Adams County Adult Correctional Complex
Prison Rape Elimination Act (PREA) Audit Report and Data Annual Report Calendar Year 2019

Following increasing national awareness of sexual abuse in the nation's prisons and jails, Congress passed the Prison Rape Elimination Act (PREA) in 2003. The legislation intended to prevent, detect and respond to sexual abuse and sexual harassment, through a "zero-tolerance" policy, national standards, data collection, and external auditing.

The Adams County Adult Correctional Complex (ACACC) is dedicated to upholding the goals of PREA by maintaining policies which provide a safe, humane and secure environment, free from the threat of sexual abuse and sexual harassment for all inmates.

The data contained herein is reported to the U.S. Department of Justice as required by the PREA Standards.

KATY L HILEMAN

WARDEN

Prison Rape Elimination Act (PREA) Audit Report
Adult Prisons & Jails

☐ Interim ☒ Final

Date of Interim Audit Report: ☒ N/A
If no Interim Audit Report, select N/A

Date of Final Audit Report: 9/30/2020

Auditor Information

Name: Patrick J. Zirpoli	Email: pzirpoli@ptd.net
Company Name: Patrick J. Zirpoli LLC	
Mailing Address: 149 Spruce Swamp Road	City, State, Zip: Milanville, PA 18443
Telephone: 570-729-4131	Date of Facility Visit: 08/17/2020 – 08/18/2020

Agency Information

Name of Agency: Adams County Adult Correctional Complex			
Governing Authority or Parent Agency *(If Applicable)*:			
Physical Address: 45 Major Bell Lane		City, State, Zip: Gettysburg, PA 17325	
Mailing Address: same as above		City, State, Zip:	
The Agency Is:	☐ Military	☐ Private for Profit	☐ Private not for Profit
☐ Municipal	☒ County	☐ State	☐ Federal
Agency Website with PREA Information: http://www.adamscounty.us/Dept/ACF/Pages/default.aspx			

Agency Chief Executive Officer

Name: Warden Katy L. Hileman	
Email: khileman@adamscounty.us	Telephone: 717-339-1901

Agency-Wide PREA Coordinator

Name: Jorge Alvarez	
Email: jalvarez@adamscounty.us	Telephone: 717-339-1904

PREA Coordinator Reports to:	Number of Compliance Managers who report to the PREA Coordinator:
Warden Hileman	0

Facility Information

Name of Facility: Adams County Adult Correctional Complex			
Physical Address: 45 Major Bell Lane		City, State, Zip: Gettysburg, PA 17325	
Mailing Address (if different from above):		City, State, Zip:	
The Facility Is:	☐ Military	☐ Private for Profit	☐ Private not for Profit
☐ Municipal	☒ County	☐ State	☐ Federal
Facility Type:	☐ Prison	☒ Jail	

Facility Website with PREA Information: www.adamscounty.us/Dept/ACF/Pages/Prison-Rape-eliminationact-(PREA).aspx

Has the facility been accredited within the past 3 years? ☒ Yes ☐ No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

☐ ACA

☒ NCCHC

☐ CALEA

☐ Other (please name or describe:

☐ N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:

Warden/Jail Administrator/Sheriff/Director

Name: Warden Katy L. Hileman	
Email: khileman@adamscounty.us	Telephone: 717-339-1901

Facility PREA Coordinator

Name: Jorge Alvarez	
Email: jalvarez@adamscounty.us	Telephone: 717-339-1904

Facility Health Service Administrator ☐ N/A	
Name: Christine Morningstar	
Email: cmorningstar@primecaremedical.us	Telephone: 717-339-1804

Facility Characteristics	
Designated Facility Capacity:	449
Current Population of Facility:	297
Average daily population for the past 12 months:	327.33

Has the facility been over capacity at any point in the past 12 months?	☐ Yes ☒ No
Which population(s) does the facility hold?	☐ Females ☐ Males ☒ Both Females and Males
Age range of population:	16-71
Average length of stay or time under supervision:	45 days
Facility security levels/inmate custody levels:	Minimum through Maximum
Number of inmates admitted to facility during the past 12 months:	2072
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for *72 hours or more*:	1570
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for *30 days or more:*	797
Does the facility hold youthful inmates?	☒ Yes ☐ No
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	☐ N/A 1
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	☒ Yes ☐ No

Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	☐ Federal Bureau of Prisons ☒ U.S. Marshals Service ☐ U.S. Immigration and Customs Enforcement ☐ Bureau of Indian Affairs ☐ U.S. Military branch ☐ State or Territorial correctional agency ☒ County correctional or detention agency ☐ Judicial district correctional or detention facility ☐ City or municipal correctional or detention facility (e.g. police lockup or city jail) ☐ Private corrections or detention provider ☐ Other - please name or describe: ☐ N/A

Number of staff currently employed by the facility who may have contact with inmates:	146
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	45
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	2
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	23
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	102

Physical Plant

Number of buildings: Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a	2

short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.	
Number of inmate housing units: Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.	10
Number of single cell housing units:	6
Number of multiple occupancy cell housing units:	10
Number of open bay/dorm housing units:	4
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	43
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	☐ Yes ☒ No ☐ N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	☒ Yes ☐ No
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	☐ Yes ☒ No

Medical and Mental Health Services and Forensic Medical Exams

Are medical services provided on-site?	☒ Yes ☐ No
Are mental health services provided on-site?	☒ Yes ☐ No
Where are sexual assault forensic medical exams provided? Select all that apply.	☐ On-site ☒ Local hospital/clinic ☐ Rape Crisis Center ☐ Other (please name or describe: One Safe Place Family Justice Center

Investigations

Criminal Investigations	
Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	0
When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.	☐ Facility investigators ☐ Agency investigators ☒ An external investigative entity
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	☐ Local police department ☐ Local sheriff's department ☒ State police ☐ A U.S. Department of Justice component ☐ Other (please name or describe: ☐ N/A

Administrative Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?	6
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	☒ Facility investigators ☐ Agency investigators ☐ An external investigative entity
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	☐ Local police department ☐ Local sheriff's department ☐ State police ☐ A U.S. Department of Justice component ☐ Other (please name or describe: ☒ N/A

Audit Findings

Audit Narrative (including Audit Methodology)

Pre-Onsite Audit Phase

Audit Planning and Logistics:

I had the opportunity to discuss the audit process and expectations of both parties with Warden Hileman. We coordinated the dates for the onsite audit at the facility. During these conversations we outlined an overall audit schedule and I notified the facility of the estimated time of arrival onsite.

Posting Notice of the Audit:

I forwarded the audit posting to the facility on June 24, 2020. The posting included the dates of the audit, purpose of the audit, my contact information and a statement regarding the confidentiality of any communication received. The postings were placed throughout the facility, including all housing units, visiting areas, recreational areas and all common areas. I verified the placement of the audit notices during the facility tour, and inmate and staff interviews. I did not receive any letters from inmates, nor staff.

Review of Agency and Facility Policies, Procedures and Supporting Documentation:

The facility provided me a flash drive containing all policies and procedures related to the Prison Rape Elimination Act, as well as documentation that all policies and procedures were practiced on a daily basis. They also provided me a completed PRE-Audit Questionnaire. The policies, procedures, and documents reviewed during this phase of the audit are listed under Onsite Audit, with all documentation reviewed during the course of the audit.

Outreach to Community Advocacy Organizations:

I contacted Survivor Inc. who provides victim advocacy. They knew of no issues at the facility.

Onsite Audit Phase

Site Review:

The audit was conducted during the Covid 19 Pandemic. The Agency and Auditor took all necessary precautions outlined by the Adams County Correctional Complex. These precautions included temperature check prior to entering the facility, universal masking for all staff, and visitors. During the facility tour social distancing was practiced. The staff and inmate interviews were conducted with the participants seated at minimum of 6 feet apart, and both wearing masks.

The Warden, PREA Coordinator, and I met on August 17, 2020 at approximately 8:00 a.m. to conduct a briefing and facility tour. We discussed the onsite portion of the audit, including facility tour, inmate and staff interview location, and document review. During the tour I had the opportunity to view all areas of the facility. I interacted with both staff and inmates, as well as observed the interaction between the staff and inmates. I was able to verify the location of cameras throughout the facility, as well as the camera monitor locations. While on the housing units I observed the related PREA information, Audit Posting, and applicable policies and procedures posted in the common areas, which are accessible to all inmates. These postings were further observed in common areas throughout the facility. While conducting the tour I reviewed log books on the housing units.

