auditor conducted a review files, documents, PAQ, logbooks and other institutional forms. The Auditor reviewed documentation to determine compliance of standards for hiring, promotion, and background check procedures for officers and contract staff. The Auditor reviewed the annual PREA training rosters maintained by the training staff and cross referenced the staff files with the training rosters to ensure training was verified. The training coordinator explained the process for relaying the mandated PREA information to new employees, as well as the procedure for annual refresher training. Reviewed inmate files to evaluate intake procedures, including screening, housing assignments, and verification of inmate PREA education. The Auditor requested additional supporting documentation that included training records, inmate classification records, volunteer records, contractor records, and staff personnel files including PREA disclosure forms relevant to hiring and promotions.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

0

a. Explain why you were unable to review any sexual abuse investigation files:

The facility reported there had been no offenses committed to file.

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	The facility reported there had been no offenses committed to file.
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The facility reported there had been no offenses committed to file.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

☐ Yes

☒ No

Non-certified Support Staff

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

☒ Yes

☐ No

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

1

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

☐ The audited facility or its parent agency

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

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

☐ Other

Identify the name of the third-party auditing entity

Diversified LLC

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.11 Zero Tolerance of Sexual Abuse and Sexual Harassment Policy, Materials, Interviews and Other Evidence Reviewed: CDOC AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention PAQ Employee PREA Training Curriculum Inmate Handbook Organizational Chart Interviews

	CDOC Administrative Directive 6.12 outlines the facility's approach to implementing practices covered by the agency PREA directives. CDOC PREA directives mandate a zero-tolerance policy on all forms of sexual abuse and harassment and provide definitions of prohibited behaviors. The PREA directives serves to unify the agency's approach to implementing the PREA standards which are covered by a network of policies relative to segregation, employee training, inmate placement, and health care. The agency's PREA Coordinator oversees and coordinates the efforts of CDOC to comply with PREA Standards through development and implementation of policy, staff training, and inmate education. The PC coordinates the collection of data and is responsible for the preparation of each three-year cycle audit. In response to the standards, each CDOC facility, including Brooklyn CI, has assigned a PREA Manager with sufficient time and authority to coordinate the facility's efforts to comply with the standards. The PREA Manager ensures the facility works to achieve compliance of all standards and the PC is responsible for monitoring and aiding in areas that include staff training, education, reporting, documentation, and investigation of PREA-related allegations. The PM may serve as a member of the Incident review team and serve as contact for issues related to PREA requirements. Conclusion: Based on the Auditor's review of related policy, memos, Organizational charts, and staff interviews, it is determined that BCI meets the mandate for this standard.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.12 Contracting with Other Entities for the Confinement of Inmates Policy, Materials, Interviews and Other Evidence Reviewed: Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention PAQ MOU's Interviews CDOC PREA directives state that the agency will include in any new contract or contract extension, pertaining to the confinement of inmates, the obligation for the contractor to adopt and comply with all PREA standards. The Agency will provide

	contract monitoring for any new contract or contract extension listed above to ensure the contractor complies with the PREA Standards. The contracted vendor must comply with the Federal Prison Rape Elimination Act (PREA), 28 CFR Part 115 and must immediately refer any allegations of sexual abuse or sexual harassment made by a violator to the State's site coordinator. The vendor will ensure compliance with the National Standards to Prevent, Detect and Respond to Prison Rape, effective August 20, 2012. The Contract Manager, or designee will serve as the lead for all contract-related issues and will assist in facilitating meetings, determining service level agreements, overseeing the transition, and working with the CDOC program staff to ensure the contractual requirements are being met. The PREA coordinator is responsible for reviewing compliance with each CDOC institution including contracting institutions. The PC is responsible for monthly PREA reports, annual reports, investigating all allegations of sexual abuse or sexual harassment, and conducting yearly reviews of the contracted facilities for compliance with PREA standards. CDOC has secured or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit. Such contracts require contractors to adopt and comply with PREA standards. Additionally, the contracts do require CDOC to monitor the contractor's compliance with the PREA standards. Conclusion: Based on staff interviews and document review, the facility meets this standard.
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.13 Supervision and Monitoring Policy, Materials, Interviews and Other Evidence Reviewed: Administrative Directive 2.15. Hazardous Duty Staff Deployment Unannounced PREA Rounds Annual Staffing Plan Shutdown Roster Camera Diagram

Staffing Plan

Shift Roster

Adm. Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention

BCI Annual Review

CDOC Directive 6.12 states that the facility will complete a staffing plan prior to opening a facility and will continue to review at a minimum of once a year. CDOC directives state that all facilities, including contracting facilities, will complete a staffing plan yearly and submit the report for review and approval. Interviews with the Warden and executive staff verified compliance with the standard. Safety and security issues are always a primary focus when they review their respective staffing plans. The audit included an examination of video monitoring systems, staff interviews, annual staffing review, and staffing rosters. Supervisory staff make unannounced PREA rounds throughout the units and document.

The Staffing Plan review will be documented on the annual review and maintained by the facility with a copy forwarded to the PC. In circumstances where the staffing plan has deviations, the facility documents with the justifications noted. The most common reasons for deviations are short term disability, emergency medical leave, inmate medical transportation, In-service/training, annual leave, and retirements.

The Auditor observed staff conducting daily rounds to ensure visibility, safety of inmates, and the opportunity for access to supervisory staff. When conducting rounds, staff identify unusual activity, safety concerns, security improvements, directives, and possible PREA violations. The Warden, Associate Warden, and supervisory staff conduct PREA rounds, and staff are prohibited from alerting other staff members when supervisory rounds are being made.

The facility staffing plan is developed with minimum operational staffing levels in mind and the Auditor reviewed a staff roster to ensure adequate staffing for critical and non-critical post. The security staff post assignments are managed by correctional supervisors. Management staff support all efforts to provide adequate staffing levels and make necessary adjustments to comply with the facility's staffing plan. The facility utilizes overtime and draft procedures to fill any vacated critical post during a shift. Daily security staff rosters requested and reviewed by the Auditor reflected changes made and the reason for each change. Review of post assignment rosters identified that correctional staff were able to maintain compliance within the staffing plan requirements.

The staffing plan appears satisfactory in the facility's efforts to provide protection against sexual abuse and harassment of inmates. Staffing totals are considered to ensure safety of inmates with medical or mental health needs, disabled, and LEP inmates. The Auditor observed cameras throughout the facility and observed interactions between staff and inmates during the tour.

Conclusion: Based on the review of the Staffing Plan, quarterly post assignment, daily

	post assignment rosters, interviews, and review of unit logs, the Auditor determined the facility meets the mandate for the standard.
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14 Youthful Inmates CDOC Administrative Directive 6.12 Interviews PAQ The Auditor reviewed BCI directives, which states that youthful inmates will not be placed in a housing unit in which the inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom, shower area, or sleeping quarters. The Auditors interviewed staff who stated they had no knowledge of youthful offenders being housed at the facility during this audit cycle. The PAQ, documentation review, and interviews with staff confirm that there have been no youthful inmates housed at the facility. Conclusion: Interviews with the Warden, PREA manager, and PREA coordinator, confirmed that BCI does not house youthful offenders. The Auditor determined the facility is compliant with the standard.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.15 Limits to Cross-Gender Viewing and Searches Policy, Materials, Interviews and Other Evidence Reviewed: CDOC – AD 6.1 Tour and Inspections

CDOC – 6.7 Searches Conducted in Correctional Facilities

CDOC Administrative Directive 6.12

Staff Training Records

Cross Gender Announcement

Interviews

AD 6.12 mandates that Cross-gender strip or cross-gender body cavity searches are prohibited, except in emergency situations or when performed and documented by a medical practitioner. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. Interviews with staff confirmed that they were aware of the restrictions of visual body cavity or strip searches of the inmates of the opposite sex except in exigent circumstances.

Staff interviews confirmed that officers have been trained to conduct cross-gender pat searches and they receive annual training. The PAQ listed zero cross-gender strips or cross-gender visual body cavity searches of inmates in the previous 12 months. Interviews with inmates concluded they have not been subjected to any occurrences in which they were exposed to cross-gender viewing by staff during a strip search or visual search.

Directives state that a licensed physician, physician's assistant, or nurse practitioner are the only one authorized to conduct a body cavity search. Medical personnel who perform a body cavity search need not be of the same sex as the prisoner being searched and other persons who are present during the search will be of the same sex as the inmate.

Routine strip searches or visual body cavity searches occur in authorized areas and searches based on reasonable suspicion require the Warden's authorization.

Female correctional officers may pat-search inmates of both genders and strip searches are performed exclusively by staff of the same gender. The facility provides training on searches, restraint application, and body scanning devices. Training topics and definitions were found to be consistent with the standards.

The PAQ noted that staff have received PREA training and Search Training. Staff interviewed stated they received PREA training during pre-service and annual service training sessions. The Auditor was provided training rosters identifying security staff's completion of the required PREA training facilitated utilizing the facility lesson plan.

Staff interviewed stated that the opposite gender staff must announce themselves when entering a housing unit and the Auditor observed the practice during the facility tour. Inmates acknowledged that when a female staff entered the male housing units, the opposite gender announcement was made by assigned housing unit officer or by staff entering housing unit.

