

# PREA Facility Audit Report: Final

**Name of Facility:** California Substance Abuse Treatment Facility and State Prison Corcoran

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 01/05/2021

**Date Final Report Submitted:** 07/29/2021

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Cheyenne Evans	<b>Date of Signature:</b> 07/29/2021

AUDITOR INFORMATION	
<b>Auditor name:</b>	Evans, Cheyenne
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<b>Start Date of On-Site Audit:</b>	11/15/2020
<b>End Date of On-Site Audit:</b>	11/20/2020

FACILITY INFORMATION	
<b>Facility name:</b>	California Substance Abuse Treatment Facility and State Prison Corcoran
<b>Facility physical address:</b>	900 Quebec Avenue, Corcoran, California - 93212
<b>Facility Phone</b>	
<b>Facility mailing address:</b>	

Primary Contact	
<b>Name:</b>	Jerry Ourique
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Warden/Jail Administrator/Sheriff/Director	
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<b>Facility PREA Compliance Manager</b>	
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<b>Facility Health Service Administrator On-site</b>	
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<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	5111
<b>Current population of facility:</b>	4567
<b>Average daily population for the past 12 months:</b>	5175
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	19-88
<b>Facility security levels/inmate custody levels:</b>	LEVEL II, III, and IV. Min-A, Med-A, and Close.
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	1896
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	103
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	70

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	California Department of Corrections and Rehabilitation
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	1515 S St, Sacramento, California - 95811
<b>Mailing Address:</b>	
<b>Telephone number:</b>	916 324-6688

Agency Chief Executive Officer Information:	
<b>Name:</b>	Dr Muhammad Nasir
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Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Shannon Stark	<b>Email Address:</b>	shannon.stark@cdcr.ca.gov

## AUDIT FINDINGS

### **Narrative:**

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

A Department of Justice (DOJ) Prison Rape Elimination Act (PREA) audit was conducted at the Substance Abuse Treatment Facility (SATF) in Corcoran, California based on the Western State Consortium Agreement. This audit was the second PREA audit for SATF. SATF is under the jurisdiction of the California Department of Corrections and Rehabilitation (CDCR). The PREA Audit team consisted of DOJ Certified Auditor Cheyenne Evans (lead auditor) with support staff of Kona Mann, Kristine Najim and Gail Mirkovich, hereafter referred to as the PREA Audit Team. Support staff assisted the lead auditor and participated in the site review, conducting interviews with staff and inmates and file reviews. The on-site audit was conducted from November 15, 2020, to November 20, 2020.

### **Pre-Onsite Phase:**

Prior to the onsite audit a posting of the PREA Audit Notices and auditor's contact information was distributed throughout SATF and posted on October 3, 2020, six (6) weeks prior to the first day of the on-site audit. The facility provided email documentation, including pictures, to demonstrate the notices were posted in accordance with audit requirements in English and Spanish. The notices included instructions for inmates that all correspondence must include "for SATF PREA Audit" on the envelope; otherwise, it will not be considered confidential. Further, all written and verbal correspondence and disclosures provided to the auditor are confidential and will not be disclosed unless required by law.

SATF's Pre-Audit Questionnaire (PAQ) was submitted via the PREA Online Audit System on September 28, 2020. Additionally, supporting documents and a copy of the PAQ was sent through the United States Postal Service on a secured disk on September 25, 2020, and the auditor received the secured disk on September 30, 2020. The PAQ and documents submitted were reviewed and several PREA Standards documentation were noted that it would be provided on-site. Documentation reviewed prior to the onsite audit included agency policies and procedures; forms; inmate screening and reassessment processes, organizational charts; PREA related posters, brochures; and memorandums of agreements.

A pre-audit correspondence was facilitated on November 2, 2020, between the auditor, SATF PREA Compliance Manager and CDCR PREA Coordinator to discuss the review of the PAQ, documents and file/records needed for review while on site and the schedule for the on-site phase to include the tentative onsite audit schedule. The following lists and documents needed for review was provided to SATF's PREA Compliance Manager:

- List of all Staff employed at SATF, to include positions held
  - Health Care Staff (medical & mental health)
  - Non-Custody Staff (Correctional Counselors \*conducts PREA screening), food service, maintenance, etc.)
  - Custody Staff
  - Separate list for New Hires and Promotions for the last 12 months
  - Human Resources Staff
  - Prison Industry Authority Staff Authorized Volunteers and Contractors
  - Investigators that investigate PREA cases
  - Staff charged with Monitoring
  - Staff that participates in Sexual Abuse Reviews (IPRC)
  - Volunteer/Contractor
- Inmate lists
  - Inmates with disabilities (Physical, low vision/blind, hard of hearing/deaf, cognitive)
  - Inmates who are designated as Limited English Proficient (LEP)
  - Inmates who identified as Lesbian, Gay or Bi-sexual
  - Inmates who identified as Transgender / Intersex
  - Inmates who are in segregated housing for high risk of sexual victimization
  - Inmates who reported sexual victimization during PREA risk screening
- List and/or documents needed for sampling while on-site
- PREA related grievances made within the 12-month period preceding the audit
- Log for allegations of sexual abuse and sexual harassment reported for investigation within the 12-month period preceding the audit
- All hotline calls made within the 12-month period preceding the audit

A follow-up pre-audit phone call was facilitated between the auditor and the SATF PREA Compliance Manager to clarify the requested items and logistics of the on-site audit, review of the purpose and general process of the audit, goals, and expectations about accessibility to areas of the facility, files, inmates, and staff.

Additional files for documentation review were requested to be available for review during the on-site phase of the audit: human resource files for background checks and promotional clearances, staff training logs, inmate records for inmate PREA 72 hour and 30-day review screenings, transgender and inter-sex inmate bi-annual reviews, medical and mental health records for referrals and follow-ups, notification for reports received by inmates that were sexually abused while confined at another facility and SATF PREA investigations.

Additionally, the auditor contacted Just Detention International (JDI) and the Kings Community Action Organization Rape Crisis Center as it related to PREA related services at SATF. The auditor interviewed an advocate from Kings Community Action Organization discussing the current Memorandum of Understanding (MOU) with SATF and the PREA related services that are being provided at SATF. The auditor received nine (9) confidential correspondence from inmates at SATF prior to the on-site phase. The auditor interviewed the inmates during the on-site phase of the audit to follow-up on their correspondence.

From November 9, 2020, to the date of the onsite audit several phone calls and emails were initiated between the SATF PREA Compliance Manager and auditor prior to the onsite audit due to the concerns relating to the Novel Coronavirus (Covid-19) and confirmed cases at SATF. There were several outbreaks of the Covid-19 virus prior to and during the onsite portion of the audit where areas in SATF were deemed to be in isolation or quarantined. The auditor was informed that an outbreak of the Covid-19 virus occurred in Alpha and Delta yards. Buildings 3 and 4 in Charlie yard, Building 2 in Echo yard, and Building 1 - Sections A and B were designated to be in isolation and or in quarantine. Based on this information certain supervisory, specialized staff, and administrative staff, because of their positions of authority and access to private locations such as secure offices, were interviewed via telephone. These steps were taken to keep the PREA Audit team, SATF inmate and staff safe by limiting the person to person contact while onsite to assist in controlling the spread of the Covid-19 virus. These telephone interviews were scheduled from November 9, 2020, to November 13, 2020, for every half hour in an (8) hour day. These telephone interviews included the following:

- Agency head or designee
- Warden
- PREA coordinator
- PREA compliance manager
- Agency contract administrator
- Supervisory-level medical and mental health staff
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) and Sexual Assault Nurse Examiner (SANE) staff
- Rape Crisis Center Advocates
- Volunteers and supervisory-level contractors who have contact with inmates
- Contractors and supervisory-level contractors who have contact with inmates
- Investigative staff
- Supervisory-level staff who are involved in screening for risk of victimization and abusiveness
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- Supervisory-level first responders, both security and non-security staff
- Supervisory-level intake staff

#### **On-Site Phase:**

A tentative schedule was provided to SATF's Administration, PREA Compliance Manager and statewide PREA Coordinator approximately one week prior to the audit teams arrival at SATF. During the onsite audit slight modification to the schedule did occur.

On November 15, 2020, the audit team met with SATF PREA Compliance Manager, SATF Investigative Services Unit (ISU) escort staff and CDCR headquarters support team at SATF to begin the on-site review. SATF had an inmate population of 4,424 on the first day of the onsite audit, November 15, 2020. SATF consists of (4) complexes and a Short-Term Restricted Housing (STRH) Unit included in Complex I, though placed outside of the complex's perimeter. Following the initial meeting the PREA Audit Team was escorted by the Investigative Services Unit (ISU), PREA Compliance Manager, Headquarters' support staff and SATF supervisors. The PREA Audit Team split into (4) groups and was assigned to (1) complex each and started the tour.

SATF is the largest prison in the United States and encompasses approximately 280 acres. SATF has (4) complexes within a secured perimeter. All areas where the inmates are allowed were inspected unless the threat of the Novel Coronavirus (Covid-19) was high (Isolation or Quarantine areas). Photos of specific areas of the isolation and quarantine sections was requested by the auditor for review.

Tours included housing units, recreation yards, medical clinics and treatment areas, kitchen and dining halls, chapel, laundry, facility operations, warehouses, commissary, receiving and release, library, buildings utilized for inmate services and programming, gyms, work change, janitorial, welding, electronics, mental health areas, recreation cells and yards, administrative offices, visiting, and inmate canteen. Additional outside areas such as grounds shop, garage, mailroom, and health care sections were toured. All other areas that the PREA audit team could not get access to due to the tour occurring on a weekend were toured throughout the remainder of the audit week. During the tour and inspection, staff and inmates were informally questioned regarding supervision of inmates, supervisory rounds, and their sense of a safe environment. Observations of these practices were also done.

On November 16, 2020, the PREA audit team met with SATF key administrators to include the PREA Compliance Manager and CDCR PREA headquarters support team. The purpose of the meeting was to introduce the team, convey the expectations for the PREA audit and go over the tentative schedule for the week. Following the initial meeting, the audit team along with assigned escorts continued with the site review of the facility and interviews with staff and inmates.

PREA informational posters were posted in English and Spanish in the housing units and common areas of the facilities to include visiting areas. The audit team observed posters with information for interpreter services, victim advocate information and reporting phone numbers and addresses. These informational posters were visible for the inmate population. In other areas PREA informational posters were not up though the SATF staff posted once notified.

On November 17, 2020, the audit team continued to tour and interview in their assigned complexes and yards, each complex and yard is self-sufficient with basic sections such as, medical, kitchen and dining, Education, Library, Chapel, Canteen, Clothing Distribution and Laundry. Each complex, yard and facility has different purposes which requires other additional sections such as vocational training, substance abuse programs, Prison Industry Authority (PIA) and maintenance. The PREA Audit Team conducted interviews with inmates and staff. Selection of inmates were made by housing rosters and staff who were present in the area were randomly selected unless they qualified for the specialized staff interviews.

The DOJ PREA Auditor received nine (9) inmate letters from SATF, all nine inmates were interviewed throughout the onsite audit.

The Prison Industry Authority (PIA) has cameras placed throughout their areas to ensure safety and loss prevention. The cameras in these areas are stationary, however, the curved shape of the camera allows for a wide area view, the recording storage is at least for (90) ninety days and monitored in the PIA supervisor office.

On November 18, 2020, the audit team continued with the onsite review and interviews with staff and inmates. Due to various responsibilities to the staff's main responsibilities, they were questioned on multiple questionnaires. Interviews with custody staff members included those assigned to all three rotating shifts. The audit team also collected and reviewed onsite documents that includes grievances (appeals), PREA investigations, human resource files, volunteer and contract personnel and training records, medical and mental health follow up for inmates who have reported previously being a victim of sexual abuse and transgender/intersex biannual assessments, 72 hour and 30-day review screenings.

The audit team adjusted while conducting interviews with staff and inmates as outbreaks of Covid-19 occurred during the onsite audit. Interviews were increased in other areas where there were no outbreaks to compensate for those interviews that could not be conducted in the infected areas.

November 19, 2020, the audit team split up and continued to conduct inmate and staff interviews in their assigned areas. Review of training records and an informal interview with the institutions training Lieutenant was conducted. Additional human resource files for background checks and promotional clearances, inmate records for inmate PREA 72 hour and 30-day review screenings, transgender and inter-sex inmate bi-annual reviews, medical and mental health records for referrals and follow-ups, notification for reports received by inmates that were sexually abused while confined at another facility and SATF PREA investigations were also reviewed.