The inmate interviews began immediately following the facility tour. They were conducted in various locations throughout the facility. These areas provided privacy for the interviews. The inmates were randomly selected from inmates on the housing units. During this process I interviewed inmates in the following categories:

Interview Type	Number
Random Inmate Interviews	11
Youthful Inmates	1
Inmates with a Physical Disability	2
Inmates who are Blind, Deaf, or Hard of	
Hearing	1
Inmates who are Limited English Proficient	0
Inmates with a Cognitive Disability	3
Inmates who Identify as Lesbian, Gay or	
Bisexual	3
Inmates who identify as Transgender or	0
Intersex	
Inmates in Segregated Housing for High Risk of Sexual Victimization	0
Inmates who Reported Sexual Abuse	0
Inmates who Reported Sexual Victimization	
During Risk Screening	4
Total Inmate Interviews	25

During the interview process several targeted categories of inmates were not being housed at the facility. I conducted the interviews with all inmates in the same manner, a preamble to the interview was related to the inmate explaining the purpose of the interview, and how they were selected and explaining to them that they did not have to speak with me if they choose not to. No inmates refused to speak with me. All inmates were asked questions related to the Random Inmate Interviews, and if they were in a targeted category, I asked those additional questions. During the interviews I utilized a written PREA materials to visually stimulate the inmate's recollection of their initial intake process and screening.

The staff interviews were conducted in various areas on both days of the audit. Interviews were conducted on all shifts. During the process I interviewed staff in the following categories:

Interview Type	Number
Random Staff Interviews	10
Intermediate or Higher-Level Staff Conducting Unannounced Rounds and Intake Staff	3
Line Staff who Supervise Youthful Inmates	1
Education and Program Staff who Work with Youthful Inmates	0
Medical and Mental Health Staff	3
Administrative Staff	1
Volunteers and Contractors	2
Investigative Staff	1
Training Officer	1
Staff who Perform Screening	2
Staff who Supervise Inmates in Segregated Housing	1
Staff on the Sexual Abuse Incident Review Team	1
First Responders	3
PREA Coordinator	1
Warden	1
Total Staff Interviews	31

I conducted the interviews with all staff in the same manner, a preamble to the interview was related to the staff member explaining the purpose of the interview, and how they were selected and explaining to them that they did not have to speak with me if they choose not to. No staff refused to speak with me. All interviewed staff was asked questions related to the Random Staff Interviews, and if they were in a targeted category, they were then asked questions pertaining to that area. During the interviews I utilized documentation related to a specific targeted interview and random interviews. These items were used to visually stimulate the staff's recollection on the daily practices at the facility.

The onsite documentation review was conducted during all days of the audit process. The onsite documentation was reviewed at the source, all files, and facility documents were retrieved by me. The following is a list of documentation reviewed during the Pre-Audit, Onsite Audit and Post Audit Phases, with the applicable standard to each.

Documentation Reviewed Pre-Audit, Onsite Audit and Post Audit Phases	Applicable Standard
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Organizational Chart	Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act	Standard 115.12: Contracting with other entities for the confinement of inmates
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Camera List Staffing Analysis Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 200-4a Minimum Shift Requirements PREA Rounds Documentation Housing unit log records	Standard 115.13: Supervision and Monitoring
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act	Standard 115.14: Youthful inmates
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Guidance on Cross Gender and Transgender Searches	Standard 115.15: Limits to cross-gender viewing and searches
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Spanish handouts and materials Interpretation resources	Standard 115.16: Inmates with Disabilities and Inmates who are Limited English Proficient

Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: **100-26 Prison Rape Elimination Act Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number:** **200-14 Staff Promotions** **Completed Criminal History Checks**	**Standard 115.17: Hiring and Promotion Decisions**
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: **100-26 Prison Rape Elimination Act** **Camera List**	**Standard 115.18: Upgrades to facilities and technologies**
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: **100-26 Prison Rape Elimination Act** **Local Hospital Information** **Survivor Inc. Information** **Prime Care Medical Policies**	**Standard 115.21: Evidence Protocol and Forensic Medical Examination**
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: **100-26 Prison Rape Elimination Act** **PREA Investigations**	**Standard 115.22: Policies to Ensure Referral of Allegations for Investigations**
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: **100-26 Prison Rape Elimination Act Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number:** **200-13 Hiring and Training New Employees** **Training materials for Staff** **Training records**	**Standard 115.31: Employee Training**
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: **100-26 Prison Rape Elimination Act** **Contractor and Volunteer Orientation** **PREA Volunteer and Contractor Training**	**Standard 115.32: Volunteer and Contractor Training**
	Standard 115.33: Inmate Education

Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Intake Screening Inmate Handbook Orientation materials PREA Pamphlet PREA Sign Off Form	
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigators Certificates	Standard 115.34: Specialized training: Investigations

Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Prime Care Medical Policies Certificates for Training	Standard 115.35: Specialized training: Medical and mental health care
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Screening forms Classification Screening Prime Care Medical Screening Forms Inmate Orientation	Standard 115.41: Screening for risk of victimization and abusiveness
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Screening forms Classification Screening Prime Care Medical Screening Forms Inmate Orientation	Standard 115.42: Use of screening information
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act	Standard 115.43: Protective Custody
	Standard 115.51: Inmate reporting

Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act PREA Pamphlet PREA reports PREA Website Information PREA Posters PA DOC reporting information	
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act	Standard 115.52: Exhaustion of administrative remedies
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act PREA Pamphlet Survivor Inc. information	Standard 115.53: Inmate access to outside confidential support services
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act PREA Pamphlet PREA reports PREA Website Information PA DOC reporting information	Standard 115.54: Third-party reporting

Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative reports	Standard 115.61: Staff and agency reporting duties
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act	Standard 115.62: Agency protection duties
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act	Standard 115.63: Reporting to other confinement facilities
	Standard 115.64: Staff first responder duties

Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	Standard 115.65: Coordinated response
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act District Council 89 American Federation of State, County and Municipal Employees Contract with Adams County	Standard 115.66: Preservation of ability to protect inmates from contact with abusers
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	Standard 115.67: Agency protection against retaliation
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	Standard 115.68: Post-allegation protective custody
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	Standard 115.71: Criminal and administrative agency investigations
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	Standard 115.72: Evidentiary standard for administrative investigations
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports PREA notifications to inmates	Standard 115.73: Reporting to inmates

Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	Standard 115.76: Disciplinary sanctions for staff
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	Standard 115.77: Corrective action for contractors and volunteers
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports	Standard 115.78: Disciplinary sanctions for inmates
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Screening Forms Prime Care Medical Policies Release of Information forms	Standard 115.81: Medical and mental health screenings; history of sexual abuse
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports Medical Intake Screenings Prime Care medical Policies	Standard 115.82: Access to emergency medical and mental health services
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports Prime Care medical Policies	Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act Investigative Reports Incident Review Forms	Standard 115.86: Sexual abuse incident reviews
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act PREA Data	Standard 115.87: Data collection

Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act PREA Data	Standard 115.88: Data review for corrective action
Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act PREA Data	Standard 115.89: Data storage, publication, and destruction

Facility Characteristics

The ACACC is located at 45 Major Bell Lane; Gettysburg, PA 17325. The facility is located on the property owned by Adams County, this property is utilized for several county agencies. The following mission statement is posted on the facility website:

The mission of the Adams County Adult Correctional Complex (ACACC) is to protect and serve the residents of Adams County and the general public by providing progressive and comprehensive correctional and rehabilitative services. These functions are achieved through programs, and highly accountable security methods. We will strive to empower our workforce at every level to achieve excellence in correctional practices. Collaboration, efficiency, accountability, integrity, and leadership are keys to our success.