	The PM confirmed procedures were developed that allow inmates to shower, change clothes, and use the toilet without being viewed by staff of the opposite gender. The Auditor toured the facility and was granted access to all inmate housing units and other support areas. The Auditor observed shower and restroom areas in the facility and confirmed that inmates could shower and use the restroom without staff of the opposite gender seeing them without clothing. Conclusion: Based on the review of policies, documents, training rosters, and interviews, the Auditor determined the facility meets the provisions of this standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.16 Inmates with Disabilities and Inmates who are Limited English Proficient Policy, Materials, Interviews and Other Evidence Reviewed: Interviews AD-05-25 -Interpreter Services American Sign language CDOC directives 10.12 Inmate Orientation CDOC directives 10.19 American with Disabilities Act Inmate Computer Tablet Language Line Services (State Agencies and Political Subdivisions Telephone Translation and Interpretation Services) CDOC Directive 6.12 Sex Abuse/Sexual Harassment Prevention/Intervention PREA Brochures English/Spanish Inmate Orientation Handbook Administrative Directive 10.19 states that inmates with disabilities and inmates who have limited English will not be discriminated against and the facility will provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act. The directive states the facility will take steps to ensure that inmates with disabilities, including those who are deaf,

	blind or have intellectual limitations, have an equal opportunity to participate and benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and harassment. BCI directives are written in accordance with Standard 115.16 and states that the PREA manager is responsible for development and distribution of educational materials. The materials are related to the education of inmates regarding the Agency's zero tolerance for sexual abuse and sexual harassment, or retaliation for reporting or participating in a related investigation. Educational materials include information on treatment, advocacy, and counseling services provided. BCI directives state that the facility will provide PREA education in formats understandable by the inmate population and if needed, the facility will provide aid by Interpreters. Inmate assistants will only be utilized in limited circumstances where an extended delay in obtaining a specialized interpreter could compromise an inmate's safety. The Warden confirmed that the agency is taking significant steps to ensure that materials are provided in various formats to include closed captioning of the PREA inmate video, computer tablets, and formatted in multiple languages. Posters displaying PREA reporting information were observed in housing units in English and Spanish and the Auditor verified the translation service provided by the facility. Inmates entering the facility are provided a written copy of the Zero Tolerance for Sexual Abuse and Sexual Harassment and provided PREA education within 30 days of arriving at the facility. Inmates are required to sign as verification of receipt of the inmate computer tablet and PREA education. Conclusion: The Auditor reviewed the Agency's policies, procedures, Zero Tolerance for Sexual Abuse and Sexual Harassment handout, Language services contract, inmate files, and training records. The Auditor determined the facility meets the requirements of this standard.
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.17 Hiring and Promotion Decisions Policy, Materials, Interviews and Other Evidence Reviewed: Employee Handbook

Contractor Records

Background Investigation Questionnaire

AD 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention

AD 2.3, Employee Selection, Transfer and Promotion

Interviews

PAQ

AD 2.3 requires all employees, contractors, and volunteers to have criminal background checks completed. CDOC directives state that the facility will not knowingly hire any new employee, promote any existing employee, or enlist the services of any contractor who has contact with inmates that 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), been convicted of engaging in, attempting to engage in or conspiracy to engage in sexual activity facilitated by force, overt or implied threats of force or if the victim did not consent or was unable to consent or refuse, or been civilly or administratively adjudicated to have engaged in the activity described above.

The directives require that once every five years criminal history checks are processed for BCI employees and the facility can authorize a NCIC at any time within the five-year period if requested. The criminal history checks will be completed and documented to include a review for personal protection orders and domestic violence offenses.

Any information produced from the criminal history check that has not been previously reported or investigated will be referred to reviewing staff for investigation. The facility performs criminal background checks through the CDOC Background division and are conducted on all staff to include volunteers and contractors who work at the facility. Contractors and volunteers who have contact with inmates at the facility will have an annual criminal history check processed and any information that has not been previously reported or investigated will be referred for investigation. The facility does not hire any staff that have engaged in sexual abuse or harassment.

BCI requires that all applicants apply for positions and complete the employment application packet which includes PREA questions. If any of the PREA questions are answered "yes" by the applicant, the applicant will be ineligible for employment if an abuse or harassment is confirmed. The application also contains a statement that must be acknowledged by the applicant stating they understand that any false information provided could result in termination or prosecution. Any instances of sexual harassment are used in determining whether to hire or promote anyone or enlist the services of contractors who may have contact with inmates. Each new employee and contractor will undergo a background check and will not offer employment if there is disqualifying information. Reference checks are performed at

	this level of the process and if the applicant has worked at another correctional facility, the facility may be contacted. In addition, any applicant applying for a promotion is required to answer the questions regarding any PREA related cases in which they were involved. Conclusion: The Auditor conducted a review of the Agency's policies, procedures, and interviewed staff. The Auditor determined the facility meets the requirements of this standard.
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.18 Upgrades to Facilities and Technologies Policy, Materials, Interviews and Other Evidence Reviewed: Interviews Observations Administrative Directive 6.12 New Camera Locations AD 6.12 states that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the effect of the design, acquisition, expansion, or modification and the facility's ability to protect inmates from sexual abuse, will be considered. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the ability to protect inmates from sexual abuse will be carefully reviewed. During interviews with the PREA coordinator and PREA manager, it was noted that the facility maintenance supervisor and the PM would discuss any projects at the facility to ensure compliance with the PREA standards. The Warden and PM stated that when installing or updating a video monitoring system, the facility considers how such technology is needed to facilitate their ability to keep inmates from sexual abuse. Facility staff monitor the institutional cameras to identify any areas that may need additional coverage. Conclusion: During review of documentation and interviews with staff, the Auditor determined that the facility meets the provisions of this standard.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.21 Evidence Protocol and Forensic Medical Examinations Policy, Materials, Interviews and Other Evidence Reviewed: Interviews Investigator Training Evidence Protocol AD 8.1 Scope of Health Services MOU-Connecticut Sexual Assault Crisis Services MOU Connecticut State Police (CSP) AD 6.9 Collection and Retention of Contraband and Physical Evidence Administrative and criminal investigations are completed on all allegations of sexual abuse/sexual harassment and facility investigators and CSP staff are trained in conducting sexual assault investigations in confined settings/prisons. A review of training documents confirmed that investigators received training in conducting sexual assault investigations BCI directives state that PREA investigations of sexual abuse or sexual harassment will be completed by staff who have received specialized investigator training as outlined in the PREA directives. Investigations will be conducted promptly, thoroughly, and objectively in accordance with the Sexual Abuse/Sexual Harassment Investigations protocol. DOC trained investigators conduct administrative investigations on allegations of sexual abuse and sexual harassment. The Connecticut State Police conduct investigations and criminal prosecutions on behalf of the CDOC. The PREA Investigative unit will serve as an investigative liaison between the CDOC and correctional facilities. During a PREA investigation, facility staff are required to preserve the crime scene until an outside investigator arrives to collect and process physical evidence from the scene. The facility investigation will be coordinated to prevent any obstacle that would interfere with a prosecution and to remain informed of the status of the investigation. The facility's investigation will proceed in accordance with CSP protocol regardless of whether the referral results in criminal prosecution. Agency investigators are trained using the Crime Scene Management and Preservation training modules and the facility provides documentation of staff

	training. The training includes material reference and sources from the U.S. Department of Justice's office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, PREA Audit Reporting, and Crime Scene Management & Preservation. Additionally, investigative staff complete the NIC PREA investigator training course. CDOC has a MOU with Connecticut Alliance to End Sexual Violence for emotional support services. Inmates are made aware of the confidential emotional support services available to them in the Inmate Handbook and on PREA posters displayed throughout the facility. A Rape Crisis center member is available to accompany and support a victim through the forensic medical examination process, investigatory interviews, and to provide emotional support, crisis intervention, information, and referrals. Staff at Connecticut Alliance to End Sexual Violence are trained to accompany inmates during forensic examinations. The facility does not employ SAFE or SANE staff and forensic examinations are provided at a local hospital. Conclusion: Interviews with staff and support documentation, confirm compliance with this standard. The Auditor determined that the facility meets the requirements of this standard.
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.22 Policies to Ensure Referrals of Allegations for Investigations Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.6 Reporting of Incidents AD 6.12, Inmate Sexual Abuse/Sexual Harassment AD 1.10 Investigations Investigator Interviews Critical Incident Report Form PREA Checklist Form 6202

	BCI directives are written in accordance with Standard 115.22 and require that an investigation be completed for allegations of sexual abuse and harassment. Wardens will ensure that information on allegations of inmate-on-inmate sexual abuse or sexual harassment, employee sexual abuse or sexual harassment, or employee overfamiliarity accusations, are entered into the CDOC database and promptly investigated and referred for a criminal investigation, if warranted. Each sexual abuse or sexual harassment investigation has an investigation worksheet completed for cases reported verbally, in writing, anonymously, or from third parties. The Warden will refer the allegation as soon as possible, but no later than one business day after the report is made. Once the investigation is closed, a notification is made to the inmate advising the outcome of the case. A review of training documents confirmed that investigators received specialized training instruction in conducting sexual assault investigations in prisons. The facility PM, supervisors, and investigators work closely to ensure that allegations of sexual abuse and harassment are investigated. If an inmate alleges a sexual assault or sexual harassment has taken place, the staff member will notify the supervisor to initiate the initial report. The supervisor will complete the PREA First Responder checklist and complete the Request for Investigation packet, which will be forwarded to PREA Unit staff and PM for review. The PU investigator coordinates with the PM to determine the course of action, and the PC is notified. The CSP conducts all criminal investigations for the facility and will be notified if there are suspected potential criminal charges. If the case is prosecutable, a referral is submitted. Conclusion: The Auditor conducted interviews, observed daily assignments, and determined the facility is compliant with provisions of this standard.
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.31 Employee Training Policy, Materials, Interviews and Other Evidence Reviewed: CDOC - AD 6.12 Sexual Harassment Prevention and Intervention AD 2.7 Training and Staff Development AD 10.12 Initial Orientation