November 20, 2020, the PREA audit team followed up with any missing element for tours and interviews. A debrief with key administrators to include the PREA Compliance Manager and the CDCR headquarters PREA support team was conducted with a summary of the preliminary findings relating to the PREA Standards being discussed. SATF staff exhibited professionalism and had a proactive approach to being PREA compliant and to ensure an open and safe environment, were very cooperative and willing to go beyond what is needed to accomplish the goals set forth for the PREA audit.

Investigative files contained reports of the allegation, investigation, monitoring and referrals for medical and mental health follow-up, applicable sexual assault incident review and notifications to the inmates. ISU PREA investigative files were thorough, well-documented and organized. Additionally, inmate PREA related grievances were reviewed and found to be complete and answered in a timely manner.

SATF reported a total of 48 allegations of sexual abuse and sexual harassment in the 12-month period preceding the audit period as follows:

- Total number of allegations - 48
  - o Staff on Inmate Sexual Abuse - 7
  - o Inmate on Inmate Sexual Abuse - 22
  - o Staff on Inmate Sexual Harassment - 10
  - o Inmate on Inmate Sexual Harassment - 9
- Dispositions:
  - o Substantiated - 0
  - o Unsubstantiated - 32
  - o Unfounded - 16

The following list compares the required category/numbers of interviews versus the actual category/numbers of interviews conducted for the inmate population size of SATF. On November 15, 2020, there were 4,424 inmates at SATF. Though the PREA Audit team was unable to

reach some minimum requirements for specialized inmate interviews there were significantly enough interviews in other specialized categories and random interviews to compensate for the shortfall. There were no identified youthful inmates or inmates who were in segregated housing for high risk of sexual victimization. This was corroborated through the facility tour, interviews with the SATF PREA Compliance Manager, Intake Staff and listing of inmates. All other inmates were randomly selected by the audit team based on listings provided by the facility and ensured a diversity of inmates based on age, ethnicity, and lengths of stay at the facility. Random and Targeted Interviews were conducted on a one-on-one basis and in available rooms or office space within the housing units throughout the facility to ensure privacy. Throughout the onsite review, the audit team was able to also conduct informal interviews with inmates.

<b>Type of Interviews</b>	<b>Required Inmate Interviews</b>	<b>Inmate Interviews Conducted</b>
Overall Minimum # of Inmate Interviews	50	114
Random Inmates	25	77
Targeted Inmates	25	37
<b>Breakdown of Targeted Inmate Interviews</b>		
Youthful Inmates	At least 4	N/A
Inmates with a Physical Disability	At least 1	6
Inmates who are Blind, Deaf or Hard of Hearing	At least 4	5
Inmates who are LEP	At least 1	7
Inmates with a Cognitive Disability	At least 2	4
Inmates who Identify as Lesbian, Gay, or Bisexual	At least 4	8
Inmates in Segregated Housing for High Risk of Sexual Victimization	At least 2	N/A
Inmates Who Reported Sexual Abuse	At least 4	3
Inmates Who Reported Sexual Victimization During Risk Screening	At least 3	2

SATF has approximately 2,019 staff, 173 volunteers and contractors at the facility. Due to the Coronavirus pandemic non-essential programs that volunteers, and contractors participate in are not being conducted at SATF. Therefore, interviews for volunteers was conducted via telephone. The audit team randomly chose a diverse sample of staff by interviewing staff on three (8) hour rotating shifts throughout the facility in the housing units and various other post locations throughout SATF. The sample also included a diversity of staff based on gender, length of time employed by CDCR and SATF to include job titles. Throughout the onsite review, the audit team was able to also conduct informal interviews with staff, and contractors.

The audit team conducted interviews with 134 staff members. It should be noted that every staff member and volunteer / contractor serve in more than one role. All employees are mandated reporters, and most are first responders. Specialized staff interviewed may serve in more than one role and were responsible for more than one of the Specialized staff duties and as a result some interviews conducted with Specialized staff included multiple interview questionnaires.

<b>Type of Interview</b>	<b>Required Staff Interviews</b>	<b>Staff Interviews Conducted</b>
Overall Minimum Number of Staff Interviews	At least 35+	134
Random Staff Interviews	At least 12 (1) from each shift	40
Specialized Staff Interviews	At least 23+	94
<b>Breakdown of Specialized Staff Interviews</b>		
Agency Contract Administrator	At least 1	1
Intermediate or Higher-level facility staff	At least 1	13
Line Staff who supervise youthful inmates if any	At least 1	N/A
Education & Program staff who work with youthful inmates if any	At least 1	N/A
Medical Health Staff	At least 1	4
Mental Health Staff	At least 1	5
Non-Medical Staff involved in cross-gender strip searches or visual searches	At least 1	N/A
Administrative Staff, Human Resources	At least 1	3
SAFE/SANE Staff	At least 1	1
Volunteers	At least 2-4	2
Contractors	At least 1	2
Investigative Staff	At least 1	3
Staff who Perform Screening for risk of victimization and abusiveness	At least 1	4
Staff who supervise inmates in segregated housing	At least 1	1
Staff on the Sexual Abuse Review	At least 1	1
Designated staff member charged with monitoring retaliation	At least 1	1
First Responders, both security and non-security	At least 1	44
Intake Staff	At least 1	1
<b>Required Specilized Staff Interviews</b>		
Agency Head or Designee	At least 1	1
Warden or Designee	At least 1	1
PREA Coordinator	At least 1	1
PREA Compliance Manager	At least 1	1
<b>Other Specialized Staff Interviews</b>		
Mailroom, Education Staff, Union Representative, Chaplain (if not volunteer), Grievance Officer, Rape Crisis Advocate		4 - Grievance, Community Resource Manager, Advocate, Mailroom

Interviews with staff and inmates throughout the onsite phase indicated that both have been informed and are knowledgeable about PREA their duties and responsibilities.

In addition to formal interviews of staff, volunteers, contractors and inmates, the audit team conducted informal interviews throughout the site review. The audit team tested the inmate phone system in several areas to contact the local rape crisis center, as listed on the posters throughout the facility and all calls were able to be processed.

The Interim Report was provided to the facility on January 4, 2021, triggering the corrective action period. Ten (10) standards required corrective action:

- 115.13 (a)-5 - Supervision and Monitoring
- 115.15 (d) - Limits to Cross-Gender Viewing and Searches
- 115.17 (c) & (d) - Hiring and Promotion Decisions
- 115.31 (c) - Employee Training
- 115.33 (b) & (d) - Inmate Education
- 115.41 (f) - Screening for Risk of Victimization and Abusiveness
- 115.42 (d) - Use of Screening Information
- 115.67 (c) - Agency Protection Against Retaliation
- 115.71 (c) - Criminal and Administrative Agency Investigations
- 115.86 (a) & (c) - Sexual Abuse Incident Reviews

During the corrective action period, the facility PREA Compliance Manager provided the auditor with all requested information and documentation necessary to show compliance with the identified standards. The corrective action period ended on July 3, 2021.

## AUDIT FINDINGS

### Facility Characteristics:

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

The California Substance Abuse Treatment Facility (SATF) is the largest prison in the United States that houses level 1 to IV security level, sensitive needs, and maximum-security inmates. SATF is in the city of Corcoran, Kings County California, which opened in 1995. SATF is an adult male prison that encompasses approximately 280 acres and is approximately 2.7 miles around. SATF is a multi-mission institution that houses level II-general population, sensitive needs yard, and non-designated program; level III-sensitive needs yard; and a level IV-general population and sensitive needs yard. SATF also has a short-term restricted housing unit (STRHU).

There are (4) four complexes within their own secured area, all complexes are separated by roads, fence lines and buildings, each complex has (2) facilities that are not only separated by fence lines but walkways and buildings. Complex I has facilities A/B and the Short-Term Restricted Housing Unit (STRHU), Complex II has Central Services and Facility C, Complex III has facilities D and E and Complex IV has facilities F and G. All complexes are self-sufficient with inmate programs, services, housing, administration staff, support services, library, chapel, visit room, kitchen/dining, laundry, canteen, medical clinics, inmate training and work programs.

Complex I, is a dormitory design housing that houses level II inmates and contains facilities A and B. Both facilities has the exact same layout and is referred to as Yard A and Yard B. Each yard has an outdoor recreation area and individual day room in each housing "quads".

Each yard has (3) buildings labeled 1, 2, and 3, each building has (3) "pods" identified as A, B and C. Each pod has (2) tiers (upper and lower level) and in each tier is divided into (3) "quads" holding (7) bunk beds that accommodates (14) fourteen inmates. The tiers have a bathroom with (1) urinal and (3) toilet stalls with half doors for privacy and (2) group type showers that has privacy screens. The lower tier has (3) showers. Each building capacity is 252 inmates, each yard's capacity is 756 inmates. Programs offered in Complex I yards are vocations in small engine work, paint shop, plumbing, HVAC, and a substance abuse treatment program in A Yard.

Yard A is a designated Sensitive Needs Yard (SNY) for Level II inmates. Yard B are for Level II General Population (GP).

Complex I has (1) Central Service building separating the A Yard from the vocational program area, any inmate needing to go to programs must first go through the work change area and a strip search is performed before and after entering the area.

SATF does not operate an Administrative Segregation Unit however, the need remains. Inmates deemed for placement in segregation are those who pose a threat to others, endangers institutional security operations, jeopardizes the integrity of an investigation, or participates in criminal activity are transferred to the California State Prison.

The Short-Term Restricted Housing Unit (STRHU) opened in April 2015, is part of Complex I though, has a standalone building. This housing unit consists of, (8) "wings" (6) wings have (12) cells in each and (2) wings have (14) cells in each. All cells has its own toilet.

Each wing has (2) showers with half doors. All sections have holding cells and an adjacent exercise yard that accommodates one or two inmates that are from the same cell and is supervised by a correctional officer through closed-circuit television monitoring. There are (20) exercise modules that has a toilet, sink and a table with chair for eating. STRHU provides programming to meet needs of inmates with mental health concerns and clinicians provide one-on-one treatment weekly, and group treatment. Inmates in STRHU are provided with psycho educational treatment that helps the population with learning how to cope with prison and mental health / symptom management. STRHU has its own medical clinic, support services and custodial program areas including a law library and a property storage room.

Complex II is comprised of Central Services and Facility C. Central services is made up of the institutions core areas and includes the following; Receiving and Release which is the hub of all inmates transferring in and out of the institution, Mailroom that processes all incoming and outgoing mail, logs legal mail, inmate money orders and transports mail to the Corcoran post office, Armory, Central Control, Family Visiting which is limited to qualifying work/training incentive groups and eligible inmates. Family visits are extended overnight visits with their immediate family members. Family visiting has now been converted into staff offices. Additional core areas are, Personnel Assignments, Inmate Assignments, Investigative Services Unit, Institutional Gang Investigators, and Internal Affairs. This area is a secured space and is accessible from facilities D and E (Complex III) and serves as the central communications station for the institution and operates 24/7. Central services is responsible for the headcounts, monitoring electronic detection systems, fire and safety alarm, observations of selected gates and key control storage. There are (3) additional complex control units located in Complex I, II and IV.

Central services are also responsible for controlling movement of staff into the facilities and is accountable for the control of equipment such as keys, batons, radios and less than lethal weapons.

Facility C is also part of Complex II and has a 180-degree design for level IV maximum security general population inmates, and is also known as the gang unit. The facility is separated into an upper and lower yard, each yard has (4) buildings, each with (2) housing areas and a shared dining facility. Currently Facility C inmates are fed in their cells and the dining room is no longer used for feeding but used to process inmates in and out to the yard for recreation. Each building is divided into (2) housing units and further divided into (3) pods per housing unit. Each pod has (2) tiers, and each tier has (1) shower. (2) Pods contain (20) cells and the other contains (24) cells, all of which the control booth officer has a visual oversight from above. Facility C has a 1,024-bed capacity. Each cell has a toilet and sink.

Facility C are identical in their layout, design and staffing, there were no cameras throughout the housing unit.

Facility C has program and inmate service spaces used for education, chapel, a health care clinic, canteen, laundry, library, and other approved programs. A unique program that this facility has is the Step-Down Program, when inmates are released from the Security Threat Group 5 in an intermediate security housing unit they are released to Facility C Security Threat Group (STG) housing unit. Education offer programs for inmates who wish to obtain their GED or high school diploma as well as take computer classes. The program services area consists of security staff offices. The health care clinic contains dental, nurses and doctor offices that provide basic medical and dental services.