The facility is located within two buildings, one building is utilized for the main jail, and the second is utilized for work release. The main building of the facility is accessed through a secure door that is controlled by two officers working in the main lobby area. All visitors to the facility must pass through a metal detector and clear the detector before entry is allowed. The main lobby area is utilized for all visitors, the staff enters the facility through a separate entrance. The administrative offices are located off of the lobby area, these offices are also accessed through a secure door. The offices of the Classification Specialist and Treatment Specialists are also located off the main lobby in a separate area.

The interior areas of the facility are located off of a main hallway. The main control is located in the hallway allowing the officers a view of inmate movement within the facility. The facility has three single cell housing units, three multiple occupancy housing units and four dormitory style housing units. Two of the dormitory style housing units are in the work release building.

The cells are constructed with a single window, the toilets in the cells are angled allowing the inmates the privacy needed while performing bodily functions. All of the showers on these housing units have doors and or curtains that allow privacy while showering. It is the policy of the facility that the only area an inmate is allowed to be completely unclothed is in the shower.

The dormitory housing units have separate toilet and shower areas. The toilet stalls all have operational doors, and the showers have curtains.

As described the work release center is located in a second building. The building is controlled by a locked door, upon entering the building the officer's station is located in the lobby area. The building houses two separate dormitory style housing units, one for females, and one for males. These units are separated by the lobby area, the entrances to the housing units are locked at all times. As in the main jail building, female, and male officers are on duty in the work release center at all times. The bathrooms and shower areas are equipped with stall doors and shower curtains, to provide adequate privacy when performing bodily functions or showering.

The aforementioned main hallway contains all of the main portions of the facility, kitchen, group rooms, medical, housing units, and recreation areas.

The intake area of the facility has cells that are utilized for the temporary housing of inmates upon entering and exiting the facility.

The facility provides medical services onsite, these services are provided by Prime Care Medical.

The food service at the facility is provided by Trinity Food Service, all of the meals are provided to the inmates on their housing units.

Cameras are located throughout the facility, with the main monitors in the security control.
During my tour of the facility I found that information on the Prison Rape Elimination Act, and reporting avenues are located throughout the facility.
I found that administrative staff, as well as general staff moves throughout the facility frequently, this movement of staff deters any violation of the PREA policy, and more importantly provides an overall safe environment for both inmates and staff.

During the audit the facility was under Covid 19 precautions. No volunteers were coming into the facility. Work release was also temporarily suspended.

Summary of Audit Findings

The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Standards Exceeded

Number of Standards Exceeded: 8
List of Standards Exceeded:

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
Standard 115.31: Employee training
Standard 115.32: Volunteer and contractor training
Standard 115.34: Specialized training: Investigations
Standard 115.35: Specialized training: Medical and mental health care
Standard 115.41: Screening for risk of victimization and abusiveness
Standard 115.42: Use of screening information
Standard 115.71: Criminal and administrative agency investigations

Standards Met

Number of Standards Met: 37

Standard 115.12: Contracting with other entities for the confinement of inmates
Standard 115.13: Supervision and monitoring
Standard 115.14: Youthful inmates
Standard 115.15: Limits to cross-gender viewing and searches
Standard 115.16: Inmates with disabilities and inmates who are limited English proficient
Standard 115.17: Hiring and promotion decisions
Standard 115.18: Upgrades to facilities and technologies
Standard 115.21: Evidence protocol and forensic medical examinations
Standard 115.22: Policies to ensure referrals of allegations for investigations
Standard 115.33: Inmate education
Standard 115.43: Protective Custody
Standard 115.51: Inmate reporting

Standard 115.52: Exhaustion of administrative remedies
Standard 115.53: Inmate access to outside confidential support services
Standard 115.54: Third-party reporting
Standard 115.61: Staff and agency reporting duties
Standard 115.62: Agency protection duties
Standard 115.63: Reporting to other confinement facilities
Standard 115.64: Staff first responder duties
Standard 115.65: Coordinated response
Standard 115.66: Preservation of ability to protect inmates from contact with abusers
Standard 115.67: Agency protection against retaliation
Standard 115.68: Post-allegation protective custody
Standard 115.72: Evidentiary standard for administrative investigations
Standard 115.73: Reporting to inmates
Standard 115.76: Disciplinary sanctions for staff
Standard 115.77: Corrective action for contractors and volunteers
Standard 115.78: Disciplinary sanctions for inmates
Standard 115.81: Medical and mental health screenings; history of sexual abuse
Standard 115.82: Access to emergency medical and mental health services
Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers
Standard 115.86: Sexual abuse incident reviews
Standard 115.87: Data collection
Standard 115.88: Data review for corrective action
Standard 115.89: Data storage, publication, and destruction
Standard 115.401: Frequency and scope of audits
Standard 115.403: Audit contents and findings

Standards Not Met

Number of Standards Not Met:
List of Standards Not Met:

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- **Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? ☒ Yes ☐ No**
- **Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ☒ Yes ☐ No**

115.11 (b)

- **Has the agency employed or designated an agency-wide PREA Coordinator? ☒ Yes ☐ No**
- **Is the PREA Coordinator position in the upper-level of the agency hierarchy? ☒ Yes ☐ No**
- **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 ☐ No**

115.11 (c)

- **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 ☐ No ☐ NA**
- **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 ☐ No ☐ NA**

Auditor Overall Compliance Determination

☒ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☐ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26
Prison Rape Elimination Act outlines the agency's mandated zero tolerance toward all forms of sexual abuse and sexual harassment and further outlines the agency's approach to preventing, detecting, and responding to such conduct. This policy furthermore defines all sexual abuse and sexual harassment.

I reviewed the policy in its entirety, as well as questioned staff members on its content and applicable sections to their specific duties within the facility. The staff understood the policy and its practical application to the daily operation of the facility.

The agency has designated a PREA Coordinator. During the interview he related that he has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. I found the PREA Coordinator to be well versed in the PREA Standards, and their daily application. Interviewed staff stated that the PREA Coordinator is always available to answer questions and provide advice on the implementation of the PREA policies. During the onsite portion of the audit I found the PREA Coordinator as well as all other staff dedicated to the prevention of sexual abuse and sexual harassment in the facility. The prevention of incidents of this nature is evident by the minimal amount of PREA allegations at the facility.

The PREA Coordinator is a Deputy Warden, he reports directly to the Warden. He has the ability to bring any PREA related concerns directly to her.

Prior to the onsite audit all documentation was reviewed, during the onsite portion I observed the policies in daily practice, and this was further confirmed during my interviews with both staff and inmates.

After a careful review of all documentation, and the information received during interviews, I found that the agency has substantially exceeded the requirements of this standard, and all provisions. This decision was based on the agency's overall commitment to sexual safety in their facility.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- **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** ☐ **No** ☒ **NA**

115.12 (b)

- **Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)** ☐ **Yes** ☐ **No** ☒ **NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency does not contract with any other facility for housing of inmates. They do have agreements with other county facilities to house inmates under special circumstances. All of the counties they utilize under this agreement are compliant with the PREA standards and have been audited.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

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 ☐ No

- **In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No ☐ NA**

- **In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? ☒ Yes ☐ No**

- **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 ☐ No**

- **In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? ☒ Yes ☐ No**

115.13 (b)

- **In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) ☐ Yes ☐ No ☒ NA**

115.13 (c)

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

115.13 (d)

- **Has the facility/agency implemented a policy and practice of having intermediate-level or higherlevel supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? ☒ Yes ☐ No**

- **Is this policy and practice implemented for night shifts as well as day shifts? ☒ Yes ☐ No**

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has developed a facility staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities have taken into consideration all areas enumerated under this standard. Compliance was determined by reviewing the aforementioned policies. I further questioned staff on the policies and the ability to fully staff the facility at all times. I was informed that the facility will fill posts with overtime if needed to be at full compliment. The facility also has the ability to collapse posts and limit inmate activity and movement when needed. The facility staffing plan is predicated on PA Code 37 which states the minimum required custody ratio is one officer per shift for fifteen inmates.

The staffing at the facility is reviewed yearly by the administration. This was confirmed through interviews and reviewing the staffing analysis for 2019. I also reviewed documentation of staffing analysis from previous years to ensure the yearly review is consistent.

During the interviews with the administration at the facility I confirmed a daily review of the staffing at the facility. The administration meets on a regular basis. During this meeting the overall facility operations are discussed to include staffing.