	Training Module PAQ Staff Interviews Annual Refresher Training Packet-LMS PREA Training Curriculum Pre-Service/In-Service Orientation Training Certificates CDOC directives require that facility employees, student assistants, unpaid student interns, and contractors working inside a correctional facility or field office, which includes employees of other State agencies, are required to successfully complete service training in accordance with the requirements set forth in policy directives. In accordance with the PREA policy, employees are required to complete PREA training each year. Training is completed annually electronically to aid in fulfillment of annual training requirements and to ensure each employee remains abreast of policies and procedures regarding sexual abuse and harassment. The facility provided the Auditor copies of the facility's PREA curriculum, training documents, certificates of completion, and training acknowledgement forms. Training documents referenced Zero tolerance, definitions of sexual abuse and sexual harassment, staff duty to report third party allegations, staff neglect and misconduct, anonymous allegations, how to report, supervision and monitoring, employee training, and limits to cross gender viewing. The training materials that were provided for review adequately cover the dynamics of sexual abuse. Conclusion: The Auditor determined the facility meets the requirements of this standard.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.32 Volunteer and Contractor Training Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Sexual Harassment Prevention and Intervention PREA Acknowledgement, Medical Staff

	Administrative Directive 2.7, Training and Staff Development Staff Interviews PAQ Brooklyn CI provides standardized training for all new employees, contractors, vendors, student interns, and volunteers who provide services at facilities. Vendors who have direct continuous supervision by facility staff are required to review the PREA training modules and provide a signature for verification. The Auditor reviewed the training curriculum, training rosters, and training files to verify contracted employees and volunteers have received the required training. New contractors and volunteers are given PREA training during their orientation before assuming their duties and are required to sign a verification form as acknowledgment they have received the information. Any volunteer or contractor who may have contact with inmates, will be trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Interviews with staff verified they were provided information relevant to respectful interactions with inmates, physical boundaries, and overfamiliarity. Staff were knowledgeable of their responsibilities to both report incidences of sexual abuse and sexual harassment, as well as how to respond as a first responder to preserve potential evidence and where to report. The facility's training curriculum for contractors and volunteers sufficiently addresses the concepts of sexual abuse, sexual harassment, reporting, and response procedures. Conclusion: The Auditor concluded the facility is appropriately training volunteers, contractors, and staff. The facility ensures documentation of training is maintained. The Auditor determined through a review of agency policies, procedures, training curriculum, acknowledgment forms, and interviews, that the facility meets the requirements of this standard.
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.33 Inmate Education Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Sexual Harassment Prevention and Intervention

AD 2.7, Training and Staff Development

Volunteer Training

Interviews

Inmate Tablet PREA APPs

PREA Education

Inmate Handbook (English and Spanish)

PREA Posters

Inmate Training Records

AD 9.3 Inmate Admissions, Transfers, and Discharges

AD 10.12 Inmate Orientation

PAQ

CDOC administrative directives are written in accordance with Standard 115.33 which states all inmates will receive comprehensive PREA education during intake and upon transfer from another facility within 30 days of arrival. Upon 72 hours of arrival at a facility, an inmate will receive educational material on Zero-tolerance, how to report, name of the facility PM, contact information for outside reporting, victim advocate services, and emotional support services. In accordance with directives, inmates will receive orientation upon arrival at BCI, and the Warden will develop and maintain an orientation program.

During intake processing, inmates receive comprehensive PREA information explaining the Agency's zero-tolerance directives regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. This information is provided in writing and during video presentation. Topics covered during inmate education include Inmates' rights to be free from sexual abuse and sexual harassment, retaliation for reporting such incidents, available methods to report incidents, and agency policies and procedures for responding to such incidents.

Interviews with the PM and inmates verified PREA training are provided by classification staff or other unit management staff. Staff also issue a brochure that covers the Zero-tolerance directives, definitions of sexual abuse, sexual harassment, retaliation, how to report sexual abuse, process required following a report, available services to victims, and sexual abuse avoidance.

During intake processing, classification staff are required to create a file review to ensure that documentation of all PREA education sessions are verified. The Auditor reviewed inmate files and transfer records to verify that PREA education/assessment

	was provided in a timely manner. As part of the facility's intake and receptions process, each new reception file is reviewed, and it is verified that the inmate has documented the receipt for training. The facility utilizes a dedicated phone line that contacts Language Link Interpretive services for disabled or LEP inmates. The facility maintains copies of PREA training materials, The PREA Resource Center's "An End to Silence", and Agency PREA publications. The PREA video is closed captioned for the deaf or hard of hearing population. The Auditor observed the facility actively advertises and promotes PREA resources throughout the facility, Conclusion: The Auditor determined compliance, and the facility meets the requirements of this standard.
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115.34 Specialized training: Investigations	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.34 Specialized Training: Investigations Policy, Materials, Interviews and Other Evidence Reviewed: Investigator Training Certificates CDOC- AD 6.12, Sexual Harassment Prevention and Intervention NIC Certificates Basic Investigator Training Interviews PAQ CDOC directives are written in accordance with standard 115.34. Investigations of sexual abuse or sexual harassment will be completed by employees who have received specialized investigator training as outlined in the PREA standard. All investigations will be conducted promptly, thoroughly, and objectively in accordance with the Sexual Abuse/Sexual Harassment investigations portion of the PREA standard. Facility investigators are required to receive specialized training to conduct sexual abuse investigations in confinement settings. The facility utilizes the Investigator training manual which provides additional specialized training for investigators to assist in PREA administrative investigations. This investigative course covers PREA topics that include, Dynamics of Sexual abuse

	within Confinement settings, Interview techniques for victims of Sexual abuse, Preservation of evidence, employee rights, and Garrity and Miranda rights. The evidentiary standard of preponderance of evidence is noted within the training referencing administrative investigations. The training provides guidance on the requirements and procedures for referring potential PREA criminal acts for criminal investigation and prosecution. The Auditor verified training for investigators, and the facility maintains electronic documentation of investigator training in the staffs training file. Conclusion: The Auditor concluded the facility has provided appropriate training for its investigators on investigative techniques. The Auditor conducted a review of policies, directives, training curriculum, training records, investigative reports, and conducted interviews to determine the facility meets the requirements of this standard.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.35 Specialized training: Medical and Mental Health Care Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Sexual Harassment Prevention and Intervention AD 8.6 Credentials for Health Service Staff AD 2.7 Training and Staff Development Medical In-service Training PREA Acknowledgement Health Care and Mental Health Training Interviews CDOC directives require that all staff members receive PREA training in accordance with Standard 115.31. All part- and full-time mental health and medical staff members receive additional specialized PREA training. Student assistants, unpaid student interns, agency employees, who work inside a correctional facility or field office, are required to successfully complete in-service training in accordance with the requirements set forth in policy. The Auditor reviewed the facility training curriculum specific to medical staff and materials concurrent with the training module that covers the four points required by PREA standards. Training materials cover the detection of sexual abuse and harassment, preservation of evidence specific to facility responsibility, how to

	respond to victims of sexual abuse and sexual harassment, and facility reporting responsibilities for allegations of sexual abuse and sexual harassment. Medical and mental health practitioners at BCI receive training beyond the standard's minimal requirements. PREA directives establishes procedures for ensuring facility employees and contract staff are adequately trained based on their positions within the facility. The facility provided documentation of medical and mental health practitioners having completed the PREA training modules related to their specific departments. During the Auditor's tour, medical and mental health staff confirmed that they have received computer-based training that covers the standard requirements. The Auditor interviewed medical and mental health supervisors who were knowledgeable of the training offered and confirmed having received the general and specialized training during part of their hiring protocol and annually during in-service. A review of their training documentation provides evidence that the training has been provided, and the participants understand the requirements of PREA. Conclusion: Based on the Auditor review of the agency's directives, procedures, inmate records, and interviews, it was determined the facility meets the requirements of this standard.
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.41 Screening for Risk of Victimization and Abusiveness Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention Screening for Risk and Abusiveness AD 9.3, Inmate Admissions, Transfers and Discharges CN93602-Intake Screening Instrument PAQ 30 Day Review Documentation Interviews