The SATF Correctional Treatment Center (CTC) is also part of Complex II and consists of a treatment triage and inpatient services area. The CTC triage area provides emergency services and 24-hour medical observation of inmates and has mental health staff. Inmates are not housed in the triage area for longer than 24 hours. Mental health staff provides services by going to the inmate's location. The CTC also has a small in-house kitchen to prepare meals for the inmates in the CTC. The inpatient services consist of (18) medical beds and (20) mental health crisis beds, the maximum capacity is (38) inmates. Housing is a single cell environment with their own toilet and shower. The small yard area of CTC consists of a toilet which has a privacy screen for use.

SATF's medical has additional onsite specialty clinics and telemedicine specialty clinics located in the CTC, most consultations are provided in the CTC by onsite consultants or through telemedicine. Treatment and care plans are coordinated between the consultants and primary care providers located at the institution. Health care services includes day to day services provided by Registered Nurses and Nurse Supervisor. SATF provides a multi-tiered mental health treatment program for both segregated and general population inmates that would consist of evaluations, triage, and clinical interventions as well as transfer to outside state hospital care when necessary for clinical case management services and psychiatric medication evaluation for appropriate level of care. SATF also offers onsite radiology services, MRI's, CAT scans and ultrasound. There is also a physical therapy service that assists in recovery and rehabilitation of inmate-patients with neuromuscular, orthopedic, and other disabilities.

The SATF Plant Operations is located behind Facility C. It is a secured area that contains offices and workstations for facility operations staff. Plant Operations consist of plumbing, electrical and carpentry. Inmates are never allowed in the area as this is a secured area. There are sixty- one (61) Operational staff in various trades that are responsible for the physical structure and maintenance of SATF, the lethal electrified fence, (6) emergency backup generators, freshwater pumping station, and the prison grounds.

Complex III consists of Facility D and E and is referred to as Yards. D Yard is a level IV Maximum Security, Sensitive Needs Yard and is comprised of (5) housing units, each housing unit contains 100 cells. The capacity for this facility is 875 inmates. E Yard is identical to D and is a level III Sensitive Needs Yard and comprised of (5) housing units, the capacity is 850 inmates. These yards have a 270-degree design due to the placement of cells to the center of the control booth.

Other areas in complex III includes education, chapel, library, a work change area, a Bike Shop that rebuilds bicycles to give back to the community, the Training Center for the SATF staff and the California Prison Industry Authority (CALPIA), Central Kitchen and Dental warehouses. The CALPIA areas include the bread, cookie, peanut butter, and jelly warehouse that is monitored by thirty-two (32) cameras. The camera monitors can be viewed from the CALPIA Supervisors office located directly in front of the packaging area. Recording lasts up to (3) months. The CALPIA inmate workers are under the supervision of CALPIA staff. Items are packaged and distributed to other institutions for inmate lunches from here. The central kitchen prepares and ships food throughout the institution and supervised by an institutional custody staff.

Complex IV consists of Facility F and G that are referred to as Yards. Both yards are identical in design. Both yards have a dormitory/pod design which is comprised of (3) housing units and is divided into (4) wings. Each wing consists of (2) tiers with (6) dormitory cells with bunk beds, housing (6) inmates per cell. There are (44) lockable dormitories/cells per wing. The wings are placed around a center control console that serves as the entry point into each housing unit. The design was based on a therapeutic community concept where inmates live and participate in drug treatment groups. Both yards house Enhanced Outpatient Program Inmates that provides outpatient mental healthcare and structured activities for mentally ill inmate patients, who because of their illness experience adjustment difficulties in General Population but not that impaired whereas they require inpatient care. The capacity for Yard F is 968 inmates and Yard G is 924 inmates. The other Complex areas include a kitchen and dining, laundry, library, education, canteen, visiting area and a medical clinic that surrounds a central outdoor recreational yard.

F Yard is a level II Sensitive Needs Yard (SNY) and houses the Developmental Disability Program (DDP) inmates. The Program ensures appropriate classification, housing, and protection of inmates with developmental disabilities. F Yard also is a designated as a re-entry hub.

G Yard is also a level II Sensitive needs Yard (SNY) that employs Cognitive Behavioral Interventions for SATF's Sexual Offending program, to increase public safety by reducing criminal behavior and recidivism for high-risk sex offenders that are required to register. Offenders participate in individual therapy and structured group treatment following a core curriculum for sex offenses.

SATF has a dedicated Investigative Services Unit (ISU) comprised of Security and Investigation (S&I) officers who author search and arrest warrants of individuals who conspire to introduce contraband into the institution, are court liaisons and works with the District Attorney's office, serving subpoenas and referring prosecutable offenses, Internal Affairs who are under the direction of the institutions Warden and conducts investigations of all suspected criminal violations and misconducts involving employees and the Strategic Threat

Group (STG) Investigators. The ISU monitors and investigates all suspicious activities within SATF to include narcotics, contraband, homicides and attempted homicides, escapes and PREA. The ISU staff are proficient in crime scene preservation and processing, evidence collection and conduct comprehensive investigations involving felony activities. The ISU also has a Drug Interdiction Officer (DIO) who conducts random drug testing of employees and visitors entering the secured perimeter utilizing an Ion scan machine.

**SATF Education and Programs:**

This institution is the home of Tulare Lake Adult School that is accredited by the Western Association of Schools and Colleges. The educational services offer Adult Basic Education, Level I through III, General Education Development, High School Diploma Program, College courses, Career Technical Education in auto mechanics and repair, building maintenance, carpentry, computer literacy, electrical and electronic work, HVAC, masonry, office technologies, plumbing, welding, small engine repair and more, Disabled Placement Program Assistance, Developmentally Disabled Program Assistance, Sign Language Interpreter Assistance, Enhanced Out-Patient Education Program, Transitions.

Inmate self-help programs include, transgender support, criminal gangs anonymous, lifer support, veterans' group, breaking barriers, restorative academic mentorship, narcotic and alcoholic anonymous and changing within which is a youth diversion program.

SATF has an Inmate Activity Committee, previously called the Men's Advisory Council (MAC). This committee is covered by CDCR California Rules and Regulations Title 15 section 3230. The purpose is to establish an inmate advisory council that acts as a representative of that area's ethnic group which is responsible for effective communication between the inmates, staff, and Warden in matters of common interests and concerns. Council members meet monthly with the Warden or designee to bring up those concerns and matters and propose resolutions. Emergency and PREA issues may be brought to the attention of staff members at any time and does not have to go through the Inmate Activity Committee. There are procedures on how the representatives are picked and voted in by the inmates, they follow a set of rules to assure fairness, integrity, and proper staff supervision.

SATF also has a Transgender Alternative Lifestyle (TAL) group. The groups can meet weekly and discuss transgender trends, current events, and resources available to them. They can meet with the facility administration once a month to discuss their situations and clarify questions on policy, procedures and anything that affect their treatment, housing and programing or services.

**AUDIT FINDINGS**

**Summary of Audit Findings:**

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

<b>Number of standards exceeded:</b>	0
<b>Number of standards met:</b>	45
<b>Number of standards not met:</b>	0

PREA Standard 115.14 - Youthful inmates is not applicable as CDCR and SATF do not house youthful inmates, therefore a determination of "meets standard" was selected.

**Standards****Auditor Overall Determination Definitions**

- Exceeds Standard  
(Substantially exceeds requirement of standard)
  
- Meets Standard  
(substantial compliance; complies in all material ways with the stand for the relevant review period)
  
- Does Not Meet Standard  
(requires corrective actions)

**Auditor Discussion Instructions**

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	<p><b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.11 (a) - CDCR's Department of Operations Manual (DOM), Section 54040.1, Policy states that, CDCR shall maintain a zero tolerance for sexual violence, staff sexual harassment and misconduct in its institutions, community correctional facilities, conservation camps, and for all offenders under its jurisdiction. his policy applies to all offenders and persons employed by CDCR, including volunteers and independent contractors.</p> <p>CDCR DOM Section 54040.2, Purpose, identifies the purpose of the policy and provides guidelines for prevention, detection, responses, investigation, and tracking of sexual violence, staff sexual misconduct and sexual harassment against CDCR offenders. The policy also informs staff of their responsibility and liability as specified by the law. CDCR DOM Section 54040.3 includes general PREA related definitions as well as definitions specific to prohibited behaviors regarding sexual abuse and harassment. CDCR DOM Section 54040.15 identifies the disciplinary process for those found to have participated in prohibited behaviors related to sexual abuse and harassment.</p> <p>115.11 (b) - A review of CDCR's Agency Organizational Chart and CDCR PREA Coordinator Duty Statement confirmed that CDCR employs an upper-level, agency-wide PREA Coordinator, whose position functions as a Captain under the direct supervision of the Mission Correctional Administrator. The CDCR PREA Coordinator acts as the lead within the Female Offender Programs and Services Special Housing Mission in ensuring compliance with the Federal PREA Standards and Departmental policies and procedures. The CDCR PREA Coordinator reports that she has sufficient time and authority to develop, implement, and oversee the agency's efforts to comply with PREA in all its facilities. The CDCR PREA Coordinator directly oversees thirty-five (35) PREA Compliance Managers (PCM) and one (1) PCM who monitors the CDCR Contracted facilities.</p> <p>115.11 (c) - CDCR and SATF has designated an Associate Warden as the facility PREA Compliance Manager. The PCM reports that he has sufficient time and authority to coordinate the facility's efforts to comply with PREA.</p> <p>CDCR and SATF has shown that there is a zero-tolerance policy for sexual abuse and harassment, has designated a PREA Coordinator and PREA Compliance Manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA Standards. Interviews with staff and inmates while on-site confirmed their knowledge and practice of CDCR's zero-tolerance policy therefore the agency and facility has complied with all sections of this standard.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations Manual (DOM), Chapter 5, Article 44, Section 54040 - Prison Rape Elimination Act.</li> <li>3. CDCR Agency Organizational Chart.</li> <li>4. CDCR PREA Coordinator Duty Statement.</li> <li>5. Interview with CDCR PREA Coordinator and SATF PREA Compliance Manager.</li> </ol>
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115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Contract Beds Unit (CBU) oversees all contracts for California inmates that are placed in contracted institutions. CBU maintains, provides oversight, and monitors all these contracts. A California Department of Corrections and Rehabilitation (CDCR) Administrative Captain oversees the CBU. CDCR currently contracts with (6) institutions for placement of inmates. The contracts are held with a total of (6) institutions, (3) three with the City of Delano, Shafter, Taft and (3) three institutions with The GEO Group, Incorporated. All these institutions are in the state of California.</p> <p>115.12(a) - CDCR, DOM Article 13 - Section 22040.1-22040.4, Contracts, states that the Contracts Management Branch (CMB) shall administer all contracts through execution by the Department in a manner which ensures compliance with all applicable laws, rules, and regulations of the department. All CDCR contracts for the confinement of inmates entered or renewed after August 20, 2012, requires that all Contractors ensure that their employees are in compliance with CDCR's zero tolerance policy for sexual abuse and sexual harassment as described in CDCR Department Operations Manual (DOM), Chapter 5, Article 44.</p> <p>CDCR's contract, Exhibit D requires that the contractor and their staff adopt and comply with the PREA Standards, 28 Code of Federal Regulations (CFR) Part 115, and CDCR's DOM, Chapter 5, Article 44, including any updates to this policy. Contractors will not assign employees which have 1) engaged in sexual abuse in a prison, jail, lockup, community confinement, juvenile facility, or other institution 2) 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; 3) has been civilly or administratively adjudicated to have engaged in the activity described in this sections. Contractor shall conduct criminal background records check for each employee who will have contact with CDCR inmates and retain the results for the audit purposes. Contractor agrees to ensure that all the mandates of PREA policy are complied with. Material omissions, by the contract employee, regarding such misconduct or the provision of materially false information, shall be grounds for removal from institutional grounds. Contract employees, who have contact with inmates, shall be provided training on PREA via the Volunteer/Contractor Information Sheet to learn their responsibilities under the agency's sexual abuse and harassment prevention, detection, and response policies and procedures. Any contract employee who appears to have engaged in sexual misconduct of an inmate shall be prohibited from contact with the inmates and shall be subject to administrative and/or criminal investigation. Referral shall be made to the District Attorney unless activity was clearly not criminal. Reportable information shall be sent to relevant licensing bodies.</p> <p>All (6) current contracts for confinement of inmates was reviewed by the auditor and has confirmed that all contracts required the institutions adopt and comply with the PREA standards.</p> <p>115.12(b) - All (6) contracted facilities have completed DOJ PREA audits and was found to be compliant with the PREA standards. Provisions in the contract ensures monitoring by CDCR's CBU. The CBU Captain confirmed that this unit conducts monthly on-site inspections and that each contracted institution has a PREA Coordinator and Compliance Manager to assist in ensuring compliance with the PREA standards.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - DOM Article 13 - Section 22040.1-22040.4, Contracts</li> <li>3. CDCR Policy - DOM Chapter 5, Article 44</li> <li>4. CDCR Contract Agreement - Special Terms and Condition (Exhibit D)</li> <li>5. CDCR Contracts for Confinement of Inmates</li> <li>6. CDCR Contract Agreement - PREA Policy - Volunteer/Contract Information Sheet (Exhibit M)</li> <li>7. Interview with CDCR Agency Contract Administrator</li> </ol>