The staffing plan has not been deviated from within the last 12 months. I confirmed during staff interviews that any posts would be filled with overtime if needed, and they have the ability to collapse other posts if need be. This was evident during the audit, the lobby officers were not needed full time due to the restricted access to the facility. They had the ability to utilize these officers elsewhere.

The administration meets on a regular basis to review incidents that have occurred at the facility, as well as discussing normal facility operation. During these meetings, they discuss any adjustments that may need to be made to the staffing plan, deployment of video monitoring and other technologies, and any resources available. This was confirmed during the staff interviews.

The agency has 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. These unannounced rounds take place during all shifts at the facility. The agency has a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring. I further confirmed the rounds are occurring during the staff and inmate interviews as well as reviewing the logs generated by the housing unit officers.

During the onsite audit I reviewed the officer logs confirming the documentation of the unannounced rounds.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.14: Youthful inmate

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- **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].) ☒ Yes ☐ No ☐ NA**

115.14 (b)

- **In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☒ Yes ☐ No ☐ 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].) ☒ Yes ☐ No ☐ NA**

115.14 (c)

- **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].) ☒ Yes ☐ No ☐ 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].) ☒ Yes ☐ No ☐ 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].) ☒ Yes ☐ No ☐ NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The facility houses youthful inmates separate from adult offenders. The facility houses the youthful inmates in a separate cell, where they have no contact with any adult inmates, and are under direct supervision at all times. This direct supervision eliminates any interaction by sight and sound. The cell is in direct view of the officer when he is at his desk.

At the time of the audit 1 male juvenile was being housed.

The youthful inmates have access to all educational, recreational, and all other services offered to adult offenders, and are provided recreation on a daily basis.

During the interviews with the staff I confirmed that the juvenile inmates are being offered all of the services. They further confirmed that the youthful inmates never have contact with the adult inmates and are always under direct supervision by staff. This was further confirmed during the youthful inmate interview.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- **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** ☐ **No**

115.15 (b)

- **Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.) ☒ Yes ☐ No ☐ NA**

- **Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) ☒ Yes ☐ No ☐ NA**

115.15 (c)

- **Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? ☒ Yes ☐ No**

- **Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) ☒ Yes ☐ No ☐ NA**

115.15 (d)

- **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 ☐ No**

- **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 ☐ No**

- **Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? ☒ Yes ☐ No**

115.15 (e)

- **Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? ☒ Yes ☐ No**

- **If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? ☒ Yes ☐ No**

115.15 (f)

- **Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No**

- **Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches unless in exigent circumstances or when performed by a medical practitioner. I confirmed this procedure during staff and inmate interviews, as well as review of policy. I also confirmed that the facility has not conducted a search under these circumstances.

The facility does not limit female movement if female staff is unavailable to search them. During staff interviews I confirmed that female staff are always present, this is part of the staffing requirements.

The above policies outline procedures and practices that enable 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. The policies further dictate that staff of the opposite gender announces their presence when entering an inmate housing unit. These practices were confirmed during the staff and inmate interviews as well as during the facility tour when I observed the announcements taking place. The bathrooms in the housing units are constructed to provide privacy while performing bodily functions and showering. They have either curtains or doors to provide this privacy.

The facility does not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it is determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. I further confirmed the practices during the staff and medical interviews.

The agency has trained security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. This was confirmed during staff interviews and reviewing the provided training materials.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? ☒ Yes ☐ No**

115.16 (b)

- **Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? ☒ Yes ☐ No**

- **Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No**

115.16 (c)

- **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 firstresponse duties under §115.64, or the investigation of the inmate's allegations? ☒ Yes ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has taken appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. These steps include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. The facility outlines the response to inmates in these categories in the above listed policies. The policies outline procedures for inmates who are not only non-

English speaking, but all who are enumerated in this standard. I confirmed the use of this procedure during the staff and inmate interviews.

The agency has taken steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient. The agency would utilize a language line for interpretation purposes.
The treatment staff further confirmed that they meet with the inmates on their caseloads and would further provide education if needed.

The agency does not rely on inmate interpreters, inmate readers, or other types of inmate assistants. The interviewed agency investigator is aware of the approved interpreters and confirmed during investigations they would utilize these services. The criminal investigations are conducted by the Pennsylvania State Police, they have their own contracted interpretation services they would utilize.

During the inmate interviews I interviewed inmates with Cognitive Disabilities and one inmate hard of hearing. All of these inmates related that the staff further explained the sexual abuse and sexual harassment policies, and ensured that the inmates understood the reporting avenues.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- **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 ☐ No**

- **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 ☐ No**

- **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 question immediately above? ☒ Yes ☐ No**

- **Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 question immediately above? ☒ Yes ☐ No**

115.17 (b)

- **Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? ☒ Yes ☐ No**

- **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 ☐ No**

115.17 (c)

- **Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? ☒ Yes ☐ No**

- **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 ☐ No**

115.17 (d)

- **Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? ☒ Yes ☐ No**

115.17 (e)

- **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 ☐ No**

115.17 (f)

- **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 ☐ No**

- **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 ☐ No**

- **Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ☒ Yes ☐ No**

115.17 (g)

- **Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ☒ Yes ☐ No**

115.17 (h)

- **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 ☐ No ☐ NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has policies and procedures in place that identify anyone who had been convicted of sexual abuse in a confinement setting, engaged in or attempted to engage in sexual activity in the community or has been civilly or administratively adjudicated for the same. The agency has developed a process that identifies anyone who engaged in these activities. During the staff interviews I verified they were asked these questions.

During the documentation review, and review of files I found that this process is also being utilized in the promotion system throughout the agency. This was further confirmed through staff interviews, and interviews of promoted personnel.

The agency has also implemented a background investigation process for all new employees, contractors and volunteers. The background investigations are being conducted as per policy. A check through the National Crime Information Center (NCIC) is part of the process. The agency is also conducting these checks on all staff, contractors, and volunteers every two years. This was confirmed through interviews and reviewing documentation of the NCIC checks.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- **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.)** ☐ **Yes** ☐ **No** ☒ **NA**

115.18 (b)

- **If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)** ☐ **Yes** ☐ **No** ☒ **NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

The agency has made no substantial expansion to this facility nor is any planned. During the interviews I confirmed that if any expansion or acquisition of facilities takes place, the overall security and safety is taken into consideration, including the sexual safety of the inmates.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- **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** ☐ **No** ☐ **NA**

115.21 (b)

- **Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of**

criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

- **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 ☐ No ☐ NA**

115.21 (c)

- **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 ☐ No**

- **Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☒ Yes ☐ No**

- **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 ☐ No**

- **Has the agency documented its efforts to provide SAFEs or SANEs? ☒ Yes ☐ No**

115.21 (d)

- **Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? ☒ Yes ☐ No**

- **If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.) ☐ Yes ☐ No ☒ NA**

- **Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes ☐ No**

115.21 (e)

- **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 ☐ No**

- **As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? ☒ Yes ☐ No**

115.21 (f)

- **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 ☐ No ☒ NA**

115.21 (g)

- **Auditor is not required to audit this provision.**

115.21 (h)

- **If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency *always* makes a victim advocate from a rape crisis center available to victims.) ☐ Yes ☐ No ☒ NA**

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

All incidents are immediately responded to by the trained facility investigators, they are further trained in evidence identification and collection.
The agency conducts administrative investigations, all criminal investigations are conducted by the Pennsylvania State Police. The agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for both administrative proceedings and criminal prosecutions. The protocol is developmentally appropriate for youthful inmates. The facility investigators work hand in hand with the Pennsylvania State Police during the investigations. The State Troopers have also received training in evidence identification and collection.

These protocols are outlined in the above policy, all staff interviewed understood these protocols.

The facility transports all victims to Gettysburg Hospital for forensic examinations, this hospital is equipped with Sexual Assault Nurse Examiners. These examinations are provided at no cost to the victim.

Survivor Inc. will immediately respond. If requested by the victim, the victim advocate, will accompany and support the victim through the forensic medical examination process and investigatory interviews, providing emotional support, crisis intervention, information, and referrals. This was verified through staff interviews and interviews with Survivor Inc.