	BCI administrative directives state that a transferred inmate will be screened within 72 hours of arrival at the receiving facility to identify any history of sexually aggressive behavior and risk of sexual victimization and staff will complete the PREA risk assessments in accordance with the administrative directives. The Auditor interviewed classification staff responsible for inmate Intake procedures. Classification staff stated that within 72 hours of admission, inmates are screened for risk of sexual abuse victimization and predatory behavior. Referrals to medical are initiated by screening staff if needed. Inmates interviewed stated they had been asked PREA related questions during intake orientation. Administrative directives delegate that inmates will have a PREA assessment conducted during the initial intake screening and upon transfer to another facility. The agency's database and risk assessment tools are used to determine an inmate's risk, and assessments are completed using information contained in the inmate's file, agency databases, and information obtained during inmate interviews. Inmates interviewed during the risk screening are not disciplined for refusing to answer interview questions. The initial screening considers prior acts of sexual abuse, convictions for violent offenses, and the history of prior institutional violence or sexual abuse. Review of inmates' files and supporting documentation requested by the Auditor indicates an initial screening and 30-day reassessment had been conducted. An inmate's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information of an inmate PREA risk. During the initial screening, inmates are asked about their sexual orientation and how safe they feel. This information and the staff's perception of the inmate is documented. The Auditors interviewed staff who conduct screenings, and they stated the risk screening are completed within 72 hours and PREA risk assessments were reviewed. The Auditor reviewed inmate files, intake records, and risk screenings to confirm the screenings were documented. Conclusion: The Auditor reviewed policies, procedures, and inmate records, made observations, conducted interviews, and determine the facility meets the requirements of this standard.
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.42 Use of Screening Information Policy, Materials, Interviews and Other Evidence Reviewed:

	AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention Inmate Housing Assignments Classification Procedure-Inmate Job Assignments PAQ HRSA/HRSV CDOC administrative directives require that the facility will consider housing for inmates on a case-by-case basis to ensure the health and safety of the inmate and take into consideration any potential management or security problems. The directive also stipulates that inmates will not be placed in a dedicated facility, unit, or wing solely based on such identification or status, unless the placement is established in connection with a consent decree, legal settlement, or legal judgment. The Auditor reviewed inmate classification records that confirmed individualized considerations for each inmate were made when determining their housing, cell, work, and other assignments to ensure each inmate's safety in the facility. Staff are responsible for entering information into the facility Classification Data system to ensure HRSV inmates are not placed in a work assignment, cell, or education assignment with those identified as potential abusers. The Auditor verified that classification staff conduct risk screening for each inmate during the intake process. The screening tool includes sections for the staff to document their perceptions of the inmate vulnerability. The Auditor toured facility housing units and observed inmates can shower, change clothes, and use the restroom without staff of the opposite gender seeing them without clothing. The facility utilizes an assessment process to arrive at the inmate's classification status during the intake process. When an inmate is classified as HRSV or HRSA, it is the responsibility of the staff member conducting the screening, to document the information and submit medical referrals. An inmate that is determined to be at high risk for victimization will not be placed in the same cell or programming assignments as an inmate that has been determined to be at high risk for abusiveness. It is the responsibility of screening staff to check the status of each inmate being placed in a job assignment to prevent possible victimization or harassment. Conclusion: The Auditor reviewed policies, procedures, inmate records, made observations, and conducted interviews to determine the facility meets the requirements of this standard.
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Auditor Overall Determination: Meets Standard
Auditor Discussion
115.43 Protective Custody Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention BCI Unit Classification Procedure Screening for Risk and Abusiveness Inmate Housing Assignments Interviews BCI directives state that inmates at high risk for sexual victimization or who are alleged to have suffered sexual abuse will not be placed in involuntary segregation unless an assessment of all available alternatives is complete, and a determination has been made that no less restrictive means of separation from likely abusers exist. If the review cannot be conducted immediately, the inmate may be held in temporary segregation for up to 24 hours while the review is completed. If no less restrictive means of separation from the abuser or likely abusers exist, the inmate will be assigned to temporary segregation for a period not to ordinarily exceed thirty calendar days. The facility ensures that inmates at high risk of victimization are not housed with inmates at high risk of predatory behavior and the facility takes adequate measures to ensure individualized safety needs are considered. The facility reported that there were no instances of inmates being placed into involuntary segregation for risk of victimization. The Warden stated that segregation is not used to protect inmates at high risk of sexual victimization unless it is the only means of keeping an individual safe. Such placement is limited to less than 24 hours to be reviewed by the security housing committee for appropriate housing within the facility or transferred to a different facility. The facility does not have a restrictive housing unit, but staff are aware that inmates housed in restrictive housing maintain access to recreation, educational programming, and religious programming to the extent administratively feasible and can be safely afforded. In the event of restrictions, the facility is required to document the nature of the restrictions. Staff at BCI are knowledgeable of the directive and their responsibilities regarding this standard. Staff interviewed stated they would conduct an immediate assessment of available housing alternatives prior to placing inmates in special management housing. Staff must assess and document all available alternatives prior to placing an

	inmate at high risk of sexual victimization or an inmate who has alleged sexual abuse or sexual harassment in involuntary segregated housing. Staff stated that an inmate identified as HRSA would be moved to another housing location and not placed in segregation unless it was a temporary placement to keep the inmate safe until the investigation was complete, or the inmate requested protective custody. The PREA manager verified there were no inmates during the audit period that had been placed in restrictive housing involuntarily to separate them from potential abusers. Conclusion: The Auditor reviewed policies, procedures, Sexual Abuse/Sexual Harassment available alternatives, risk assessment form, and conducted interviews. Based on the reviews, the Auditor determined the facility has demonstrated compliance with the provisions and meets this standard.
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.51 Inmate Reporting Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12 Inmate Sexual/Abuse Harassment Prevention Grievance Form 9602 Inmate Orientation Handbook PREA Signage Interviews BCI directives states facilities must provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation, staff neglect, and violation of responsibilities which may have contributed to such incidents. The policy designates multiple mechanisms for the internal reporting of sexual abuse and harassment, retaliation by other inmates or staff, as well as reporting conditions that may have contributed to the alleged abuse. The facility directives state that inmates may privately report sexual abuse, sexual

	harassment, retaliation by other inmates or staff, staff neglect, or dereliction. Inmates can file reports verbally or by writing any staff member, Agency PREA division, or via third parties. The facility has added a new computer application to the inmate tablets that allow a direct link to PREA resources and provide the inmates the ability to make a direct call to a PREA hotline number. The inmates can use a grievance form to report sexual abuse and sexual harassment, retaliation, and staff neglect that may have contributed to a PREA claim. Inmates are not required to resolve an incident of sexual abuse or sexual harassment with staff or submit the grievance to the staff member who is the subject of their allegation. When receiving any report of sexual abuse or sexual harassment, regardless of the source, staff will promptly document and forward the complaint to the appropriate staff for investigation and notify the institutional PREA manager. Facility staff were aware of their obligations to accept reports from inmates and document the allegations. Staff may privately report sexual abuse or harassment of inmates either verbally or in writing to their supervisors or Warden. Staff members are informed of these avenues during annual PREA training and are aware they can contact any facility member, PM, or PREA coordinator, to report sexual abuse or harassment of inmates. Information for inmate and staff reporting was found on the CDOC website https://www.CDOC.com/PREA. Third party reporting posters and the employee handbook informs staff of their responsibility to report sexual abuse and sexual harassment. Staff interviewed were aware of the PREA hotline number and a website address for anonymous reporting. BCI provides the inmates a third-party line to a Victim Advocate hotline for reporting any abuse or harassment and they can write to the CSP. There were not any inmates at the facility detained solely for civil immigration purposes. Conclusion: The Auditor reviewed the agency's policies, procedures, Inmate Handbook, grievances, investigative records, and conducted interviews. The Auditor determined the facility meets the requirements of this standard.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.52 Exhaustion of Administrative Remedies Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention

	AD 9.6 Inmate Administrative Remedies Interviews Inmate Handbook Grievance Procedure PAQ CDOC directives state that the facility has a grievance procedure in place for addressing inmate grievances. The Inmates are not required to use an informal grievance process to resolve an alleged incident of sexual abuse and are not required to submit a grievance to a staff member who is the subject of a complaint. The inmate can submit a CN9602 form which is part of the administrative remedy's procedure for anything other than sexual abuse or harassment. It provides a way for inmates to obtain a formal disposition of an issue or a problem from the Warden or Central office. A summary of the inmate Administrative Remedies Procedure is included in inmate handbook. The Inmate Administrative Remedy Form-CN9602 may be obtained from classification staff. Conclusion: Based on the review of policies, interviews, and analysis, the facility has demonstrated compliance with all the provisions and meets this standard.
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.53 Inmate Access to Outside Confidential Support Services Policy, Materials, Interviews and Other Evidence Reviewed: Inmate Handbook PREA Posters Interviews MOU-Connecticut End to Sexual Violence Acknowledgement Receipt of Handbook CN 100701 Internal Monitoring Form

	AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention CDOC directives state that facilities provide inmates with access to outside victim advocates for emotional support services related to sexual abuse. BCI has established a MOU with the Crisis Center, "Connecticut End to Sexual Violence," to provide counseling and emotional support services related to sexual abuse. The agency and facility work collaboratively to establish relationships with outside support services to provide inmates with these services. The facility advertises the availability of these resources on inmate bulletin boards within the housing units. Inmates are made aware of external communications monitored by staff and which lines are confidential and are not monitored. Signs posted in the inmate housing units include statements advising that PREA calls may be made anonymously and will not be monitored. Administrative directives require that inmates and staff be allowed to report sexual abuse or harassment confidentially and require that medical and mental health personnel inform inmates of staff limits of confidentiality. Interviews with medical and mental health staff confirmed they are aware of their obligations to inform the inmates of the limits of confidentiality with staff. There were posters located throughout the facility with PREA contact information provided. Inmates are informed of the services during intake, and the facility provides inmates information regarding confidential support services in the PREA brochure issued during orientation. Conclusion: Based on policy review, interviews, and contract, the facility meets the requirements of this standard.
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.54 Third-Party Reporting Policy, Materials, Interviews and Other Evidence Reviewed: Interviews Inmate Handbook PREA Posters PREA Investigation Hotline

	AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention CDOC AD 6.12 and BCI Website, provide avenues that meet the requirements of this standard, and the inmate handbook provides third party contact information. The Auditor reviewed the agency directives which state that inmates may report allegations of conduct prohibited. Threats of such conduct and retaliation for reporting can be reported verbally or in writing to any facility staff member, PREA hotline, or third-party avenues. The CDOC website, PREA notices, and the inmate handbook provide inmates with contact information to the Connecticut State Police, toll free numbers to CDOC, and Connecticut Alliance to End Sexual Violence 24 Hour Hotline. The website assists third parties in reporting allegations of sexual abuse and sexual harassment. Third parties can use the CDOC website to report PREA allegations electronically on behalf of inmates and facility staff stated that the agency publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates. Directives were reviewed that indicated that third parties, inmates, staff members, family members, attorneys, and outside advocates will be permitted to assist inmates in reporting. The agency website states that all allegations of sexual abuse should be reported and will be investigated. Conclusion: The Auditor reviewed PREA materials, policies, and made observations during the facility tour and determined the facility meets requirements for the standard.
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.61 Staff and Agency Reporting Duties Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.6 Reporting of Incidents Training Records Interviews AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Specialized Medical Training PREA Lesson Plan

	BCI directives require confidentiality of all information relevant to sexual abuse or harassment beyond what is required to be shared as a part of the report, treatment, or investigation. Agency directives state that reasonable steps will be taken to ensure the confidentiality of information obtained during the inmate risk assessment process. Policy states that anyone interviewed as part of a PREA investigation should be specifically warned not to discuss the investigation with others and staff that intentionally compromise this confidentiality will be subject to discipline in accordance with the Employee Discipline directive. This does not prevent staff from discussing such matters with their attorneys or in accordance with directives. BCI requires that all staff report sexual abuse and sexual harassment immediately to a supervisor or other staff member of a higher rank. Once the abuse is reported, staff are instructed not to discuss the allegation with anyone unless those staff are investigating the allegation, making security decisions, or providing services to the inmate victim. During interviews with staff, the Auditor determined staff understood their responsibility to report any suspicions they have regarding sexual abuse or sexual harassment of an inmate. The Auditor reviewed agency PREA training curriculum for staff, volunteers, and contractors. Staff are required to read the agency's PREA policies and sign receipt of attendance on an annual basis. The Auditor verified staff, contractors, and volunteers, had received PREA training that included policies on how to report serious or unusual information related to PREA. Staff understand the need to keep allegation information limited to those that need to know to preserve the integrity of the investigation. Staff interviewed stated that details related to either inmate allegations or staff allegations should remain confidential and should only discuss details with supervisors and investigators. Directives require that all medical and mental health personnel inform inmates of the mandatory reporting requirements and limits of confidentiality to victims of sexual abuse. Agency directives require medical and mental health staff to report any knowledge of sexual abuse within an institutional setting, and clinicians are required to disclose their duties to report to the inmate. Conclusion: It was determined through review of policies and interviews with the PM, and medical practitioners, the facility meets the provisions of the standard.
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.62 Agency Protection Duties

	Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention AD 9.9 Protective Management, Specialized medical training Interviews PAQ CDOC administrative directives are written in compliance with Standard 115.62 and require that whenever there is a report of sexual abuse or harassment, the victim should be immediately protected. The Auditor reviewed the facility directives which state that when an inmate is subject to substantial risk of imminent sexual abuse or is the alleged victim of sexual abuse, the facility will take immediate action to protect the inmate by preventing any contact between the alleged abuser and the alleged victim. Such actions can include housing changes, temporary segregation, reassignment, and immediate transfers. Staff interviewed by the Auditor were able to answer questions regarding what immediate actions were required by staff when learning that an inmate was at imminent risk of sexual abuse. Supervisory staff interviewed by the Auditor were knowledgeable of the options they have available to protect inmates which included transferring the inmate to a different housing unit at the facility or transferring the inmate to another facility. The Warden is required to review the actions within 48 hours to ensure appropriate measures have been taken to protect potential victims. Administrative directives require medical staff to immediately notify the Warden and recommend housing interventions or other immediate action to protect an inmate when it is determined the inmate is subject to a substantial risk. If medical staff determine during an assessment that an inmate is at risk of sexual abuse or is considered at risk sexual victimization, they will collaborate closely with the Warden and classification staff to provide alternative housing placement. Conclusion: The Auditor reviewed directives, procedures, conducted interviews, made observations, and determined the facility meets the requirements of this standard.
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.63 Reporting to other Confinement Facilities Policy, Materials, Interviews and Other Evidence Reviewed: Screening Instrument Interviews AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention AD 6.6 Reporting of Incidents PAQ Memo When a PREA allegation is received by any location other than a correctional facility, it will be reported using contact information located on the CDOC website. This includes any allegation received regarding sexual abuse and sexual harassment at a jail, State correctional facility, Federal prison, or a juvenile detention facility and any documents related to the allegation must be made available to the PREA manager for review. Administrative Directive 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention, mandates that when receiving an allegation that an inmate was sexually abused while confined at another facility, the incident will be reported to the PREA compliance manager. The Warden will notify the agency or facility head where the abuse is alleged to have occurred within 72 hours of receiving the allegation. The PM will maintain documentation of the Warden's notification and any other actions taken regarding the incident. Copies of this documentation will be forwarded to the PREA coordinator's office. The Auditor conducted interviews with facility staff who stated they would immediately report the allegation to their supervisor and submit an incident report including the details of the allegation as reported to them. The Warden and PM stated if they receive such notice, they will immediately report the allegation to the Warden at the facility of the alleged incident. The Warden stated that if an inmate alleges sexual abuse at another facility, BCI will place a telephone call followed by an email to Warden at the facility of the allegation to complete the notification process. The Warden stated they would notify their facility investigator, and an investigation would be immediately conducted. Conclusion: Compliance with this standard was verified by reviewing directives, interviews with investigators, PREA compliance manager, and Warden. The Auditor determined that the facility meets the requirements of this standard.
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.64 Staff First Responder Duties Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Staff training Specialized medical training. PREA Lesson Plan Investigator Training PAQ Interviews The Auditor conducted interviews with supervisory staff to determine what their role would be following a report of sexual assault. The supervisors stated that they would ensure the alleged victim and alleged abuser were removed from the area where the incident occurred and kept separately in the facility. The area of the incident would be secured and no one allowed in the area to disturb the evidence. The alleged victim would be taken to medical for treatment of any emergency needs and transported to the local hospital for a forensic exam if necessary. BCI directives require that if the first responder is not a security staff member, they immediately notify a security staff member. The Auditor conducted interviews with non-security personnel and asked what actions they would take following an alleged sexual abuse if reported to them. Staff stated they would ensure the victim remains with them and immediately inform an officer or supervisor. Medical personnel interviewed stated they would first assess a victim's emergency medical needs and would request the victim not to use the restroom, shower, or take any other actions which could destroy evidence. Medical staff informed the Auditor they would immediately notify a supervisor if they were the first person to be notified of an alleged sexual abuse and the victim would be transported off-site for a forensic exam. The Auditor reviewed the facility's training records for verification that sexual abuse training had been conducted. Review of training records for staff, contractors, and volunteers confirmed they had received training to appropriately respond to incidents of sexual abuse. The Auditor determined the facility has trained its staff in their responsibilities as a first responder to an incident of sexual abuse. Staff interviewed as part of this onsite audit were knowledgeable of their responsibilities as a first

	responder during an allegation of sexual abuse or sexual harassment. Conclusion: The Auditor reviewed policies, procedures, coordinated response plan, investigative reports, interviewed staff and determined the facility meets the requirements of this standard.
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.65 Coordinated Response Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Staff training AD 86.12 PREA Coordinated Response Interviews CDOC directives require each facility to develop a written plan to coordinate actions taken in response to an incident of sexual abuse. The facility has developed its own operating procedures for the coordinated response plan. BCI directives describe the procedures employed by the facility when responding to allegations of sexual abuse among supervisors, investigative staff, and facility leadership. A first responder checklist has been created which supplements the facility operating procedures and outlines staff duties in response to a sexual assault incident. BCI directives states each correctional facility will include in their operating procedures an institutional plan to coordinate actions taken in response to an allegation of sexual abuse. The plan includes Staff, Volunteer, and Contractor Responsibilities; First Responder (Security/Non-Security); Shift Supervisor Responsibilities; Medical Response; Investigator; Mental Health; PREA Compliance Manager; Administrative Response. The Auditor conducted interviews with staff listed in the facility's coordinated response plan and staff were knowledgeable regarding their specific duties. The Auditor determined the facility has prepared its staff to take appropriate actions in response to sexual abuse. The Auditor interviewed the Warden, investigator, medical staff, and PM, regarding the initiation of the coordinated response in the case of an allegation of sexual abuse or harassment. Staff understood their responsibilities and stated that investigations are completed timely, and a case finding is assigned.