115.13	<b>Supervision and monitoring</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.13 (a)-5 - CDCR has developed, documented, and made its "best efforts" to comply on a regular basis with a staffing plan that provided for adequate staffing levels, video monitoring, and considers the factors identified in section (a) items 1-11. The average daily population for SATF since August 2012 has been 5,518 and the average daily population on which the staffing plan was predicated for is 5,300. SATF provided the auditor with the most recent staffing plan for fiscal year 2019-2020 and staffing plan analysis. In review of the staffing plan revealed that the inmate population has declined within the last fiscal year and has met the staff to inmate ratio.</p> <p>This substandard required corrective action as while SATF did have a staffing plan in place to address items (1) through (11), during the on-site portion of the audit blind spots were identified in the following areas that could not be remedied prior to the issuance of the interim report:</p> <ol style="list-style-type: none"> <li>1. Facility B Canteen - Re-adjust corner mirror to address blind spot in the left rear corner.</li> <li>2. Facility B Captain Office - Window covered and was informed that inmates are taken into the office for interviews. Partial coverings are acceptable to maintain security of work and documents, though there should be no full coverage that would create a blind spot and safety issue for both staff and inmate.</li> <li>3. Facility B Program Office Room 160 - Window is covered, room not identified and was informed that inmates would sometimes have access based on being the property package office. Recommended that the room have an identifier and if inmates are allowed inside to unblock the window.</li> <li>4. Facility B Dining - Washing station, rear corner blind spot. A mirror was placed there though it was scratched up to where you were unable to see the corner.</li> <li>5. Facility F and G Library - Shelves placed in middle of room created a blind spot. Moving the shelf would address the issue.</li> <li>6. Facility F Laundry - Place mirror in rear of room to address blind spot.</li> <li>7. Facility F Academics - Janitorial supply room door is broken and held with a rope.</li> </ol> <p>SATF was able to address and correct all identified blind spots throughout the corrective action period and submitted verification through photo and written documentation. SATF has demonstrated compliance with this substandard.</p> <p>115.13 (b) - SATF did not have any deviations from the staffing plan within the last twelve (12) months as reported on the PAQ. SATF captures any deviation from the staffing plan through the Telestaff Program and Daily Activities Report submitted by the Watch Commanders where this program documents and justifies all deviations and is reported to headquarters. SATF Warden reported that SATF can ensure adequate staffing for all watches and provide overtime to staff if needed. Programs may be closed for the shift or day should they not have sufficient coverage. The auditor reviewed samples of the SATF daily activity report and confirmed that there were no deviations from the staffing plan within the last twelve (12) months prior to the audit.</p> <p>115.13 (c) - CDCR DOM, Section 54040.17.1, Annual Review of Staff Plan states that, whenever necessary, but not less frequently than once a year, in consultation with the PREA Coordinator, the institutional PCM and the Program Support Unit shall assess, determine, and document whether adjustments are needed to : (1) The staffing plan; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources assigned to ensure adherence to the staffing plan. Review of the SATF annual data collection and staffing plan along with interviews with the CDCR PREA Coordinator, SATF Warden and PCM demonstrate and confirm that SATF assess the staffing plan at least once a year.</p> <p>115.13 (d) - CDCR DOM, Section 54040.4 requires that a custody supervisor shall conduct weekly unscheduled security checks to identify and deter sexual violence, staff sexual misconduct and sexual harassment of any kind. During the on-site review of SATF, supervisors were consistent with their unannounced rounds as indicated by reviews of logbooks and staff interviews. Intermediate-or-higher level facility staff reported that they prevent staff from alerting other staff members of their unannounced rounds by making their rounds in an unpredictable pattern throughout their shift and at different times. The practice of unannounced rounds was confirmed by the auditor.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - DOM, Article 26, American Correctional Association Standards, Chapter 5, Article 44, Section 54040 - Prison Rape Elimination Act</li> <li>3. SATF Staffing Plan Analysis Fiscal Year 2019-2020.</li> </ol>	

4. SATF Standardized Staffing Plan.
5. SATF Daily Activity Reports.
6. SATF Inmate Population Reports.
7. CDCR PREA Annual Data Collection Tool and Staffing Plan Review.
8. On-site review of housing and program areas and logbooks
9. Interviews with CDCR PREA Coordinator, SATF Warden, PCM, Random Intermediate-to-higher staff.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>SATF is an adult prison and does not house youthful inmates or inmates under the age of 18 years old. This standard does not apply to SATF.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF PAQ</li> <li>2. Interviews with CDCR PREA Coordinator, SATF Warden and PCM.</li> </ol>

115.15	<b>Limits to cross-gender viewing and searches</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.15 (a) - CDCR DOM, Chapter 5, Section 52050.16.5, Unclothed Body Search of Inmates states that, Correctional Personnel, other than qualified medical staff, shall not conduct unclothed body inspections or searches of an inmate of the opposite sex, except in an emergency. CDCR Memorandum Re: Changes to the Use of the ADANI COMPASS Scanner, operators viewing the image from the scanner system shall be the same gender as the inmates being scanned. If the scanner is used by cross-gender staff during exigent circumstances, the search must be documented in a notice of Unusual Occurrence (NOU). There were no cross-gender strip searches or visual body cavity searches at SATF within the last twelve (12) months as reported in the PAQ. Staff interviewed were aware of the policy and inmates had no reports of cross-gender strip searches. Review of training curriculum, written policy, and interviews with random staff and inmates confirm that SATF does not conduct cross-gender strip or visual body cavity searches of inmates.</p> <p>115.15 (b) - CDCR DOM, Chapter 5, Section 52050.16.4, Clothed Body Search of Female Inmates, states that, clothed body searches of female inmate shall be conducted by female corrections staff only, except in emergency situations and under no circumstances shall male correctional staff perform non-emergency clothed body searches of female inmates. SATF is a male facility; therefore, this subsection is not applicable.</p> <p>115.15 (c) - CDCR DOM, Chapter 5, Section 54040.5, Searches requires that institutions shall document all cross-gender strip searches and visual body cavity searches in accordance with DOM Section 52050.16.5. If the search is incidental to an emergency or crime that constitutes a Crime Incident Report (CDCR Form 837), shall also be documented within the incident report. SATF is a male facility and did not have any incidents of cross-gender strip searches or visual body cavity searches within the last twelve (12) months.</p> <p>115.15 (d) - CDCR DOM, Chapter 5, Section 54040.4, Education and Prevention states that each institution shall enable offenders to shower, perform bodily functions, and change clothing without non-medical staff of the opposite biological sex viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. To minimize cross-gender exposure, staff of the opposite biological sex shall announce their presence when entering the housing unit. This announcement is required at the beginning of each shift and/or when the status quo within the housing unit changes. During the on-site phase, the auditor observed consistent announcements of the opposite gender notification when entering the housing units. Interviews with random staff and inmates confirmed that opposite gender announcements are done and that they are aware when opposite gender staff are present in their unit.</p> <p>This substandard required corrective action as while CDCR and SATF had implemented policies and procedures that would enabled inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, there were shower and toilet areas that were identified during the on-site review that allowed opposite gender views and could not be remedied prior to the issuance of the interim report.</p> <p>The following areas were identified as non-compliant with this subsection:</p> <ol style="list-style-type: none"> <li>1. Facility B, E, F and G Gymnasium - Has not been used since the Covid 19 pandemic began and is closed until further notice. The auditor was also informed that the gym is a designated area for overflow housing if needed. There were inmate bunks set up within the gym. The shower and toilet area are completely visible from the officer's perch which sits on a higher platform right outside of the shower and toilet area. Additionally, when entering you can view the first and second toilet, including when exiting and walking past the toilets. Opposite gender staff are allowed to work in the gym. Furthermore, the auditor was also informed that when the gym is open the inmates were allowed to use the toilet. The showers remained closed. Should these gymnasiums be used to house inmates or open for use mitigation of the showers and toilets must be completed prior. <ol style="list-style-type: none"> <li>1. On March 23, 2021, SATF submitted a memorandum verifying that the identified gymnasiums are closed and is not in use due to Covid-19. The memorandum also verified that should the gymnasiums be opened in the future, SATF will prepare and address the showers and toilets prior to opening for use. Therefore, this corrective measure is removed and now is compliant.</li> </ol> </li> <li>2. Facility B &amp; E Work Change - Frost on the windows and doors be raised, strip area visible through window. There are signs outside that sits at a line informing opposite gender staff that a strip search is in progress though the area is still visible. Opposite gender staff can and may work in this area and as it was explained that when a strip occurs they are to be replaced with a male officer. There is no memorandum or written procedure stating that this is to occur prior to a strip search. <ol style="list-style-type: none"> <li>1. Between March 23, 2021, and April 1, 2021, SATF submitted memorandums generated to the staff to clarify the areas and processes of unclothed body searches in the work change areas, raising window screens so that opposite gender views are addressed. SATF also submitted photos as verification to the work change windows</li> </ol> </li> </ol>	

to include photos from the line on the outside of the work change where staff would stand at therefore, this corrective measure is removed and now is compliant.

3. Facility B Yard Urinal and toilet screen needs repair and an additional screen.
  1. On November 19, 2020, SATF submitted photos for fixes in the area identified as non-compliant in #3. Therefore, this corrective measure was removed and is now compliant.
4. Facility B Electronics in vocational area - Toilet needs a screen.
  1. On April 1, 2021, SATF submitted photos of moveable screens therefore, this corrective measure was removed and is now compliant.
5. Facility E DDP/ESSA and ISUDT Programming - Inmate restroom windows need to be frosted.
  1. On November 20, 2020, SATF submitted photos as proof of fixes to the areas identified as non-compliant in #5. Therefore, this corrective measure was removed and is now compliant.
6. Facility E, Housing Unit E1 - ADA shower requires mitigation as you can see through the mesh screen.
  1. On April 1, 2021, SATF submitted photos of metal barriers and screens therefore, this corrective measure was removed and is now compliant.
7. Facility E, all housing - Lower showers both on the left and right side are visible from the control station. Mitigation for views of opposite gender must be made. Based on photos of Facility D, mitigation on the lower showers in the housing units in D must also be done.
  1. On April 5, 2021, SATF submitted photos of showers with covered ports to include additional screens to allow more privacy for showers that are identified for transgendered inmates use. Therefore, this corrective measure was removed and is now compliant.
8. Receiving and Release - All holding cells require mitigation as the toilets are completely visible.
  1. On November 19, 2020, SATF submitted photos of all holding cells with a privacy screen placed at all the toilets. Therefore, this corrective measure is removed and is now being compliant.
9. Short Term Restricted Housing (STRH) - Recreation cells need screens replaced as the current mesh is see through. When opposite gender staff walk past they can see the inmates using the toilet. The toilets were also visible in camera views. SATF corrected the views on the camera by placing tape on the monitors that covers the toilet area.
  1. On November 20, 2020, SATF submitted photos and a memorandum to staff concerning privacy tape being placed on the recreation cell monitors and that the tape shall always remain there. Additionally, the memorandum informed staff that if the tape on the monitor should become degraded or removed to contact the supervisor immediately for replacement.
  2. On May 6, 2021, SATF submitted additional photos of recreational cells with privacy screens up on the fence. This corrective measure was removed and is now compliant.
10. STRH Clinic - Holding #3 window needs bottom half frosted.
  1. On November 20, 2020, SATF submitted photos of the corrected window. Therefore, this corrective measure was removed now is compliant.