These above procedures were further confirmed during the interviews with the facility investigators, and during the review of the investigations, all offers of examinations and victim advocacy are documented. The aforementioned victim advocates are available to the victim during the forensic medical examination process, the investigatory interviews and they provide emotional support, crisis intervention, information, and referrals.

If an incident occurred involving a juvenile, they would be transported to the Adams County Children's Center. An examination and advocacy would be provided by the center.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- **Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ☒ Yes ☐ No**

- **Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ☒ Yes ☐ No**

115.22 (b)

- **Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ☒ Yes ☐ No**

- **Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes ☐ No**

- **Does the agency document all such referrals? ☒ Yes ☐ No**

115.22 (c)

- **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 ☐ No ☒ NA**

115.22 (d)

- **Auditor is not required to audit this provision.**

115.22 (e)

- **Auditor is not required to audit this provision.**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. This was confirmed through review of polices which outline the procedures for investigating sexual abuse and sexual harassment. I further verified all allegations are investigated during the investigator interview, staff interviews, and review of the agency investigative reports.

The agency investigates all allegations. I verified that the investigative procedure is published on the agency's website.

The agency has policies in place that govern the investigative process. This was confirmed during policy review and investigator interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- **Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? ☒ Yes ☐ No**

- **Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? ☒ Yes ☐ No**

- **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 ☐ No**

- **Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? ☒ Yes ☐ No**

- **Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? ☒ Yes ☐ No**

- **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 ☐ No**

115.31 (b)

- **Is such training tailored to the gender of the inmates at the employee's facility? ☒ Yes ☐ No**

- **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 ☐ No**

115.31 (c)

- **Have all current employees who may have contact with inmates received such training? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

115.31 (d)

- **Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? ☒ Yes ☐ No**

Auditor Overall Compliance Determination

☒ Exceeds Standard (*Substantially exceeds requirement of standards*)

☐ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

The agency provides yearly training to all employees on the areas enumerated in this standard. I reviewed the training curriculum and materials, I found that they address all areas. I further confirmed the training during the staff interviews and the review

of training records. The employees receive the initial training and annual updates. It was confirmed during staff interviews that they also receive updates.

All employees receive training on interacting with males, females, intersex, gay and bisexual and transgender inmates. This was confirmed during review of training materials and during staff interviews.

The employees are verifying the receipt of the training through a signature, this was verified during the review of the sample signature logs.

The training provided by the agency is created yearly by the training department. During the interviews they confirmed they are constantly updating the training to provide the most current information to the staff. They are constantly improving on the training materials.

The agency is providing PREA training on a yearly basis, this far exceeds the provisions of the standard.

After a careful review of all documentation, and the information received during interviews, I found that the agency has substantially exceeded the requirements of this standard, and all provisions. This decision was based on the agency's overall commitment to sexual safety in the facility.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- **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 ☐ No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? ☒ Yes ☐ No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☒ Exceeds Standard (*Substantially exceeds requirement of standards*)

☐ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

The agency has trained all volunteers and contractors who have contact with inmates on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of

training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. At a minimum they are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. No volunteers were available during the audit due to the facility lockdown resulting from the Covid 19 pandemic.

The medical contractors receive training through the facility, as well as yearly training through Prime Care Medical. The contracted kitchen staff also receives facility training as well as yearly training on Relias through Trinity Food Services.

The agency maintains all documentation confirming that volunteers and contractors understand the training they have received. This documentation is maintained at the facility, this was confirmed during review of the volunteer and contractor acknowledgment forms.

The agency is far exceeding the expectations of the standard. They are providing yearly training and updates to volunteers and contractors to ensure they are aware of the zero-tolerance policy and PREA.

After a careful review of all documentation, and the information received during the interviews, I found that the agency has substantially exceeded the requirements of this standard, and all provisions. This decision was based on the agency's overall commitment to sexual safety in the facility.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33 (a)

- **During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes ☐ No**

- **During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes ☐ No**

115.33 (b)

- **Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

115.33 (c)

- **Have all inmates received the comprehensive education referenced in 115.33(b)? ☒ Yes ☐ No**

- **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 ☐ No**

115.33 (d)

- **Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ☒ Yes ☐ No**

- **Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ☒ Yes ☐ No**

- **Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ☒ Yes ☐ No**

- **Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ☒ Yes ☐ No**

- **Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ☒ Yes ☐ No**

115.33 (e)

- **Does the agency maintain documentation of inmate participation in these education sessions? ☒ Yes ☐ No**

115.33 (f)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

During the intake process inmates receive information explaining the agency's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment, this information is located in the inmate handbook and in a pamphlet form. This was confirmed during the inmate and staff interviews, I further confirmed this by reviewing inmate electronic files and ensuring that the acknowledgment forms were in the files and signed by the inmates.

The facility provides inmate education in formats accessible to all inmates, this includes inmates who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The facility provides materials to inmates in Spanish, they also have designated staff who can provide interpretation of other languages. The Case Mangers confirmed they would provide education to other individuals if needed.

The facility has all key information on the zero-tolerance policy and reporting avenues provided through signage placed throughout the facility. I viewed this signage during the facility tour. I further confirmed that the signage has been in place during the inmate and staff interviews.

Prior to the onsite audit the facility was only providing additional required education to inmates on a voluntary basis. The PREA Coordinator educated every inmate at the facility and provided me with the documentation. The facility has also put into place an education piece where the inmates receive the education while in the intake area through the use of a video. The inmates are acknowledging that they viewed the video.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- **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 ☐ No ☐ NA**

115.34 (b)

- **Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA**

- **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 ☐ No ☐ NA**

- **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 ☐ No ☐ NA**

- **Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA**

115.34 (c)

- **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 ☐ No ☐ NA**

115.34 (d)

- **Auditor is not required to audit this provision.**

Auditor Overall Compliance Determination

☒ Exceeds Standard (*Substantially exceeds requirement of standards*)

☐ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

The agency is responsible for the administrative investigations of all sexual abuse and sexual harassment incidents. These investigations are conducted by the agency investigators. The training they have received includes the use of Miranda and

Garrity warnings, techniques for interviewing sexual abuse victims, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. This was confirmed during the investigator interview, investigation review, and policy review.

The agency documents all training attended by the investigators. This was confirmed during the interview with the investigator, as well as review of the training records.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- **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 ☐ No ☐ NA**

- **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 ☐ No ☐ NA**

- **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 ☐ No ☐ NA**

- **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 ☐ No ☐ NA**

115.35 (b)

- **If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams *or* the agency does not employ medical staff.) ☐ Yes ☐ No ☒ NA**

115.35 (c)

- **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 ☐ No ☐ NA**

115.35 (d)

- **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 ☐ No ☐ NA

- **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 ☐ No ☐ NA**

Auditor Overall Compliance Determination

☒ Exceeds Standard (*Substantially exceeds requirement of standards*)

☐ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

All full and part-time medical and mental health care practitioners have been trained on the following:

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

This was confirmed by reviewing the training materials utilized by the facility. I also confirmed this training with the medical and mental health staff during interviews.

The medical staff at the facility does not conduct sexual assault examinations.

The medical and mental health care practitioners also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency. This was confirmed during the review of training rosters at the facility. I also confirmed this training with the medical and mental health staff during interviews.

Prime Care Medical is providing this training on a yearly basis to all medical and mental health care practitioners. This practice far exceeds the requirement of the standard.

The medical and mental health staff also receives training through PrimeCare, the facility medical contractor.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION

AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- **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 ☐ No

- **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 ☐ No

115.41 (b)

- **Do intake screenings ordinarily take place within 72 hours of arrival at the facility? ☒ Yes ☐ No**

115.41 (c)

- **Are all PREA screening assessments conducted using an objective screening instrument? ☒ Yes ☐ No**

115.41 (d)

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No

- **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 ☐ No**

- **Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

115.41 (e)

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

115.41 (f)

- **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 ☐ No**

115.41 (g)

- **Does the facility reassess an inmate's risk level when warranted due to a referral? ☒ Yes ☐ No**

- **Does the facility reassess an inmate's risk level when warranted due to a request? ☒ Yes ☐ No**

- **Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? ☒ Yes ☐ No**

- **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 ☐ No

115.41 (h)

- **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 ☐ No**

115.41 (i)

- **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 ☐ No**

Auditor Overall Compliance Determination

☒ Exceeds Standard (*Substantially exceeds requirement of standards*)

☐ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

All inmates are assessed during the intake process, which is completed upon arrival at the facility. This screening is conducted utilizing the screening form in the Offender Management System. This instrument identifies all areas of victimization and abusiveness enumerated in this standard. This was verified through interviews with staff and inmates, as well as review of the completed instruments. The screening is being conducted by trained staff.