	They stated that cases may be referred for criminal prosecution or investigated administratively. Staff stated that monitoring for retaliation is conducted and that a notice to the inmate victim disclosing the outcome of the case would be delivered once a determination is made. The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse and has appropriately trained their personnel to follow the plan. Conclusion: The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse and trained their personnel to follow the plan. Based on a review of the facility's policies, procedures, coordinated response plan, training records, and interviews, the Auditor determined that facility meets the requirements of this standard.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.66 Preservation of Ability to Protect Inmates from Contact with Abusers AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Inmates Memo Interviews PAQ A review indicated that there are no collective bargaining agreements that preserve the ability of the facility to remove alleged staff abusers from contact with inmates, consistent with provisions of the standard. The facility may take actions that include suspension of an employee during an investigation, and this suspension may continue until disciplinary actions are determined. The Warden confirmed that the facility maintains the right to assign staff. This Auditor confirmed that the agency has the right as the employer to remove alleged staff abusers from contact with inmates, consistent with provisions. Specifically, when warranted, the employer may take actions that include suspension of an employee during an investigation. This suspension may continue until the time

	when disciplinary actions are determined. Conclusion: The Auditor finds the facility compliant with this standard and meets the requirements.
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.67 Agency Protection Against Retaliation Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention PAQ Retaliation Monitoring Interviews The facility has protection and reporting measures for inmates relevant to Standard 115.67. The directives outline the protection measures available and require the prompt remediation of any type of retaliation. Any use of involuntary segregated housing for the inmate who has alleged to suffer sexual abuse will only be used if there are no other alternatives. Staff interviews verified the PM monitors staff retaliation for up to 90 days and retaliation may be monitored beyond 90 days if warranted. When a staff member is a party in the case, the staff member will be separated from the inmate and may receive disciplinary action commensurate with the type of behavior taken. If an inmate retaliates against another inmate, they will be kept separate from the other inmate by any means available. Other options to protect against retaliation may include protective custody, housing reassignments, or transfer to another facility. The BCI's policy is written in accordance with the standard and states retaliation by or against any party, staff, or inmate, who participates in a complaint or report of sexual abuse or sexual harassment, will be prohibited. Facility policy states both staff and inmates who cooperate with sexual abuse and sexual harassment investigations will be protected from retaliation from staff and inmates. The facility designates a supervisory staff member other than the direct supervisor, to monitor the incident and the staff member assigned will monitor retaliatory performance reviews, reassignments, and other retaliatory actions not substantiated.

	Supervisory staff will monitor disciplinary sanctions, housing/program changes, and conduct periodic status checks for inmates who report alleged victimization or abuse. Retaliation will be grounds for disciplinary action and will be investigated. If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility will take measures to protect that individual against retaliation, including ninety-calendar day retaliation monitoring if deemed necessary and retaliation monitoring ceases when an allegation is unfounded. Administrative staff have the authority to move inmates within the facility or to request transfers to other facilities to ensure inmates are not retaliated against. Inmates are not held in the special management housing unless requested by the inmate and the Auditor verified the facility has housing units available for inmate alternative placement. Conclusion: Staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members. The Auditor reviewed documents and determined the facility is compliant with this standard.
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.68 Post-Allegation Protective Custody Policy, Materials, Interviews and Other Evidence Reviewed: Risk Screening AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention PAQ Interviews BCI's directives are written in accordance with Standard 115.68 which requires the use of segregated housing to be subjected to the requirements of PREA standard 115.43. Facility directives prohibit the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and there are no available alternative means of separation from abusers. The Auditor determined by reviewing documentation and conducting interviews, that inmates have not been placed in involuntary segregation due to risk of victimization in the 12 months preceding this audit. The facility PM stated the facility did not place

	any inmates in protective housing due to being at high risk for sexual victimization during the past 12 months and will not use protective housing as a protective measure for a victim at high risk of sexual victimization unless requested by the inmate. Interviews with supervisory staff confirmed their knowledge of their responsibility to adhere to the standard requirements after a victim's allegation of abuse. There were no instances where protective custody or restrictive housing was used at this facility and none of the inmates interviewed by the Auditor had been placed in restrictive housing for their protection from sexual abuse. The facility does not maintain a restrictive housing unit and will use a transfer portal if restrictive housing is to be utilized. Conclusion: The Auditor reviewed directives, interviewed supervisory staff, reviewed documentation, and made observations. The Auditor determined the facility meets this standard.
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.71 Criminal and Administrative Agency Investigations Policy, Materials, Interviews and Other Evidence Reviewed: AD 1.10 Investigations - Inquiries and Administrative Investigations Investigator Certifications Interviews Investigator Training Records PAQ BCI directives are written in accordance with Standard 115.71 and states that all investigations into allegations of sexual abuse and sexual harassment will be conducted promptly, thoroughly, and objectively to include third party and anonymous reports. These documents indicate that when an allegation of sexual abuse or sexual harassment is received, whether reported verbally or in writing, will be investigated. Staff will ensure all allegations are referred to CSP in accordance with policy and in conjunction with the facility's administrative investigation. Referrals to law enforcement will be documented in the facility's investigative report, PREA investigation, and electronic database.

	The Warden will refer to the allegation no later than 72 hours after the report was made to the CDOC PREA Investigative Unit, creating an entry for each alleged incident. Facility policy requires that reports, regardless of their source of origination, be referred for investigation. BCI conducts investigations on all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports and that each sexual abuse allegation will have an investigator complete PREA sexual abuse investigation forms. It is the responsibility of the CDOC PREA Investigative Unit with the assistance of the facility investigators to gather and preserve circumstantial evidence, including physical evidence and DNA evidence. Investigators will interview alleged victims, suspected perpetrators, witnesses, and review prior reports of sexual abuse involving the suspected perpetrator. A facility investigator acknowledged that investigations are required to be initiated within 72 hours of being reported and the facility practice is less than 24 hours. All reports of sexual abuse and sexual harassment, including anonymous or third-party reports, are investigated in the same manner as those allegations that have been directly reported by an alleged victim. Facility directives require administrative investigations including efforts to determine whether staff actions or failure to act contributed to sexual abuse. Investigative reports are required to include a description of physical evidence, testimonial evidence, credibility assessments, and investigative facts or findings. Credibility assessments are conducted as part of the investigative process and the assessments are conducted on all parties involved. The facility is required to maintain written investigative reports for as long as the alleged abuser is incarcerated or employed by the facility, plus an additional time in accordance with BCI directives. Policy prohibits the termination of an investigation if an inmate is released, or a staff member is terminated or resigns. The Connecticut State Police (CSP) is identified as the primary criminal investigative unit for the CDOC. Conclusion: The Auditor reviewed directives, conducted interviews, and determined the facility meets requirements for this standard.
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.72 Evidentiary Standard for Administrative Investigations Policy, Materials, Interviews and Other Evidence Reviewed: AD1.10 Investigations - Inquiries and Administrative Investigations AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Investigator Training

	Certifications (Investigators) PAQ Interviews BCI's directives follow the requirements of Standard 115.72 and imposes no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Interviews with the facility investigator and PM confirmed that staff responsible for administrative adjudication of investigations are knowledgeable of the requirements for the evidentiary standard. Investigators interviewed were able to define what preponderance meant and how they arrive at the basis of case determinations. The PREA directives and the facility's investigator training manual specify that the facility's standard of proof is to be the preponderance of the evidence. Conclusion: The Auditor determined the facility meets the requirements of this standard.
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.73 Reporting to Inmates Policy, Materials, Interviews and Other Evidence Reviewed: AD1.10 Investigations - Inquiries and Administrative Investigations Outcome of Allegation Memo AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Interviews PAQ BCI directives are written in accordance with Standard 115.73 which requires that an inmate be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Agency directives state that following an investigation of an allegation that an inmate

	suffered sexual abuse in a facility, the Warden will ensure the victim is notified in writing as to whether the allegation has been Substantiated, Unsubstantiated, or Unfounded. Following an allegation that a staff member committed sexual abuse against an inmate, the facility conducting the investigation will inform the inmate of their determination and such notifications will be documented. If a notification is unable to be provided, the attempts will be documented, and a copy of the notification attempt will be maintained. The facility's obligation to provide notification as outlined in this section will terminate if the inmate is paroled, discharged from their sentence, vacated, or pardoned. CDOC Administrative Directive 6.12 states that following an investigation of sexual abuse of an inmate, the inmate will be informed in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The facility investigator is responsible for preparing the Notification of Outcome of Allegation form and presenting it to the alleged victim for their signature. The inmate receives a copy of the form, and a copy is forwarded to the PREA coordinator. Conclusion: Interviews with the PM, administrative staff, and investigator verified inmates receive notifications, and the facility meets compliance with the standard.
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 Disciplinary Sanctions for Staff Policy, Materials, Interviews and Other Evidence Reviewed: AD1.10 Investigations - Inquiries and Administrative Investigations AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention CDOC administrative Directive 2.17 Employee Conduct Interviews PAQ CDOC directives were reviewed and follow the requirements of Standard 115.76. Policy states that staff found guilty of violations are subject to disciplinary sanctions that include termination for violating the sexual abuse or sexual harassment policies. The directives require that staff found responsible for sexual abuse of an inmate should be terminated from employment. Employees who are found to have violated