SATF was able to address and correct all identified areas throughout the corrective action period and submitted verification through photo and written documentation. SATF has demonstrated compliance with this substandard.

115.15 (e) - CDCR DOM, Chapter 5, Section 52050.16.7, states if there is an individual going through Receiving and Release (Intake), who self-identifies as transgender or with a gender that seems not to match their biological sex, the search will be conducted by staff of the same biological sex as the inmate to be searched. If an individual's genital status is ambiguous, the search shall be conducted by a staff member that is the same biological sex as indicated in the inmate's records. If staff are unable to determine the genital status through medical records or an interview with the inmate, it will be determined during the standard intake medical evaluation that all inmates received upon admission to the facility. During the on-site portion of the audit there were no transfers into SATF, practice was verified through interviews with inmates, SATF PCM, CDCR PREA Coordinator, the Receiving and Release supervisor and SATF health care practitioners.

115.15 (f) - CDCR DOM, Sections 52050.16.4 and 52050.16.7 addresses the policy for this standard. As it states that body search procedures for clothed female inmates recognize, address, and minimize the effects of cross-gender contact inherent in the body search process by limiting this function to female correctional staff unless an emergency exists that threatens death, inmate escape, or great bodily injury to staff, inmates, or visitors. Clothed body searches performed by male correctional staff during the emergency circumstances shall sweep the inmate's breast and genital area with the back of the hand for the purpose of discovering contraband directly related to the threat posed by the emergency. If cause exists for a more thorough search, the female inmate shall be detained until a female correctional staff member is available to conduct the search.

CDCR DOM, Section 54040.4 states, employees shall ensure that these searches are conducted in a professional, respectful manner, and in the least intrusive manner possible consistent with security needs. Searches shall be conducted in accordance with policy, procedures, and training as per CCR, Title 15, and section 3287(b). CDCR Office of Training and Professional Development has step by step training on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, Training and Professional Development, Searches of Inmates and Property, Instructor's guide dated 6/2018. Interviews with staff and inmates, review of training lesson plans and logs confirm that staff have been

trained to ensure pat down searches are conducted in a professional and respectful manner.

Interviews, Policy, Documentation and Other Evidence Reviewed:

1. SATF Completed PAQ.
2. CDCR Policy - Department Operations Manual, Chapter 5
  - a. Section 52050.16.4 - Clothed Body Searches of Female Inmates
3. Section 52050.16.5 - Unclothed Body Search of Inmates
  1. Section 5050.16.7 - Unclothed and Clothed Body Searches of Transgender Inmates
  2. Section 54040.5 - Searches
  3. Section 54040.4 - Education and Prevention
4. CDCR Office of Training and Development - Searches and Inmate Property Curriculum
5. CDCR memorandum - Changes in the Use of the ADANI COMPASS Low Dose Scanner
6. SATF Training Logs
7. Interviews with CDCR PREA Coordinator, SATF Intake Staff, Random Staff, Random Inmates. Unofficial interviews with Medical, Mental Health Staff and Transgendered Inmates.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.16 (a)-(b) - California Code of Regulations Title 15 defines effective communication as; providing the inmate, to the extent possible, the means to understand and participate in disciplinary process to the best of their ability. This may be accomplished through reasonable accommodation or assignment of a staff assistant. If the inmate's Test of Adult Basic Education (TABE) score is 4.0 or lower, employees are required to query the inmate to determine whether assistance is needed to achieve effective communication. The employee is required to document on appropriate CDCR forms his/her determination of whether the inmate appeared to understand, the basis for that determination and how it was made. For contacts involving due process, employees shall give priority to the inmate's primary means of communication, which may include but is not limited to auxiliary communication aids, sign language interpreter, and bilingual interpreter. CDCR Memorandum Re: Inmates with Disabilities and Inmates who are Limited English Proficient, dated October 6, 2017, states that CDCR provides reasonable modification or accommodation to inmates with physical or communicational disabilities pursuant to the Americans with Disabilities Act. Appropriate provisions are made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and persons with disabilities. Institutions may consider the use of offender peer educators to enhance the offender population's knowledge and understanding of PREA and sexually transmitted diseases. CDCR and SATF has designated staff who are bilingual certified to provide translation services, and has appointed an LEP/ADA Coordinator who maintains a certified list of bilingual staff and assists with questions or clarifications concerning language services. CDCR has current contracts in place for communication assistance: Voidance Language Services, LLC, contract period from July 1, 2019, to June 30, 2021, to provide interpreter services over the telephone, facsimile, or internet, for 140 languages to assist CDCR with inmates that are limited English proficient. Interpreter services are available twenty-four (24) hours a day, seven (7) days a week.</p> <p>During the on-site audit, inmates that identified with physical disabilities as being partially blind or deaf, inmates with cognitive disabilities and limited English proficient inmates was interviewed and these interviews confirmed that tools and aids are available at SATF to assist them with PREA information, education, and investigation process. PREA posters and information were observed throughout the facility in English and Spanish. CDCR Memorandum Re: Notification of Interpretation and Translation Services, dated June 15, 2009. This memorandum would serve as a reminder to all CDCR staff of procedures to ensure effective communication with Limited English Proficient (LEP). Additionally, to become compliant with Title VI of the Civil Rights Act of 1964, institutions shall designate an institution staff member as a local LEP coordinator for issues related to LEP inmates. The LEP Coordinator is to manage the process, maintain the list of bilingual facility staff competent to interpret/translate; a list of any other local interpreters from neighboring institutions or agencies and the use of "I Speak" cards that are in the control booth or officer's station. The LEP coordinator and institution staff must consider potential conflicts of interest between the interpreter and inmate. SATF has in place appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of PREA.</p> <p>115.16 (c) - CDCR DOM, Section 54040.12, Investigations states that except in limited circumstances or exigent circumstances, investigators shall not rely solely on inmate interpreters, readers, or other types of inmate assistance during a sexual violence, staff sexual misconduct, or sexual harassment investigations. SATF has designated staff that are tested and proficient in other languages to assist with interviewing inmates who may be limited or have disabilities. The PAQ indicated that SATF did not utilize inmate interpreters within the last twelve (12) months. Interviews with random staff indicated that they are aware of the policy and does not rely solely on inmate interpreters, readers, or other types of inmate assistance during a sexual violence, staff sexual misconduct, or sexual harassment investigations.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed PAQ</li> <li>2. California Code of Regulations - Title 15</li> <li>3. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> <li>1. Section 5, 54040.4 - Education and Prevention</li> <li>2. Section 5, 54040.12 - Investigations</li> </ol> </li> <li>4. CDCR Memorandum Re: Notification of Interpretation and Translation Services, dated June 15, 2009</li> <li>5. CDCR Memorandum Re: Inmates with Disabilities and Inmates who are Limited English Proficient, dated October 6, 2017</li> <li>6. CDCR "I Speak" Language Identification Guide Poster</li> <li>7. CDCR Executed Contract with Voidance Language Services (7/1/19-6/30/21)</li> <li>8. Interviews with CDCR Agency Head/Designee, SATF Random Staff, SATF Random Inmates with Disabilities/Limited English Proficient</li> </ol>

115.17	<b>Hiring and promotion decisions</b>
<p data-bbox="240 174 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="240 236 443 264"><b>Auditor Discussion</b></p> <p data-bbox="240 296 1433 525">115.17 (a)-(b) - CDCR DOM, Section 31060.3, Power of Appointment addresses this standard by prohibiting the hiring and promoting of anyone, or utilizing the services of any contractor or volunteer, who: 1) has engaged in sexual violence, or staff sexual misconduct of an inmate in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 2) has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or 3) has been civilly or administratively adjudicated to have engaged in the activity described above. Further, hiring authorities shall 1) implement and enforce departmental EEO policy and 2) maintain the highest standards of personnel selection.</p> <p data-bbox="240 557 1417 716">CDCR Supplemental Application for all CDCR Employees (Form 1951, Rev.7/18) must be completed for any applicant, transfers, and promotional opportunities. Section D for Form 1951 includes questions that are specific to PREA and this substandard. In the past twelve (12) months, 447 people were hired at SATF who may have contact with inmates. Interview with SATF Personnel Officer and review of human resource files of new hires, promotions and transfers confirmed compliance with this process.</p> <p data-bbox="240 748 1433 1042">115.17 (c) - CDCR DOM, Section, 31060.16 states that a criminal records check is a requirement for employment with the Department. The process for checks involved using CI&amp;I SSCH, Live Scan finger printing alert system, USINS Form I-9, Physical examination report and CDCR Form 1951, Supplemental Application for all CDCR employees. This process is used for internal and external applicants. The Live Scan system allows CDCR HR to be alerted 24/7 on relevant background information for staff, contractors, and volunteers. The CDCR 2164 Form - Live Scan Response Form is used to verify that a request and response for a background check was completed, date it was completed and the staff that received it. In the past twelve (12) months, SATF hired 447 people who may have contact with inmates. Interview with SATF Institutional Personnel Officer confirmed this process and the background check process is completed utilizing the CDCR 2164 Form - Live Scan Response Form.</p> <p data-bbox="240 1074 1433 1267">This substandard required corrective action as during the review of SATF human resource files found that they were inconsistent in containing the Institutional Reference Checks on new employees from prior institutional employers. Therefore, the auditor was unable to verify documentation that the background checks, to include Institutional Reference Checks, are being conducted consistently with new employees. SATF provided documentation of refresher training to Personnel Staff on this requirement, a listing of new employees and transfers to the institution, and verification of completed Institutional Reference Checks to the auditor. SATF has demonstrated compliance with this substandard.</p> <p data-bbox="240 1299 1433 1625">115.17(d) - CDCR Contract Agreement (Exhibit D) states "Security Clearance/Fingerprinting" as one of the special terms and conditions. The State reserves the right to conduct fingerprinting and/or security clearance through the Department of Justice, Bureau of Criminal Identification, and Information (BCII), prior to award and at any time during the term of the Agreement, to permit Contractor and/or Contractor's employee access to State premises. The State further reserves the right to terminate the Agreement should a threat to security be determined. It stipulates that the contractor shall conduct a criminal background records check for each contract employee, who will have contact with CDCR inmates and provide a written certification that it was done. Contract employees, who have contact with inmates, shall be provided training to learn their responsibilities under the agency's sexual abuse and harassment prevention, detection, and response policies and procedures. In the past twelve (12) months, SATF hired (3) contractors who may have contact with inmates. Interviews with SATF Personnel Information Officer confirmed this process.</p> <p data-bbox="240 1657 1417 1816">This substandard required corrective action as during review of human resource files found that files were missing verification of background check information on contractors. Therefore, the auditor was unable to verify documentation that the background checks are being conducted on contractors at that time. SATF provided documentation of refresher training to Personnel Staff on this requirement, a listing of active contractors, and verification of completed background checks and PREA training to the auditor. SATF has demonstrated compliance with this substandard.</p> <p data-bbox="240 1848 1433 2174">115.17(e) - California Code of Regulations, Title 15, Section 3411 states that if an employee is arrested or convicted of any violations of law; the employee must promptly notify the institution head or appropriate Director/Assistant Secretary of that fact. CDCR memorandum Re: Standard 115.17(e) dated October 6, 2017, requires that all employees who may have contact with inmates to be Live Scanned (fingerprinted) at the time of hire. The Live Scan system notifies CDCR of any subsequent arrest an employee or contact has in an on-going basis. CDCR memorandum dated February 26, 2016, Personnel Identification Card Issuance states the procedure for issuance of identification cards. The pre-employment procedures found in CDCR DOM 31060.16 apply to all employees, contractor, or volunteer. Interviews with SATF Personnel Information Officer and Community Resources Manager confirmed that all employees, contractors, and volunteers are required to participate in the Live Scan system. CDCR/SATF also uses information from the California Law Enforcement Telecommunications System (CLETS) to access confidential criminal records through the Department of Motor Vehicle or</p>	

other criminal justice information.

115.17(f) - (h)-CDCR Form 1951- Supplemental Application, includes background and PREA misconduct questions for all CDCR employees. Prior to signature acknowledge of CDCR Form 1951, it states that the applicant understands and agrees that if material facts are later discovered which are inconsistent with or differ from the facts they furnished before beginning employment, they may be disciplined, up to and including dismissal from State service.

California Code of Regulations, Title 15, Section 3401.5, Staff Sexual Misconduct describes employee sexual misconduct and penalties that all allegations of sexual misconduct shall be subject to investigation, which may lead to disciplinary action and/or criminal prosecution. Interview with SATF Personal Officer, review of CDCR Form 1951 and human resource files confirmed compliance with sub-standards (f) - (h).