The inmates are also screened during the medical intake which takes place upon arrival at the facility. During the medical intake they ask questions on all areas enumerated in the standard, they have the ability to task for a mental health follow up for the inmate.

The initial screening for risk of being sexually abusive considers any known prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. This was confirmed during review of the screening tool and interviews with both staff and inmates.

The facility is reassessing all inmates within 30 days of arrival, this reassessment is being conducted by the classification officer, and they are taking into considerations all information available to them at the time of reassessment. This was confirmed by reviewing the reassessment documentation and staff interviews.

The facility would reassess an inmate's risk level when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may

change the inmate's risk of sexual victimization or abusiveness. This was confirmed during the staff interviews.

Inmates are informed during the screening process that they will not be disciplined for refusing to answer, or for not disclosing complete information. This was confirmed during review of the screening tools, and during the staff and inmate interviews.

The agency implements control on the dissemination of screening information at the facility level. The information from the screening tools is only available to case managers, medical if needed, and administration. The screening information is stored in the inmate's electronic file.

The agency further screens all inmate through medical, where they again ask questions relative to sexual victimization, this was confirmed by reviewing the medical screening forms and interviews.

The inmates are constantly being reassessed by their assigned Case Managers. The Case Managers meet with each inmate and make case notes in the Offender Management System. This was confirmed through interviews and watching the interaction between inmates and the Case Managers.

The inmates are being screened multiple times during the intake process, this far exceeds the requirements of the standard.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

- **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 ☐ No**

- **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 ☐ No**

- **Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

115.42 (b)

- **Does the agency make individualized determinations about how to ensure the safety of each inmate? ☒ Yes ☐ No**

115.42 (c)

- **When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? ☒ Yes ☐ No**

- **When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? ☒ Yes ☐ No**

115.42 (d)

- **Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? ☒ Yes ☐ No**

115.42 (e)

- **Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? ☒ Yes ☐ No**

115.42 (f)

- **Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ☒ Yes ☐ No**

115.42 (g)

- **Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing:**
  lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) ☒ Yes ☐ No ☐ NA

- **Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) ☒ Yes ☐ No ☐ NA**

- **Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing:**
  intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of
  LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☒ Exceeds Standard (*Substantially exceeds requirement of standards*)

☐ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency utilizes the information from the screening and reassessment to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. This was confirmed during review of the policy and I confirmed these procedures during staff and inmate interviews.

The agency makes all of these determinations on an individualized basis, this ensures the safety of each inmate. This was confirmed during policy review, and staff and inmate interviews.

I confirmed during policy review and interviews that when deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency considers on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems. I also confirmed that the inmates own views would be taken into consideration during these decisions. Through policy and interviews I confirmed that a transgender inmate would be given the opportunity to shower separately from other inmates.

I confirmed during interviews with staff that placement and programming assignments for each transgender or intersex inmate would be reassessed at least twice each year. This is also addressed in policy.

The facility does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status.

This was confirmed during interviews, as well as inmate interviews, several inmates interviewed at the facility identified as gay, and bisexual.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- **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 ☐ No**

- **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 ☐ No**

115.43 (b)

- **Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

- **If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) ☐ Yes ☐ No ☒ NA**

- **If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) ☐ Yes ☐ No ☒ NA**

- **If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) ☐ Yes ☐ No ☒ NA**

115.43 (c)

- **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 ☒ No**

- **Does such an assignment not ordinarily exceed a period of 30 days? ☐ Yes ☒ No**

115.43 (d)

- **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 ☐ No**

- **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 ☐ No**

115.43 (e)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLAINCE:

The agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made. This policy addresses all provisions in the standard, the language in the policy meets all aspects of the standard.

This facility has had no incident where they have segregated an inmate due to being at high risk of sexual victimization.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- **Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? ☒ Yes ☐ No**

- **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 ☐ No**

- **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 ☐ No**

115.51 (b)

- **Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☐ No**

- **Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No**

- **Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No**

- **Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility *never* houses inmates detained solely for civil immigration purposes) ☐ Yes ☐ No ☒ NA**

115.51 (c)

- **Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ☒ Yes ☐ No**

- **Does staff promptly document any verbal reports of sexual abuse and sexual harassment?** ☒ Yes ☐ No

115.51 (d)

- **Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?** ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The facility provides the inmates the information on reporting in the inmate handbook and pamphlet provided at intake and through signage throughout the facility. The inmates can report directly to any staff, through medical, or through the PREA reporting hotline. During the interviews with both staff and inmates I confirmed that they were aware of the reporting avenues.

The agency provides a hotline through the Pennsylvania Department of Corrections for reporting. This is provided in the inmate pamphlets and through signage throughout the facility. The inmates interviewed related that they understood they could remain anonymous.

The staff interviews related that they understood the agency policy that states that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

The agency provides in policy a method for staff to privately report sexual abuse and sexual harassment of inmates. The policy allows the staff to go outside their immediate chain of command.

The agencies website further instructs third parties on how to report. This was confirmed by viewing the agencies website.

I found during the inmate interviews that the inmates who were interviewed felt that if something was happening, they would feel comfortable telling a staff member at the facility. This confidence in utilizing this reporting avenue shows the overall culture at the facility. Although this statement may not be true for all inmates, the agency has provided so many different reporting avenues that an inmate should feel comfortable with one of them.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

- **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 ☐ No**

115.52 (b)

- **Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ NA**

115.52 (c)

- **Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ 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 is exempt from this standard.) ☐ Yes ☐ No ☒ NA**

115.52 (d)

- **Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ NA**

115.52 (e)

- **Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ NA**

115.52 (f)

- **Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ 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.). ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ 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.) ☐ Yes ☐ No ☒ NA 115.52 (g)**

- **If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☒ NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The audited facility is exempt from this standard, it does not have administrative procedures to address inmate grievances regarding sexual abuse. If a sexual abuse was reported through the grievance system it would immediately be assigned to an investigator.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

- **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 ☐ No**

- **Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) ☐ Yes ☐ No ☒ NA**

- **Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? ☒ Yes ☐ No**

115.53 (b)

- **Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to**

which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? ☒ Yes ☐ No

115.53 (c)

- 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 ☐ No

- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

Access to outside confidential support services is outlined in the agencies policies and procedures. The inmate would have the ability to utilize the services provided through Survivor Inc. The information for these services is provided to the inmate during an incident. The services that the inmates would receive are the same as the level received in the community, this was confirmed with Survivor Inc.

Through interviews I further established that follow up mental health care would be provided by the facility for any inmate victim or abuser who was involved in an incident.

The PREA Coordinator would 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. This was confirmed during interviews.

The facility has provided the contact information for Survivor Inc. to inmates involved in incidents, it is unknown if they contacted the agency due to confidentiality. This was confirmed through interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- **Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? ☒ Yes ☐ No**

- **Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ☒ Yes ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has established third party reporting methods in policy, these methods allow inmates to report for other inmates and outside individuals to report. The agencies website outlines the third party reporting avenues, this was confirmed through review of the agency website. The website has the following posted:

The Adams County Adult Correctional Complex (ACACC) maintains a zero tolerance institutional policy regarding i
sexual harassment, assault or abuse. Policy and procedures to address issues of this n
have been developed
and implemented in accordance with the Federal Prison Rape Elimination Act (PREA) ty.us).