	facility directives related to sexual abuse and harassment but not actually engaging in sexual abuse will be disciplined in a manner commensurate with nature and circumstances of the acts. CDOC directives state that termination is the presumptive disciplinary action for staff who engage in sexual abuse. Violations of sexual abuse and sexual harassment policies, other than engaging in sexual abuse, will be disciplined commensurate with the nature and circumstances of the acts, previous discipline history, and other comparable disciplinary actions. BCI directives state that termination is the presumptive action for employees that are found to have a substantiated case of sexual abuse against them. These cases will be referred for criminal prosecution and will be reported to any relevant licensing bodies. Additionally, disciplinary sanctions will take into consideration the staff member's disciplinary history, sanctions imposed for similar offenses by other staff, and nature of the acts committed. The Auditor interviewed the Warden who stated that if a staff member is terminated for violating the facility's sexual assault and harassment directives, the case would be referred for criminal prosecution if criminal in nature. The facility investigator and PM verified that if an employee under investigation resigns before the investigation is complete, or resigns in lieu of termination, the resignation does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature. The facility would still refer the case for prosecution when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment. The Auditor observed the facility's directives which included a provision to notify law enforcement agencies of criminal violations of sexual abuse and require the PM notify relevant licensing bodies. The Auditor discussed the requirement for the facility to notify the CSP and relevant licensing bodies with facility executive staff who were clear on the requirement following a criminal act of sexual abuse. The Auditor determined the facility has appropriate policies and practices in place, which ensure staff are disciplined for violating the agency's sexual abuse and sexual harassment policies. The facility makes termination the presumptive discipline measure for engaging in acts of sexual violence and reports violations of sexual abuse to CSP and relevant licensing bodies. Conclusion: Interviews with the Warden, investigator, and PM, support all allegations against staff for sexual abuse, sexual harassment, and retaliation, are investigated and disciplinary actions sanctioned. The Auditor determined the facility meets compliance with the standard.
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Exceeds Standard

Auditor Discussion

115.77 Corrective Action for Contractors and Volunteers

Policy, Materials, Interviews and Other Evidence Reviewed:

AD 2.17 Employee Conduct

AD1.10 Investigations - Inquiries and Administrative Investigations

AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention

Contractor and Volunteer Training Verification

Interviews

Staff Rosters

PAQ

CDOC directives hold both contractors and volunteers to the same standards as employees directly hired by the facility when disciplinary action for engaging in sexual abuse and sexual harassment is conducted. Therefore, any contractor or volunteer engaging in these behaviors would be terminated or prohibited from entering an CDOC facility.

Facility directives contain specific language to provide consideration for terminating contracts and prohibiting further contact with inmates in the case of any violation of PREA sexual abuse and sexual harassment policies. Conduct of this nature by volunteers or contractors requires reporting to CSP and relevant licensing bodies. Contractual Employees' allegations of employee misconduct must be documented, and an investigation conducted. The contracting agency may perform a separate investigation and terminate the employee. Whether a contractual employee should remain at a particular facility will be determined by the Warden at that facility and will vary depending on the severity of the alleged misconduct.

Once an investigation is initiated involving a contractual employee, the contract monitor will be notified by CODC staff and the employee who is the subject of the investigation can have representation during the investigatory interview. The investigator must advise the employee of this and arrange a date and time that does not delay the investigation. The contractual employee is responsible for obtaining their representative and that person cannot be a CDOC employee.

The Warden confirmed that any contractor or volunteer who violates sexual abuse or sexual harassment policies would be removed from the facility and would have their security clearance revoked immediately. Contract staff would be terminated by the contract employer and if the conduct is criminal in nature, it will be referred to CSP enforcement for investigation and prosecution.

Conclusion: The Auditor reviewed documentation, directives, and interviewed staff,

	and determined the facility exceeds the standard.
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.78 Disciplinary Sanctions for Inmates Policy, Materials, Interviews and Other Evidence Reviewed: Interviews PAQ AD 9.5 Code of Penal Discipline Inmate Handbook AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention The BCI has zero tolerance for inmate-on-inmate sexual harassment, assault, or abuse. Directives state that consensual sexual activity among inmates is prohibited and if an inmate is found to have engaged in sexual activity, the inmate will be subject to disciplinary action. If an inmate reports sexual abuse and the report is made in good faith, based upon a reasonable belief that the alleged conduct occurred, they will not be charged for reporting if it is determined to be unfounded. If it is determined that the inmate did commit sexual abuse in the correctional setting, they will be subject to disciplinary sanctions commensurate with the level of the infraction. In addition to potential disciplinary segregation, inmates may have their custody levels raised or may be transferred to another location as determined. The Auditor found no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment in good faith. There is consideration by staff for mental disabilities and mental illness when considering the appropriate type of sanction to be imposed. Agency policies direct facilities offering relevant treatment programs address the underlying reasons or motivations for abuse and consider placing inmates in relevant programs. Facility directives state that inmates who engage in consensual sexual activity may be disciplined and sanctioned accordingly. However, the activity will not be considered sexual abuse unless it is determined that sexual contact was the result of coerced consent or protective pairing. The Auditor reviewed the records of inmates and did not discover any evidence an inmate had been disciplined for making an allegation of sexual abuse.

	Conclusion: Based on directives reviews and interviews, the Auditor determined the facility meets the requirements of this standard.
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.81 Medical and Mental Health Screenings; History of Sexual Abuse Policy, Materials, Interviews and Other Evidence Reviewed: AD 8.5 Mental Health Services AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Risk Screenings HRSA/HRSV AD 8.1 Scope of Health Care Services Follow Up Medical Request Interviews CN4401-Authorization for Release of Information PAQ CDOC directives state that if a PREA risk assessment or review indicates an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff will ensure the inmate is referred for a follow-up meeting with a medical practitioner within fourteen calendar days of the intake screening. Inmates identified as having a history of physical or sexual abuse, or who pose a reasonable concern that they may be sexually victimized while incarcerated due to age, physical stature, history, or physical or mental disabilities, will be referred to medical. BCI directives state that all inmates will have access to health services as described in this policy, regardless of custody level or security classification. An inmate whose health care needs cannot be met at the facility where they are housed will be transferred to a facility where those needs can be met. An initial intake screening for the history of sexual abuse is to be completed within 72 hours by staff as part of inmate screening process and mental health staff will be

	made available to provide mental health services. Inmates in need of mental health services are identified in a timely manner, have reasonable access to care, and afforded continuity of care, including aftercare planning, and follow-up as indicated. BCI staff will identify and monitor inmates who are at risk of sexual victimization, as well as those who have a history of sexual assaultive behavior. A review of inmate files indicated the screenings were being conducted in accordance with CDOC directives. Files provided by the facility identified inmates who need follow-up care and documented follow-up care within the 14-day period. Medical staff confirmed that if an inmate answers "yes" to previous victimization, they are referred to mental health and the inmate is offered a follow-up meeting. Staff notify inmates identified as high-risk of sexual victimization and high-risk of sexual abusiveness of the availability for a follow-up meeting with a mental health practitioner and inform the inmate of available treatment and programming. The facility displayed signage throughout the departments with the limitations of confidentiality. Interviews with the staff confirmed that information related to sexual victimization and sexual abusiveness is kept secure and confidential. This information is limited access and only used to make housing, bed, work, education, and other program assignments, in accordance with facility directives. The PAQ notes that any inmates who disclosed prior victimization during screening were offered a follow-up meeting with medical or mental health staff. Conclusion: Based on interviews with medical staff, mental health, and document review, the Auditor determined the facility meets requirements of this standard.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.82 Access to Emergency Medical and Mental Health Services Policy, Materials, Interviews and Other Evidence Reviewed: AD 8.5 Mental Health Services AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Risk Screenings Interviews PAQ

	The BCI directives are written in compliance with Standard 115.82 and states that all inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. In accordance with the Health Services PREA directives, inmate victims of sexual abuse will receive timely emergency medical treatment and crisis intervention services, the nature and scope of which will be determined by medical staff. If a qualified medical or mental health staff are not on duty at the time an allegation of recent abuse is made, staff first responders will take preliminary steps to protect the victim in accordance with the protective directives and will immediately provide notification to the appropriate medical and mental health staff. Inmate victims of sexual abuse while incarcerated will be offered information about and access to emergency contraception and sexually transmitted infections prophylaxis. Treatment services will be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with the investigation. Interviews with medical staff confirm that victims of sexual abuse would receive timely, unimpeded access to these services and staff are aware of their responsibilities regarding protection of the victim. Psychology staff will initiate contact with the victim and provide evaluation and treatment as appropriate. For services that are outside the scope of their duties, the inmate can be treated at the local hospital emergency department. Qualified forensic nurse examiners located off-site, conduct forensic exams and a representative is available at the request of the inmate to provide emotional support services. BCI directives states that forensic examinations will be conducted by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE) without a financial cost to the victim. Interviews with medical staff confirm that inmate victims of sexual abuse would not be charged for services received because of a sexual abuse incident. The facility directives state that an inmate, who is alleged to have been sexually abused less than 96 hours previously and where forensic evidence may be present, will be transported to a local hospital for a forensic medical examination. If a SAFE or SANE cannot be made available, the examination can be performed by another qualified medical practitioner, and the facility will document its efforts to provide the examination. A copy of the PREA forensic examination completed at the local hospital and any notes evidencing the facility's efforts will be maintained with the investigation packet. When the incident is alleged to have occurred more than 96 hours previously, a forensic examination is not required. However, the inmate will be referred to health care and mental health services in accordance with directives. Conclusion: Staff interviews verified medical services are provided regardless of the inmates' cooperation with the investigation. The Auditor determined the facility meets compliance for this standard.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.83 Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers Policy, Materials, Interviews and Other Evidence Reviewed: AD 8.5 Mental Health Services AD 6.12, Inmate Sexual Abuse/Sexual Harassment Prevention, and Intervention Interviews HRSA/HRSV AD 8.1-Health Care Manual PAQ CDOC directives state that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioner’s judgment. Directives require treatment services to be consistent with the community level of care and provided without financial costs regardless of whether the victim names the aggressor or cooperates with any investigation arising out of the incident. If no qualified medical or mental health practitioners are on duty at the time of a report of recent sexual violence, first responders will take preliminary steps to protect the victim and will immediately notify the shift supervisor. Forensic and sexual assault exams are to be conducted by a qualified professional. The directives are written in compliance with Standard 115.83 which states that the facility will offer medical and mental health treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims will include follow-up services, treatment plans, and referrals for continued care following their transfer or release. Interviews with medical and mental health staff confirm that these services would be available to inmates who have been victims of sexual abuse, and these services would be consistent with the community level of care. First responder staff ensured medical needs would be addressed and no evidence is destroyed. A physician would examine an alleged inmate victim and make appropriate decisions to treat any injuries, infections, STIs, or other medical needs. BCI policy states that within 60 days of learning of inmate-on-inmate abusers, the mental health staff will conduct a mental health evaluation of the abuser's history and offer treatment as deemed appropriate. The Auditor reviewed documentation provided by the facility of services and mental health care for inmates identified as