Interviews, Policy, Documentation and Other Evidence Reviewed:

1. SATF Completed Pre-Audit Questionnaire (PAQ)
2. California Code of Regulations, Title 15, Section 3401.5 - Staff Sexual Misconduct
3. CDCR Policy - Department Operations Manual (DOM), Chapter 3
  1. Section 31060 - Appointments
  2. Section 31060.16 - Criminal Records Checks
  3. Section 3106.17 - Pre-Employment Documentation
  4. Section 31070.1 - Personnel Identification Cards
  5. Section 33030.16 - Employee Disciplinary Matrix Penalty Levels
4. CDCR Supplemental Application - CDCR 1951 (Rev. 07/18)
5. CDCR Employment Reference Questionnaire - CDCR Form 2025
6. CDCR Personal Information Bulletin #2016-005
7. CDCR Contract Agreement (Exhibit D)
8. CDCR Memorandum: Completion of Background Checks Under PREA - Dated July 14, 2017
9. CDCR Memorandum Re: Personal Identification Card - Dated February 26, 2016
10. CDCR Memorandum Re: Standard 115.17 (e)-1 - Dated October 6, 2017
11. CDCR 2164 Form - Live Scan Response Form
12. SATF Human Resource Files
13. Interviews with SATF Personnel Officer, SATF Community Resources Manager

<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.18(a) - (b) -CDCR Design and Construction Policy Guidelines were amended on August 14, 2017, to include that for any future CDCR projects, when designing or acquiring any new facility in planning any substantial expansion or modification of existing facilities, and when installing or updating a video monitoring system, the department shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.</p> <p>SATF has not had any substantial expansions or modifications to its existing facilities since August 20, 2012. Interviews with the CDCR Agency Head/Designee and SATF Warden affirmed that CDCR/SATF take into consideration ensuring a level of privacy for inmates in addition to protecting inmates from sexual abuse. SATF Warden further stated that every PREA allegation is reviewed, and recommendations have been made to the hiring authority for more video monitoring technology to be installed throughout the facility to assist in the facility's ability to protect inmates from sexual abuse.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Design and Construction Policy Guidelines <ol style="list-style-type: none"> <li>1. Section H.1.c</li> <li>2. Section H.1.n</li> </ol> </li> <li>3. Interviews with CDCR Agency Head/Designee, SATF Warden</li> </ol>

115.21	<b>Evidence protocol and forensic medical examinations</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.21(a) - (b) - CDCR Correctional staff/Peace Officers are under the California Penal Code and are authorized and trained to conduct both administrative and criminal investigations. SATF utilizes Locally Designated Investigators (LDI) and other designated institutional staff who have been trained to conduct criminal and administrative investigations into allegations of sexual violence and/or staff misconduct. The investigative office at SATF is called the Investigative Services Unit (ISU). SATF PREA Garrity type of investigations against staff are managed at the department level by the Office of Internal Affairs (OIA). According to CDCR Memorandum Re: Standard 115.21(a) and CDCR DOM, Section 54040.9, Forensic Medical Examination, the designated supervisor, and investigators follow a uniform evidence protocol and procedure when conducting sexual abuse investigations. The process addresses assault examinations appropriate for adult/adolescent and child/adolescent. Interviews with random staff, medical staff and responsible investigators confirmed that all investigations alleging sexual abuse will be investigated and follow evidence protocols.</p> <p>115.21(c) - CDCR DOM Section 54040.9, Forensic Medical Examination states that the victim will be taken to the designated hospital, or on-site location, where SART Contract Staff will complete the forensic exam. The designated hospital for SATF is the Visalia SART Examination site located at Kaweah Delta Hospital/Urgent Care. CDCR has a standard agreement with Forensic Nurse Specialists of Central California, Inc. (FNSSCC) to perform sexual assault forensic examinations for inmates/patients referred by CDCR. This agreement is ongoing and automatically renews yearly unless terminated by either party. California Health Care Services Policy, Chapter 10, 1.10 states that copayment shall not be charged to the inmate if health care service(s) is considered to be treatment services related to sexual abuse or assault. Interview with the SANE/SAFE at the Kaweah Delta Hospital/Urgent Care verified that they conduct the sexual assault forensic exams for SATF and that they are on call twenty-four (24) hours a day, seven (7) days a week. SATF PAQ reported that there were three (3) forensic medical exams conducted in the last 12 months and documentation was reviewed by the auditor and confirmed compliance with this sub-standard.</p> <p>115.21(d) - (e) - CDCR/SATF has a Memorandum of Understanding (MOU) with the Kings Community Action Organization to provide victim support and emotional support services related to sexual abuse. This agreement is for the period of April 8, 2019, through June 30, 2024. CDCR DOM, Section 5, 54040.8.1 requires that the facility Watch Commander contact the Rape Crisis Center to request a Victim Advocate to be dispatched. This is documented via the Watch Commander Notifications Checklist. Additionally, posters were visible throughout SATF for additional services for victims of sexual abuse that include a hotline number and address in which they can contact the Kings Community Action Organization. The auditor reviewed SATF PREA investigation files which contained the completed Watch Commander Notifications Checklist confirming SATF's practice in requesting for victim advocates for inmates.</p> <p>115.21(f) - California Penal Code (PC) Section 13516 mandates that the Commission on Peace Officer Standards and Training (POST) established guidelines/standards for investigations of sexual assault. All law enforcement agencies must comply with the POST training guidelines for Sexual Assault Investigators. CDCR/SATF is responsible for administrative and criminal investigations.</p> <p>115.21(h) - CDCR DOM Section 54040.3, states that if cases where an outside Victim Advocate is not available, a designated employee will be summoned, if available; an employee who has been certified by a rape crisis center as training in counseling of sexual assault victims and who either: 1) is a psychiatrist, psychologist, licensed clinical social worker, psychiatric mental health registered nurse, staff person with a master's degree in counseling, or others listed in Evidence Code section 1010; or 2) has 40 hours of specialized training listed in Evidence Code 1035.2 and is supervised by a staff member in sub-section (1) above.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations Manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040 - Prison Rape Elimination Act</li> <li>2. Section 54040.8.1 - Custody Supervisor Responsibilities</li> <li>3. Section 54040.8.2 - Victim Advocate and Victim Support Person</li> <li>4. Section 54040.9 - Forensic Medical Examinations</li> </ol> </li> <li>3. California Health Care Services Policy <ol style="list-style-type: none"> <li>1. Volume 1, Chapter 10, 1.10 - Co-Payment Program Plan</li> </ol> </li> <li>4. CDCR Memorandum Re: Standard 115.21 (a)-3 - Dated October 6, 2017</li> <li>5. CDCR PREA Specialized Training for Locally Designated Investigators Curriculum</li> <li>6. CDCR and Forensic Nurse Specialists of Central California, Inc. (FNSSCC) Standard Agreement</li> </ol>	

7. CDCR and Kings Community Action Organization Rape Crisis Center Memorandum of Understanding (MOU)
8. SATF PREA Investigation files
9. Interviews with SATF Medical, Investigative, Random Staff, SANE/SART Nurse at FNSCC and Kaweah Delta Hospital/Urgent Care and SATF inmates who reported sexual abuse

115.22	<p><b>Policies to ensure referrals of allegations for investigations</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.22(a) - CDCR DOM, Section 54040.12, Investigations requires that all allegations of sexual violence, staff sexual misconduct, sexual abuse and sexual harassment shall be investigated, and the findings documented in writing. Further, all terminations for violations of agency sexual misconduct or harassment policies, or resignations by employees that would have been terminated if not for their resignation, are reported to any relevant licensing body by the hiring authority or designee. This also applies to CDCR contractors and volunteers. A review of CDCR DOM, Chapter 5, 54040.3, Definitions confirms that CDCR's definitions for sexual violence, sexual abuse, and sexual harassment are in line with PREA Standards. Further, review of SATF PREA investigation files confirmed that allegations of sexual violence, staff sexual misconduct, sexual abuse and sexual harassment are being investigated and documented.</p> <p>115.22(b) - CDCR Memorandum Re: Standard 115.22(b) 1 dated October 6, 2017, states that inmate on inmate sexual abuse and sexual harassment are investigated by the Investigative Services Unit (ISU) and if the allegations are found to be substantiated, ISU collaborates with the District Attorney to decide on criminal prosecution. If the incident involves staff sexual conduct and sexual harassment, ISU conducts a preliminary investigation and if the allegations are found to have potentially occurred, ISU refers the case to the Office of Internal Affairs (OIA). OIA is an entity within CDCR with authority to investigate all staff misconduct allegations. OIA completes the investigation and collaborates with the District Attorney to decide on criminal prosecution. This process was confirmed during interviews with the CDCR Agency Head/Designee, CDCR PREA Coordinator and ISU staff. Additionally, a review of SATF PREA investigation files further confirmed the process is in place.</p> <p>CDCR ISU are mandated to complete the Bureau of Justice Statistics' Survey of Sexual Victimization Incident form as a data collection tool, which is then forwarded to the CDCR PREA Coordinator. CDCR's website has links for the CDCR DOM, Article 44-PREA Policy, CDCR PREA annual reports and final PREA audit reports, which was verified by the auditor.</p> <p>(c) - (e) - Not applicable as all CDCR CRC investigations are completed through the ISU or OIA.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations Manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.12 - Investigations</li> <li>2. Section 54040.3 - Definitions</li> <li>3. Article 14 - Internal Affairs Investigations</li> </ol> </li> <li>3. CDCR PREA Annual Report - Calendar Year 2019</li> <li>4. CDCR PREA Investigations</li> <li>5. CDCR Memorandum Re: Standard 115.22 (b)-1 - Dated October 6, 2017</li> <li>6. Interviews with CDCR Agency Head/Designee, CDCR PREA Coordinator, SATF Investigative Staff</li> </ol>
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115.31	<p><b>Employee training</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.31(a)-(d) - CDCR DOM, 54040.4, Education and Prevention requires that all staff, including employees, volunteers, and contractors, shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. Training is gender specific based on the inmate population at the assigned institution. PREA training is conducted during new employee orientation with annual refresher trainings occurring subsequently through CDCR On-the-Job Training. Participation in the training will be documented on a CDCR 844, Training Participation Sign-in Sheet.</p> <p>CDCR's In-Service PREA Training lesson plan and OJT lesson plan were provided and reviewed by the auditor. CDCR's In-Service PREA Training lesson plan covers all categories listed in subsection a (1-10). CDCR documents completion of the required training with CDCR 844 and the PREA OJT Acknowledgement form certifying that the employee has read, understood, and agrees to comply with the PREA OJT training. Interviews with random staff and review of training records confirmed that they receive refresher PREA training annually on OJT and in service block training every (2) years.</p> <p>115.31 (c) - This substandard required corrective action as while CDCR and SATF have a training process in place SATF employee training percentage is at 68% not including staff who are out on extended leave. SATF would need to provide documentation showing employee training at 90% or higher. In the year 2020 there is a total of 1,367 employees trained out of 2,019 at SATF which gives the 68% compliance rate.</p> <p>During the corrective action period SATF conducted PREA training and submitted documentation to the auditor. The numbers initially reported were incorrect as they included employees that were no longer at SATF, on extended leave and newly hired officers who received PREA training in the Academy. New updated lists, training verification documents conducted during the corrective action were submitted to the auditor. Employee numbers were adjusted not to include employees on extended leave, those that have transferred to another institution, no longer work for the department or new officers who received PREA training in the CDCR Academy (within 12 months). With documentation SATF submitted up to the end of the corrective action period, calculated their training rate at 92% and SATF continues to conduct training until they are at a 100%. Therefore, SATF has demonstrated compliance with this substandard.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations Manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040 - Prison Rape Elimination Act</li> <li>2. Section 54040.4 - Education and Prevention</li> </ol> </li> <li>3. CDCR In-Service PREA Training Lesson Plan</li> <li>4. CDCR On the Job Training (OJT) PREA Lesson Plan</li> <li>5. SATF Training Records</li> <li>6. CDCR Memorandum Re: PREA Policy Training Proof of Practice - Dated June 19, 2015</li> <li>7. Interviews with SATF Random Staff, Unofficial interview with SATF In-Service Training Lieutenant</li> </ol>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.32(a) - CDCR DOM, 54040.4, Education and Prevention requires that all staff including volunteers and contractors shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. All contractors and volunteers are required to complete a background check and acknowledge CDCR's PREA policy prior to entry into a state prison by certifying their responsibility to immediately report any information that indicates an offender is being, or has been, the victim of sexual violence, staff sexual misconduct or sexual harassment. SATF reported to have 173 volunteers and contractors who have contact with inmates that have been trained on the agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response.</p> <p>115.32(b) - CDCR Memorandum Re: Standard 115.32(b) 1, requires that all volunteer and contract staff participate in a one-hour mandatory training regarding inmate/staff interactions. This training covers understanding the dynamics of establishing positive, professional interactions with inmates, maintaining professional distance while maintaining effective communication with inmates, and avoiding becoming overly familiar and/ or other inappropriate behavior. Although all volunteer and contract staff are required to complete the required one-hour training, staff who work 8 hour shifts with little to no custody staff supervision at times are mandated by the institutions to complete more extensive training based on their level of contact with inmates. Volunteers and contractors are also required to complete the CDCR PREA Policy Volunteer/Contractor Informational Sheet which acknowledges their responsibilities and duties to immediately report any information on any PREA related incidences.</p> <p>115.32(c) -CDCR, DOM, Section 32010.8.3, Record Keeping Forms outlines record keeping and documentation through CDC form 843 Training Record and Instruction Sheet and CDCR 844 Training Participation Sign-in Sheet.</p> <p>Interviews with volunteers and contractors indicated that they have been trained and are knowledgeable on their responsibilities as it relates to PREA. However, the on-site review of training records and human resource files for contractors and volunteers found that some files are kept with the Institutional Personnel Office and others are kept with the Community Resource Office. The auditor was able to review five (5) volunteer training records for volunteers with Brown Card (escorted) status found that all five (5) had completed PREA training.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> <li>1. Chapter 3, Section 32010.8.3 - Record Keeping Forms</li> <li>2. Chapter 5, Section 54040.4 - Education and Prevention</li> </ol> </li> <li>3. CDCR PREA Information and Acknowledgement Form</li> <li>4. CDCR PREA Policy Volunteer/Contractor Informational Sheet</li> <li>5. CDCR PREA Policy Information for Volunteers and Contractors Part A, CDCR Form 2301 (Rev. 05/20)</li> <li>6. SATF Volunteer/Contractor Training Files</li> <li>7. CDCR Memorandum Re: Standard 115.32 (b) - Volunteer and Contractor Training - Dated October 6, 2017Interviews with SATF Volunteers and Contractors who have contact with inmates, SATF Personnel Officer and SATF Community Resource Manager</li> </ol>