Standards. Employees and inmates' families may report incidents via email to Jorge

Alvarez (jalvarez@adamscoun or by mail to:

PREA Coordinator
45 Major Bell Lane
Gettysburg, PA 17325

The facility has third party reporting avenues posted in areas in the facility where they can be viewed by visitors.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting dutie

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- **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 ☐ No

- **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 ☐ No**

- **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 ☐ No**

115.61 (b)

- **Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report**

to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?
☒ Yes ☐ No

115.61 (c)

- **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 ☐ No**

- **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 ☐ No**

115.61 (d)

- **If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? ☒ Yes ☐ No**

115.61 (e)

- **Does the facility report all allegations of sexual abuse and sexual harassment, including thirdparty and anonymous reports, to the facility's designated investigators? ☒ Yes ☐ No** **Auditor Overall Compliance Determination**

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The policy states all ACACC staff members, contractor, medical provider, mental health practitioners, volunteer, official visitor, or other agency representatives shall immediately report any knowledge, suspicion, and/or information regarding an incident of sexual abuse and/or sexual harassment occurring in the facility. The staff interviewed understood their responsibilities under this policy. During interviews with staff who reported an allegation I verified that they followed the policy.

The information concerning a complaint of alleged sexual misconduct is confidential and may only be available to individuals who have an established role in the reporting, processing, investigating, and resolving the alleged sexual misconduct and immediate and continued care of the victim. All staff interviewed understood this requirement.

During the interviews of medical and mental health staff I confirmed their duty to report, they understood their obligations to report an incident to security staff. They utilize a limits of confidentiality form that is signed by the inmate.

All allegations are being reported to the facility PREA Coordinator. This was confirmed during staff interviews and review of the investigations.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.62: Agency protection dutie

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- **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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The facility dictates that when staff learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. The staff interviewed understood their responsibility and all responded that they would immediately take appropriate steps to protect the inmate.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- **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 ☐ No**

115.63 (b)

- **Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes ☐ No**

115.63 (c)

- **Does the agency document that it has provided such notification? ☒ Yes ☐ No**

115.63 (d)

- **Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes ☐ No**

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLAINCE:

Through policy the agency has established procedures and practices that meet all of the requirements of the standard and provision. These include notification by the facility head to the head of the facility where the allegation allegedly took place within 72 hours, as well as documentation of the information received and notification. The policy further states that if an allegation is received in such a manner the facility needs to notify the PREA Coordinator and Investigator. I confirmed these policies and practices through documentation review of forwarded investigations at other facilities, as well as through staff interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.64: Staff first responder dutie

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- **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** ☐ **No**

- **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** ☐ **No**

- **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** ☐ **No**

- **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** ☐ **No**

115.64 (b)

- **If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? ☒ Yes ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency policies outline the initial response by staff. These policies include all of the provisions of the standard. The staff interviewed understood their responsibilities if they were the first responder to an allegation.

I verified compliance during the interview process, as well as policy and investigation review.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.65: Coordinated respons

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The facility has adopted the Adams County Adult Correctional Complex Policy and Procedure Manual Policy Number: 100-26 Prison Rape Elimination Act as the overall institutional plan to respond to sexual abuse incidents. This plan dictates the actions and coordination between first responders, supervisors, administration, medical, mental health and investigator. I confirmed the institutional plan through review of the plan, as well as during staff interviews. The facility has not had any investigations related to sexual abuse, but has had investigations of sexual harassment.

After a careful review of all documentation and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- **Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ☒ Yes ☐ No**

115.66 (b)

- **Auditor is not required to audit this provision.**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

I reviewed District Council 89 American Federation of State, County, and Municipal Employees Contract with Adams County. The contract does not 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. This was further confirmed during the interview with the Union Steward.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- **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 ☐ No**

- **Has the agency designated which staff members or departments are charged with monitoring retaliation? ☒ Yes ☐ No**

115.67 (b)

- **Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? ☒ Yes ☐ No**

115.67 (c)

- **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 ☐ No

- **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 ☐ No**
- **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 ☐ No**
- **Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? ☒ Yes ☐ No**
- **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 ☐ No**
- **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 ☐ No**
- **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 ☐ No**

- **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 ☐ No**

- **Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes ☐ No**

115.67 (d)

- **In the case of inmates, does such monitoring also include periodic status checks? ☒ Yes ☐ No**

115.67 (e)

- **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 ☐ No**

115.67 (f)

- **Auditor is not required to audit this provision.**

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has established a policy that meets the provisions of this standard. The agency has identified the PREA Coordinator to monitor the inmate or staff member for alleged retaliation.

The agency has established through past incidents that they utilize housing transfers, of perpetrators to protect the victim in an incident. This was confirmed during review of investigations and through staff interviews.

I reviewed completed monitoring documentation that shows the monitoring of the inmates. All staff interviewed understood their obligation under the policy.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.68: Post-allegation protective custod

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- **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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

The facility has established a policy that states any inmate who is alleged to have suffered sexual abuse is subject to the requirements of standard 115.43. This was confirmed through review of the policy. The audited facility did not have any inmates who suffered sexual abuse who were put into segregated housing.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- **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 ☐ No ☐ NA**

- **Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA**

115.71 (b)

- **Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ☒ Yes ☐ No**

115.71 (c)

- **Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes ☐ No**

- **Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☒ Yes ☐ No**

- **Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes ☐ No**

115.71 (d)

- **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 ☐ No**

115.71 (e)

- **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 ☐ No**

- **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 ☐ No**

115.71 (f)

- **Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? ☒ Yes ☐ No**

- **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 ☐ No**

115.71 (g)

- **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 ☐ No**

115.71 (h)

- **Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? ☒ Yes ☐ No**

115.71 (i)

- **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 ☐ No**

115.71 (j)

- **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 ☐ No**

115.71 (k)

- **Auditor is not required to audit this provision.**

115.71 (l)

- **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 ☐ No ☐ NA**

Auditor Overall Compliance Determination

☒ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☐ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

During the policy review I established that the agency has policies in place that address all provisions of this standard. More importantly during the review of agency investigations, and staff interviews I found they understand the provisions of the standard and are applying them throughout their investigations.

The Investigators have received training on how to conduct the investigations at the facility level. They work closely with the administration during any investigation. The Pennsylvania State Police conduct any criminal investigation, they are highly trained sworn law enforcement officers. After reviewing investigations, I was impressed with the consistency of the overall investigation process.

During interviews and the review of the investigation reports I found that all substantiated allegations that violated criminal law would be sent for a prosecutorial decision.

The PREA Coordinator confirmed that he stays in contact with the Pennsylvania State Police through either email or by telephone during an investigation.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

Standard 115.72: Evidentiary standard for administrative investigation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has policies that states there shall not be any standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. During the agency investigation review and investigator interview I verified that they are applying preponderance of evidence to make a determination.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard and all provisions.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- **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 ☐ No**

115.73 (b)

- **If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) ☐ Yes ☐ No ☒ NA**

115.73 (c)

- **Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit? ☒ Yes ☐ No**

- **Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility? ☒ Yes ☐ No**

- **Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes ☐ No**

- **Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No**

115.73 (d)

- **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** ☐ **No**

- **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** ☐ **No**

115.73 (e)

- **Does the agency document all such notifications or attempted notifications?** ☒ **Yes** ☐ **No**

115.73 (f)

- **Auditor is not required to audit this provision.**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has policies in place that address all provisions of this standard. The agency utilizes a Notification of Investigation Findings Status form to notify the inmate of the status of the investigation. I confirmed this through policy review, staff interviews, inmate interviews, and review of notification forms.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- **Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?** ☒ **Yes** ☐ **No**

115.76 (b)

- **Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?** ☒ **Yes** ☐ **No**

115.76 (c)

- **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 ☐ No

115.76 (d)

- **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 ☐ No**

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

The agency has policy in place that address staff discipline for a violation of any provision of their Prison Rape Elimination Act policy, as well as any other policy that governs staff conduct. I confirmed the utilization of the discipline through review of the agency investigations, and staff interviews.
The audited facility had one staff member disciplined within the last 12 months for a violation of these policies.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- **Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ☒ Yes ☐ No**
- **Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No**
- **Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ☒ Yes ☐ No**

115.77 (b)

- **In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? ☒ Yes ☐ No**

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has policy in place that addresses corrective action for volunteers and contractors who violate of any provision of their Prison Rape Elimination Act policy, as well as any other policy that governs conduct. I confirmed the utilization of the discipline through review of the agency investigations and staff interviews.