	victims. The Auditor interviewed mental health staff who confirmed that counseling sessions, referrals if appropriate, and follow-up services are provided. The mental health practitioner also creates treatment plans and follow-up treatment plans. The mental health staff verified the requirement to conduct the evaluation within 60 days of learning about the abuse and stated the assessment would be conducted sooner. Conclusion: The Auditor reviewed policies, procedures, inmate records, conducted interviews, and determined the facility meets the requirements of this standard.
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.86 Sexual Abuse Incident Reviews Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.6 Reporting of Incidents PAQ After Action Review Incident Review Team AD 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Interviews Investigative staff CDOC directives require review of all substantiated or unsubstantiated allegations of sexual abuse and the facility PM will coordinate a sexual abuse incident review at the conclusion of every sexual abuse investigation unless the allegations are determined to be unfounded. The review team consists of upper-level custody and administrative staff, with input from departmental supervisors, investigators, and medical practitioners. The Auditor reviewed directives pertinent to incident review completion within 30 days, and consideration of elements required by Standard 115.86. The review team included upper-level custody and administrative staff, with input from relevant supervisors, investigators, medical, and mental health practitioners. Staff stated that the review team follows a formatted document to ensure all elements of the standard

	are considered. An interview with the PM confirmed that a report of the findings, including recommendations for improvement, is completed and submitted in the finale report. The PM stated that the review team reviews the investigative report, video, investigation reports, and the Warden would review and approve the recommendations. Administrative and criminal investigations are completed on all allegations of sexual abuse and sexual harassment allegations. The PREA Investigative Unit and CSP conduct all criminal investigations. The PM stated any recommendations would be implemented, or the reasons for not doing so would be documented. The facility has appointed a team that conducts incident reviews at the conclusion of sexual assault investigations as stipulated by the standard. A written report of the findings is prepared and maintained by the facility PM. Conclusion: Review of incident review forms and interviews with the Warden, PM, and Incident Review team member, confirmed compliance. The facility meets requirements for this standard.
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.87 Data Collection Policy, Materials, Interviews and Other Evidence Reviewed: Pre-Audit Questionnaire CDOC Website http://portl.ct.gov CDOC Annual Reports Interviews AD 6.12 Abuse/Sexual Harassment Prevention and Intervention Website CDOC directives are consistent with the requirements of Standard 115.87 and states that the Agency will annually collect uniform data for allegations of sexual abuse necessary to answer all questions from the most recent version of the Survey of Sexual Violence and complete an annual report based upon the statical data. CDOC directives outlines the data collection process and states that allegations of sexual abuse reported to have occurred within facilities will be entered into the BCI database. Additionally, it indicates that the agency PREA coordinator gathers data on

	each reported incident to aggregate an annual incident report which will include data necessary to complete the SSV. Policy directives contain the definitions used to collect data at each facility and the PM for each facility is responsible for reporting institutional data. The Auditor reviewed the Annual Report available on the facility website. The annual report lists corrective actions taken and is approved by the agency administrative staff and the PC prior to publishing on the agency's website. The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Data from the previous calendar year is supplied to the Department of Justice no later than June 30th, if requested. Conclusion: Compliance was determined by review of Annual Reports, data collected, and interviews with PC. The Auditor determined the facility meets the requirements of this standard.
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.88 Data Review for Corrective Action Policy, Materials, Interviews and Other Evidence Reviewed: PAQ AD 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention Annual Reports CDOC Website: https://portal.ct.gov/DOC/Miscellaneous/PREA Interviews The facility PAQ indicates that the agency reviews data annually to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, and training. The review includes identifying problem areas, taking corrective action on an ongoing basis, and preparing an annual report of its findings, and any corrective action. A review of the annual reports indicates that the report contains information on BCI's PREA efforts to include the actions taken in response to the

	previous year's PREA audits. The interview with the PC indicated that data is utilized to assess and improve the agency's PREA safety practices. This includes sexual abuse incident reviews, the Annual Report, the Survey of Sexual Victimization, and the annual review by the Wardens at each facility. This information is then utilized to identify trends and improve procedures and practices. The PC and the PM indicate that each facility documents allegations and investigations in the centralized database which is used to review trends and any areas of concern. The identification of trends or problematic areas are a priority and if discovered, corrective action is initiated. The PAQ indicated that the agency's annual report is approved and made available to the public through its website. The interview with the PC confirmed that after it is approved the report is published on the agency website. The agency may redact specific material from the report when it presents a clear and specific threat to the safety and security of the facility. A review of the website: https://portal.ct.gov/DOC/Miscellaneous/PREA verified that the annual report is available online to the public. Conclusion: Based on interviews, reviews of the agency website and documents, the Auditor finds this standard compliant and meets requirements.
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115.89 Data storage, publication, and destruction	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.89 Data Storage, Publication, and Destruction Policy, Materials, Interviews and Other Evidence Reviewed: AD 6.12 Inmate Sexual Abuse/Sexual Harassment Prevention and Intervention CDOC Website: https://portal.ct.gov/DOC/Miscellaneous/PREA Interviews CDOC directives mandate that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be securely maintained. BCI directives are written in accordance with Standard 115.89 and that data collected pursuant to 115.87 will be made readily available to the public through the agency's website excluding all personal identifiers after Director approval. The directives state the agency will ensure all data collected is securely retained for at least 10 years

	after the date of the initial collection unless Federal, State, or local law requires otherwise. The PM and PC stated that all electronic data is maintained in a centralized system, and any hard copies at the facility are secured. The Auditor reviewed the website and confirmed that previous annual reports are available to the public online. The facility PM is responsible for reporting institutional data to the PC and the facility data collected is maintained by the PM. Aggregated sexual abuse data for the agency's annual report is compiled from investigative files, incident reviews, and other relevant documents. Agency and facility data is maintained electronically in secure servers which require a username and password to access. Conclusion: Based on a review of the PAQ, policies, agency website, and information obtained from staff interviews, The Auditor determined this standard is compliant and meets requirements.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401 Frequency and Scope of Audits Policy, Materials, Interviews and Other Evidence Reviewed: Interviews Institutional tour Documentation Review The Auditor had access to all areas of the facility and was permitted to receive and copy any relevant policies, procedures, or documents requested. The Auditor conducted private interviews and was able to receive confidential information/ correspondence from inmates. Policies and secondary documentation were provided before the onsite tour and post audit. The facility staff facilitated the interviews in a timely and efficient manner and informal interviews with inmates confirmed that they were aware of the audit and the ability to communicate with the Auditors. Prior to the on-site review, emails with the Auditor's contact information were sent to the facility to be posted advising of the audit. These notices were sent to the agency and facility staff for posting six weeks prior to the onsite visit and were observed posted in various areas of the facility during the audit tour. Conclusion: The Auditor finds this standard to be compliant and meets

	requirements.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 Audit Contents and Findings The report for BCI is publicly available at the CDOC website: https://portal.ct.gov/DOC/Miscellaneous/PREA

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	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 facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes

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

	formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42	yes

	U.S.C. 1997)?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b) Hiring and promotion decisions		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c) Hiring and promotion decisions		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d) Hiring and promotion decisions		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e) Hiring and promotion decisions		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	no
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit,	yes

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

	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	

	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with	yes

	inmates on how to avoid inappropriate relationships with inmates?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how	yes

	to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes

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

	prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes

	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	

	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Work Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (d)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (e)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (f)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (g)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.43 (a)	Protective Custody	

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

	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials	na

	and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency	na

	is exempt from this standard.)	
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	na
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na

	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between	yes

	inmates and these organizations and agencies, in as confidential a manner as possible?	
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a	yes

	sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	

	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities	yes

	responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report	yes

	of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations,	yes

	including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in	na

	order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	

	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does	yes

	the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	

	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation	yes

	has been determined to be unfounded?	
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	

	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	

	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401	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.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse	yes

	noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	
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