115.33	<b>Inmate education</b>
<p data-bbox="240 174 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="240 236 443 264"><b>Auditor Discussion</b></p> <p data-bbox="240 296 1433 792">115.33(a) and (f) - CDCR DOM, Section 54040.4, Education and Prevention requires that verbal and written information shall be provided to offenders which will address: Prevention/Intervention, Reporting, Treatment and Counseling. Initial offender orientation on PREA is provided to the offender population in Reception Centers (RC) via either written or multi-media presentation on a weekly basis in both English, Spanish, and Hmong. Approved PREA posters which contains departmental policy and sexual violence, staff sexual misconduct, and harassment reporting telephone numbers shall be posted in designated locations throughout the institution. The PREA brochures titled "Sexual Assault Awareness" and the PREA booklet titled "Sexual Abuse/Assault: Prevention and Intervention" are distributed during initial processing and the materials are also available through the correctional counselors and the institution's offender orientation handbook. Upon admission to SATF, all inmates are provided information on the agency's zero-tolerance policy on sexual abuse and sexual harassment, how to report an incident or suspicion of sexual abuse and sexual harassment, and support services for those that have been sexually abused. This information is provided to inmates through posters, inmate orientation handbooks and brochures. All inmates must sign-off on the CDCR General Chrono form acknowledging that they received this handbook and PREA brochures and booklets. Interviews with Intake Staff affirmed that inmates are provided with this information as part of the intake process before they are released to their assigned housing unit. Interviews with random inmates further confirmed that they are provided this information.</p> <p data-bbox="240 824 1433 1017">115.33(b) - Upon admission to SATF, the inmates are given comprehensive education for PREA through a PREA Education video and is played as part of the inmate orientation process at Receiving and Release (R&amp;R), prior to the inmate being released to their assigned housing unit. The PREA educational video informs inmates on their right to be free from sexual abuse and sexual harassment and from retaliation for reporting sexual abuse and sexual harassment and the agency's policies and procedures to responding to a reported incident. Further, CDCR PREA posters which contain departmental policy on sexual violence, sexual harassment reporting contact information are posted throughout the institution.</p> <p data-bbox="240 1049 1433 1407">This substandard was identified for corrective action. During the on-site portion of the audit and tour of Receiving and Release the PREA Educational Video could not be located which, had the auditor believe that the video is not played consistently. When the video was located and played the views from the holding cells were not sufficient. The volume of the video was kept at a minimum and the auditor was informed it is kept at a minimum due to the processing of inmates occur at the same time and it can get loud. The closed caption and sign language titles were also difficult to see from the holding cells. Interviews with random inmates and disabled inmates further confirmed that they are not properly receiving comprehensive PREA education. SATF provided refresher training to R&amp;R staff relative to ensuring all televisions are playing the PREA education video, that they are visible and can be heard from all cells to include the subtitles. In addition, equipment were moved around, a speaker was added to ensure that the video can be heard clearly and that the inmates in the holding cells could clearly see the video. SATF submitted training documentation and photos of the R&amp;R area therefore, this corrective measure was removed and now is compliant.</p> <p data-bbox="240 1439 1433 1600">115.33(c) -All inmates at SATF are provided information on the agency's zero-tolerance policy on sexual abuse and sexual harassment, how to report an incident or suspicion of sexual abuse and sexual harassment, and support services for those that have been sexually abused. This information is provided to new inmates and inmates transferred from other facilities through posters, inmate orientation handbooks and brochure titled "Sexual Violence Awareness" and the PREA booklet titled, "Sexual Abuse/Assault - Prevention and Intervention" through the initial processing process into the facility at intake.</p> <p data-bbox="240 1632 1433 1926">115.33(d) - CDCR DOM, Section 54040.4, Education and Prevention requires that appropriate provisions shall be made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and those with disabilities. Institutions may consider using offender peer educations to enhance the offender's knowledge and understanding of PREA. Interview with intake staff confirmed this practice. All inmates sign an acknowledgement form that they have seen the PREA Education video and are able to ask any questions if they have any. Interpreter services with Interpreting and Consulting Services, Inc. and Voiance Language Services are available for use to for inmates who are Limited English proficient to ensure that they receive inmate PREA education. Additionally, the facility has some staff who are bilingual certified to provide translation services. CDCR provides inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.</p> <p data-bbox="240 1958 1433 2185">This substandard was identified for corrective action. During the on-site phase, it was observed that the PREA video was difficult to hear and see from the holding cells and through inmate interviews confirmed that the process on how the video are shown in R&amp;R is not sufficient. SATF provided refresher training to R&amp;R staff relative to ensuring all televisions are playing the PREA education video, that they are visible and can be heard from all cells to include the subtitles. In addition, equipment were moved around, a speaker was added to ensure that the video can be heard clearly and that the inmates in the holding cells could clearly see the video. SATF submitted training documentation and photos of the R&amp;R area therefore, this corrective measure was removed and now is compliant.</p>	

115.33(e)- Inmate education on PREA are documented on General Chrono- CDCR 128B form that is signed by the offender indicating that they received the information and training and is forwarded to the inmate's records for scanning into the Electronic Records Management System (ERMS).

Interviews, Policy, Documentation and Other Evidence Reviewed:

1. SATF Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations Manual (DOM) Chapter 5
  1. Section 54040.4 - Education and Prevention
3. CDCR PREA Sexual Abuse/Assault Prevention and Intervention Booklet (English and Spanish)
4. CDCR PREA Sexual Violence Awareness Brochure (English and Spanish)
5. SATF Inmate Orientation Handbook (English and Spanish)
6. CDCR PREA "Help is Available" Posters (English, Spanish, Hmong)
7. CDCR PREA Posters (English and Spanish)
8. SATF General Chrono - PREA Acknowledgement Form (CDCR 128-B)
9. Review of inmate records
10. Interviews with SATF Intake staff, Random and LEP inmates

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.34(a) - CDCR DOM, Section 54040.3, Definitions defines the Locally Designated Investigator (LDI) as institutional staff, who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct. Section 54040.4, Education and Prevention also states that investigators assigned to sexual violence and/or staff sexual misconduct cases will receive specialized training and that the institution PREA Compliance Manager shall ensure employees investigating PREA incidents are properly trained.</p> <p>115.34(b) -(d) - The curriculum for the CDCR PREA Specialized Training for Locally Designated Investigators was reviewed by the auditor and includes training on techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>SATF has 21 designated Locally Designated Investigators. Interviews with SATF Investigative Staff (ISU) indicated that investigators are well trained in conducting sexual abuse and sexual harassment investigations and confirmed their understanding of the specialized training curriculum. Review of training records confirmed that LDIs completed CDCR's PREA Specialized Training for Locally Designated Investigators.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations Manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.3 - Definitions</li> <li>2. Section 4040.4 - Education and Prevention</li> </ol> </li> <li>3. CDCR PREA Specialized Training for Locally Designated Investigators Curriculum</li> <li>4. SATF LDI Training Records</li> <li>5. Interviews with SATF Investigative staff</li> </ol>

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.35(a) - CDCR DOM, Section 54040.4, Education and Prevention requires that all staff including volunteers and contractors shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. This training will be conducted during new employee orientation, annual block, training, and will be included in the curriculum of the Correctional Training Academy. The training will be gender specific based on the offender population at the assigned institution. The Specialized Training for Medical and Mental Health staff was reviewed by the auditor and covers how to identify potential signs of sexual abuse and sexual harassment; how and whom to report allegations or suspicions of sexual abuse and sexual harassment; methods to respond effectively and professionally to victims of sexual abuse and sexual harassment; and steps required to preserve evidence of sexual abuse. Review of training records and interviews with medical and mental health staff confirmed their knowledge and participation in PREA Specialized Training for Medical and Mental Health Staff.</p> <p>115.35(b) - CDCR DOM, Section 54040.3, Definitions states that unless an institution has been previously authorized for contracted onsite SART exams, they will utilize the resources available via contract at the local community hospital for SART examination of the victim and offender-suspect. As CDCR/SATF contracts with a local hospital (Kaweah Delta Hospital/Urgent Care) to perform SART exams, this substandard is not applicable to SATF.</p> <p>115.35(c) - CCHCS Memorandum Re: PREA Specialized Training for Medical and Mental Health Staff - dated August 9, 2017, requires that once staff have completed the specialized training on the Learning Management Systems (LMS), they must provide a copy of their certificate, with signature, to their local In-Service Training office.</p> <p>115.35(d) - CDCR DOM, Section 54040.4, Education and Prevention requires that all staff including volunteers and contractors shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. This training will be conducted during new employee orientation, annual block, training, and will be included in the curriculum of the Correctional Training Academy. Review of training records confirmed that medical and mental health care practitioners employed by the agency received training as mandated for employees by §115.31.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations Manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.3 - Definitions</li> <li>2. Section 54040.4 - Education and Prevention</li> </ol> </li> <li>3. CCHCS Memorandum Re: PREA Specialized Training for Medical and Mental Health Staff - Dated August 9, 2017</li> <li>4. CDCR PREA Specialized Training for Medical and Mental Health Staff Curriculum</li> <li>5. SATF Training Records for Medical and Mental Health Staff</li> <li>6. Interviews with SATF Medical and Mental Health Staff</li> </ol>