The audited facility has not disciplined any volunteers or contractors within the last 12 months for a violation of these policies.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- **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 ☐ No**

115.78 (b)

- **Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? ☒ Yes ☐ No**

115.78 (c)

- **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 ☐ No**

115.78 (d)

- **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 ☐ No**

115.78 (e)

- **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 ☐ No**

115.78 (f)

- **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 ☐ No**

115.78 (g)

- **If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) ☒ Yes ☐ No ☐ NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has policy in place that addresses discipline for inmates who violate any provision of their Prison Rape Elimination Act policy, as well as any other policy that governs inmate conduct. I confirmed the utilization of the discipline through review of the agency investigations and staff interviews.

The audited facility has not disciplined any inmates within the last 12 months for a violation of these policies.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexua

abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- **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 ☐ No ☐ NA

115.81 (b)

- **If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, 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 ☐ No ☐ NA

115.81 (c)

- **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?** ☒ Yes ☐ No

115.81 (d)

- **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 ☐ No

115.81 (e)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has policies in place that address the provisions of this standard. As previously stated under standard 115.41 the medical department does a second screening of the inmates and asks questions relative to sexual victimization as well as sexual abusiveness. If it is found that any inmate has experienced either they will be scheduled for an evaluation with a mental health practitioner within 14 days. I confirmed these evaluations with the medical and mental health personnel as well as during the inmate interviews.

All medical records are kept secure and are only available to medical and mental health personnel.

I confirmed compliance with the standard through the review of inmate medical files, staff interviews and inmate interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- **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** ☐ **No**

115.82 (b)

- **If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? ☒ Yes ☐ No**

- **Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ☒ Yes ☐ No**

115.82 (c)

- **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 ☐ No**

115.82 (d)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLAINCE

The medical personnel ensure that victims of sexual assault receive prompt and appropriate medical intervention. The nature and scope are determined by medical and mental health practitioners according to their professional judgment.

The facility has 24 hour medical coverage.

The policy further states that prophylactic treatment and testing is offered to the patient, as well as follow up care for sexually transmitted or other communicable diseases. An evaluation by a mental health provider is completed for crisis intervention counseling and long term follow up plans.

The above services are offered at no financial cost to the inmate. These policies and procedures were confirmed with the medical and mental health staff during interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- **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 ☐ No**

115.83 (b)

- **Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? ☒ Yes ☐ No**

115.83 (c)

- **Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No**

115.83 (d)

- **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.*) ☒ Yes ☐ No ☐ NA**

115.83 (e)

- **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 pregnancyrelated 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.*) ☒ Yes ☐ No ☐ NA**

115.83 (f)

- **Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No**

115.83 (g)

- **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** ☐ **No**

115.83 (h)

- **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** ☐ **No** ☐ **NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The medical personnel ensure that victims of sexual assault receive prompt and appropriate medical follow up treatment. The nature and scope are determined by medical and mental health practitioners according to their professional judgment.

The facility has 24 hour medical coverage.

The policy further states that prophylactic treatment and testing is offered to the patient, as well as follow up care for sexually transmitted or other communicable diseases. An evaluation by a mental health provider is completed for crisis intervention counseling and long term follow up plans.

The above services are offered at no financial cost to the inmate. These policies and procedures were confirmed with the medical and mental health staff during interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident review

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- **Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? ☒ Yes ☐ No**

115.86 (b)

- **Does such review ordinarily occur within 30 days of the conclusion of the investigation? ☒ Yes ☐ No**

115.86 (c)

- **Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ☒ Yes ☐ No**

115.86 (d)

- **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 ☐ No**

- **Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual,**

transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? ☒ Yes ☐ No

- **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 ☐ No**

- **Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ☒ Yes ☐ No**

- **Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No**

- **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 ☐ No**

115.86 (e)

- **Does the facility implement the recommendations for improvement, or document its reasons for not doing so? ☒ Yes ☐ No**

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has policy in place that outlines the facilities review of incidents. The policy addresses all provisions of the standard. The facility reviews the investigations and documents the outcome of the review. The review is documented by the PREA Coordinator.

I confirmed the incident review process during staff interviews and review of incident review documentation. All interviewed staff understood the process for reviewing incidents and the documentation requirements.

After a careful review of all documentation, and the information received during both the agency level and the facility level interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- **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** ☐ **No**

115.87 (b)

- **Does the agency aggregate the incident-based sexual abuse data at least annually?** ☒ **Yes** ☐ **No**

115.87 (c)

- **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** ☐ **No**

115.87 (d)

- **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** ☐ **No**

115.87 (e)

- **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** ☐ **No** ☒ **NA**

115.87 (f)

- **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** ☐ **No** ☒ **NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has established policies that address all provision of this standard. The agency utilizes a data collection instrument to collect all sexual abuse data.

Compliance was confirmed through review of completed data collection instruments and staff interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- **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 ☐ No**

- **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 ☐ No**

- **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 ☐ No**

115.88 (b)

- **Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse ☒ Yes ☐ No**

115.88 (c)

- **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 ☐ No**

115.88 (d)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

EVIDENCE OF COMPLIANCE:

The agency has policies in place that address all provisions of the standard.

The PREA Coordinator reviews all 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;**
- **Taking corrective action on an ongoing basis; and**
- **Preparing an annual report of its findings and corrective actions for each facility, and the agency**

The report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.

The agency's report is approved by the agency head and made readily available to the public through the agency website.

The agency has redacted any material from the reports that would present a clear and specific threat to the safety and security of its facilities.

During staff interviews I confirmed that if a trend was identified while reviewing the data a corrective action plan would be developed for that facility and immediately be put into place.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- **Does the agency ensure that data collected pursuant to § 115.87 are securely retained?** ☒ **Yes** ☐ **No**

115.89 (b)

- **Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? ☒ Yes ☐ No**

115.89 (c)

- **Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ☒ Yes ☐ No**

115.89 (d)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has a policy in place that addresses the provisions of this standard. I found that the agency digitally retains all data collected, this data is available to the public through the website.

The annual reports are published on the website. All personal identifiers have been removed from the reports.

The agency has a policy in place that maintains all sexual abuse data for at least 10 years from the date received.

Staff interviews and review of the annual reports further confirmed this procedure.

After a careful review of all documentation, and the information received during both the agency level and the facility level interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- **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 ☐ No**

115.401 (b)

- **Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*) ☒ Yes ☐ No**

- **If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the *second* year of the current audit cycle.) ☐ Yes ☐ No ☒ NA**

- **If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the *third* year of the current audit cycle.) ☐ Yes ☐ No ☒ NA**

115.401 (h)

- **Did the auditor have access to, and the ability to observe, all areas of the audited facility? ☒ Yes ☐ No**

115.401 (i)

- **Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? ☒ Yes ☐ No**

115.401 (m)

- **Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? ☒ Yes ☐ No**

115.401 (n)

- **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 ☐ No**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The facility was audited once during the auditing cycle from August 20, 2016, and August 20, 2019. This audit report is uploaded to the agency website.

During the audit process I was able to receive copies of all relevant documentation, conduct private interviews with staff and inmates, tour the complete facility, and receive confidential correspondence from both inmates and staff.

After a careful review of all documentation, and the information received during both the agency level and the facility level interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

Standard 115.403: Audit contents and finding

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- **The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) ☒ Yes ☐ No ☐ NA**

Auditor Overall Compliance Determination

☐ **Exceeds Standard (*Substantially exceeds requirement of standards*)**

☒ **Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)**

☐ **Does Not Meet Standard (*Requires Corrective Action*)**

EVIDENCE OF COMPLIANCE:

The agency has published all final audit reports on their website, this was confirmed by navigating to the page on the website and reviewing all of the audit reports.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

AUDITOR CERTIFICATION

I certify that:

☒ **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, and**

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

Patrick J. Zirpoli _____ September 30, 2020

Auditor Signature **Date**

Calendar Year 2019

The referenced data in the report below was obtained from the records of investigations maintained by the ACACC PREA Coordinator.

	2017	2018	2019
Sexual Abuse Allegations			
Sexual Harassment Allegations			
Retaliation Allegations	0	0	0
Investigations Completed	20		12
Substantiated Allegations	8		
Unfounded Allegations	8		
Unsubstantiated Allegations	4		
Ongoing Investigation at the Year End	0	0	0