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.41(a) - (b) - CDCR Memorandum Re: PREA Risk Screening - dated August 28, 2017, requires that during the intake process, the custody supervisor conducting the Initial Housing Review in Receiving and Release shall also be responsible for complete a PREA screening form for every inmate. In addition, if the PREA screening form identifies an inmate to be at risk of being sexually abused by other inmates or sexual abusive towards other inmates, the custody supervisor shall also enter an alert into the Inmate Precaution section in SOMS. All PREA Screening forms will be completed electronically and submitted directly into ERMS. During the on-site phase, Intake staff was able to demonstrate the screening process and provided a copy of the PREA risk screening to the auditor. In the past 12 months, 2,013 inmates entered SATF and were screened. Interviews with intake staff confirmed that staff was informed and knowledgeable on the PREA risk screening process and that the screening occurs before inmates are placed into an assigned housing unit. This was further corroborated through interviews with inmates, who acknowledged receiving screening upon admission to SATF, and review of inmate records.</p> <p>115.41(c) - (d) - CDCR's PREA Risk Screening Tool was reviewed by the auditor and was determined to be an objective screening instrument that considers the minimum criteria listed in subsection d (1-10). The CDCR PREA Risk Screening Tool considers the following items when assessing inmates for risk of sexual victimization: 1) Victim of substantiated incident of sexual violence in a correctional setting (not including sexual harassment) in the last 10 years; 2) Victim of sexual victimization in a non-correctional setting; 3) Mental, Physical or Developmental disability; 4) Age ; 5) Physical build; 6) Any prior or current convictions for sex offenses against an adult or child; 7) Whether they consider themselves or have ever been perceived by others as Lesbian, Gay, Bi-Sexual, Transgender, Inter-sex or Gender Non-Conforming; 8) Prior incarcerations; 9) Exclusively non-violent criminal history; and 10) Whether they currently consider themselves vulnerable to sexual victimization. Interviews with staff responsible for conducting risk screening confirmed that all factors of this subsection are taken into consideration when they conduct the risk screening on inmates and that the information is gathered through interviewing the inmate as well as information in SOMS and ERMS.</p> <p>115.41 (e) - CDCR's PREA Risk Screening Tool was reviewed by the auditor and considers risk for sexual abusiveness by considering: 1) History of sexual violence in a correctional setting; 2) Prior convictions for sex offenses in a non-correctional setting; 3) Conviction for non-sexual violent offenses in a non-correctional setting within 5 years; and 4) any guilty finding for non-sexual violent offense in a correctional setting within 5 years. Interviews with staff responsible for conducting risk screening confirmed that all factors of this subsection are taken into consideration when they conduct the risk screening on inmates and that the information is gathered through interviewing the inmate as well as information in SOMS and ERMS.</p> <p>115.41(f) - (g) -CDCR DOM, Section 54040.7, Detection, Notification, and Reporting, states that an inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization. CDCR Memorandum Re: PREA Risk Screening - Correctional Counselor Responsibilities - dated September 29, 2017, states that Correctional Counselors will identify if any new information has been received related to PREA victimization or sexual abusiveness towards other inmates during the Classification Committee process. SATF inmates appear before a classification committee generally within 14 days of their admission to the facility. During the classification committee meeting, the inmate is asked if they have any new or relevant information related to the PREA screening that was initially completed upon admission. Interviews with staff who complete screenings corroborate that staff is knowledgeable and aware of their responsibilities to complete 30-day reviews of the PREA risk screening.</p> <p>115.41 (f) - This substandard required corrective action by SATF. During documentation review of inmate (45) files it was found that the compliance rate for completion of 30-day reviews within the time limits were at 62%. Interviews with inmates and review of inmate records indicated that 30-day reviews were not consistent. SATF conducted refresher training for their Correctional Counselors (CC) conducted by Classification and Parole Representative. All Correctional Counselors were reminded and refreshed of their responsibilities concerning screening for risk of victimization and abusiveness, and the use of screening information. SATF submitted a memorandum concerning the refresher training, content of the training and its purpose, training sign in sheets to verify attendance, initial and within 30-day inmate screenings for those inmates admitted following the refresher training. After review of documents submitted by SATF, this corrective measure was removed and is now compliant.</p> <p>115.41(h) - CDCR DOM, Section 54040.6, Offender Housing, states that offenders will not be disciplined for refusing to answer, or not disclosing complete information related mental, physical, or developmental disabilities, their sexual orientation, sexual victimization, or perception of vulnerability. Interviews with intake staff and random inmates confirmed that inmates are not disciplined for refusing to answer, or not disclosing complete information on the PREA Risk Screening.</p> <p>115.41(i) - Interviews with CDCR PREA Coordinator, SATF PREA Compliance Manager, Intake staff and staff responsible</p>

for risk screening affirm that only certain approved personnel within the facility and agency have access to the screening information and that access is given on a need-to-know basis. Approved personnel consist of Correctional Counselors, most supervisors, managers, and anyone involved with classification and housing process would have access to this information, however, the housing officers (line-staff) do not.

Interviews, Policy, Documentation and Other Evidence Reviewed:

1. SATF Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations Manual (DOM), Chapter 5
  1. Section 54040.6 - Offender Housing
  2. Section 54040.7 - Detection, Notification and Reporting
  3. Section 54046.5 - Initial Screening
3. CDCR Memorandum Re: PREA Risk Screening - Dated August 28, 2017
4. CDCR Memorandum Re: PREA Risk Screening - Correctional Counselor Responsibilities - Dated September 29, 2017
5. CDCR PREA Risk Screening Tool
6. Review of Inmate Records
7. Interviews with CDCR PREA Coordinator, SATF PREA Compliance Manager, Intake Staff, Staff Responsible for Screening, Random Inmates.

115.42	<b>Use of screening information</b>
	<p data-bbox="240 174 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="240 236 443 264"><b>Auditor Discussion</b></p> <p data-bbox="240 298 1422 725">115.42(a) - (b) - CDCR DOM, Section 54040.6, Offender Housing indicates that factors for single cell housing includes the initial housing review assessment and responses to sexual violence and victimization. California Code of Regulations, Title 15, Section 3269 also notes a presumption for single cell housing based on documented and verified instances of being a victim of in-cell physical or sexual abuse by another inmate or verified predatory behavior towards a cell partner. CDCR's CDCR Memorandum Re: PREA Risk Screening - dated August 28, 2017, directs the assigning staff to review the inmate precaution screen to determine if the inmate(s) are identified as being "at risk as a victim" or "at risk as an abuser". If either precaution exists, the custody supervisor is required to review the potential cellmate's precaution screen(s) and case factors to ensure potential victims and potential abusers are not housed together in a cell. The PREA Risk Screening is reassessed within 30 days (generally 14 days) of arrival at SATF by the Initial Unit Classification Committee. During the committee, the PREA screening is reviewed and considered in all decisions affecting the inmate to include housing, work, education, and program assignments. Interviews with the SATF's PREA Compliance Manager and staff responsible for risk screening, in addition to review of inmate records, affirm that screening information is considered and used to make determinations to ensure the safety of each inmate.</p> <p data-bbox="240 759 1433 1219">115.42(c) - (d) &amp; (g) - CDCR DOM, Section 54040.14.2 - Transgender Biannual Reassessment for Safety in Placement and Programming states, If the inmate is not scheduled to be seen for his/her annual classification review during the identified review period (August through January or February through July), the assigned Correctional Counselor shall conduct a Transgender Biannual Assessment-PREA and complete a pre-formatted CDC Form 128-B, General Chrono. This form includes information to be asked of the inmate during a face-to-face interview to assess any threats to their safety. In addition to interviewing the inmate, the assigned Correctional Counselor shall review the inmate's case factors in SOMS and ERMS for any additional information which may indicate the inmate has any placement or programming concerns. If, during the interview for either the annual review or the Transgender Biannual Assessment-PREA, the inmate discloses threats to safety, the assigned Correctional Counselor shall immediately notify a Custody Supervisor. Any information related to a PREA allegation shall be documented and forwarded to the institution's Locally Designated Investigator according to the DOM, Article 44, Prison Rape Elimination Policy. The PCM shall coordinate with the Classification and Parole Representative to ensure the assessments are completed. The PCM shall maintain a copy of the biannual list with the dates the annual classification reviews or the PREA Biannual Assessments were completed. The PCM will forward a copy of this list to the PREA Coordinator in the Division of Adult Institutions within five days of completion of the review period.</p> <p data-bbox="240 1253 1422 1781">CDCR DOM Section 62080.14, Transgender Inmates specifies that inmates who have been diagnosed as transgendered shall be housed at designated facilities "to the maximum extent practical" based on the need to ensure the inmate's medical care and mental health treatment. If the inmate has multiple case factors which make it difficult to house in the specified institutions, a case conference with key CDCR staff shall be conducted to determine the most appropriate level of care and institution suitable for the inmate's case factors. Additionally, per California Code of Regulations, Title 15, Section 3375, the classification, and housing process shall take into consideration the inmate's needs, interest and desires, his/her behavior, and placement score in keeping with the CDCR and institution's/facility's programs and security missions and public safety. Interview with the CDCR PREA Coordinator confirmed that CDCR has 14 designated transgender institutions and that the institutions were selected as they have more specialized medical and mental health staff that are experienced and able to provide services better in line with the needs of transgender inmates and that the classification and housing process considers all factors listed above and is done on a case-by-case basis. Further, CDCR PREA Coordinator affirmed that if transgender inmates are housed at a designated facility that they are housed throughout the facility in all housing types, not in one housing unit. Additionally, CDCR PREA Coordinator affirmed that an inmate who identifies as transgender is not housed at one of the designated facilities solely because they identify as transgender and that transgender inmates are housed throughout all CDCR facilities, not just designated facilities, depending on the needs and classification of the inmate. SATF is one of the 14 designated institutions.</p> <p data-bbox="240 1816 1422 1907">115.42 (d) - This substandard required corrective action. After review of (22) inmate records it was revealed that the transgender biannual reassessments were not consistent and timely in accordance with admission/transfer dates and CDCR DOM section 54040.14.2.</p> <p data-bbox="240 1942 1422 2160">SATF conducted refresher training on Transgender Biannual Reassessment for Safety in Placement and Programming. All Counseling staff were informed of their responsibility, time limits and processes. Refresher training documents to include reassessments during the corrective action period following the refresher training were submitted to the auditor for review. CDCR headquarters has put in place a process of notifications to its facility PREA Compliance Managers for the upcoming biannual / annual reassessments. A log of inmates due for reassessments for the upcoming (6) month period are sent and tracked by the PCM, the facility upon completion of the reassessments has (5) days to submit to headquarters. This process allows headquarters to monitor timely reassessments and take steps to correct issues when and should it occur. SATF</p>

submitted requested documentation of the refresher training, headquarters process for tracking and completion of transgender reassessments during the remainder of the corrective action period. Further information and documentation given by the SATF PCM were transgender reassessments conducted during annual committees where the information is logged into the inmates General Chrono notes. If the inmate is not due for an annual committee but is due for a reassessment, the responsible staff conducts a reassessment by interviewing the inmate utilizing CDCR form 128-B. The form addresses the inmates concerns of threats to safety; if their program is appropriate and housing placement is safe. The process not only consider the inmates concerns but also any documented cases and reports in their files. After review of documents submitted, this corrective measure was removed and is now compliant.

115.42 (e) & (f) - CDCR Memorandum Re: Transgender Biannual Reassessment for Safety in Placement and Programming requires that Correctional Counselors conduct a Bi-annual Assessment and complete CDCR Form 128-B, General Chrono. This form includes information that is asked of the inmate during a face-to-face interview to assess any threats to their safety. SATF is a designated transgender institution, interviews with the SATF PREA Compliance Manager and staff responsible for risk screening confirmed that housing and programming assignments are reassessed at least twice a year and that transgender inmates would be able to shower separately from other inmates.

Interviews, Policy, Documentation and Other Evidence Reviewed:

1. SATF Completed Pre-Audit Questionnaire (PAQ)
2. California Code of Regulations - Title 15
  1. Section 3269 - Inmate Hosing Assignments
  2. Section 3375 - Classification Process
3. CDCR Policy - Department Operations Manual (DOM), Chapter 5
  1. Section 54046.5 - Initial Screening
  2. Section 54040.6 - Offender Housing
  3. Section 54040.7 - Detection, Notification and Reporting
  4. Section 54040.14.2 - Transgender Biannual Reassessment for Safety in Placement and Programming
4. CDCR Policy - Department Operations Manual (DOM), Chapter 6
  1. Section 62080.14 - Transgender Inmates
5. CDCR Memorandum Re: PREA Risk Screening Correctional Counselor Responsibilities - Dated September 29, 2017
6. CDCR Memorandum Re: PREA Risk Screening - Dated August 28, 2017
7. CDCR Memorandum Re: PREA Risk Screening Mental Health Referral Process - Dated October 24, 2018
8. CDCR's Transgender Bi-annual Assessment (Form CDCR 128-B)
9. CDCR PREA Risk Screening Tool
10. CDCR Memorandum Re: Transgender Bi-annual Reassessment for Safety in Placement and Programming - Dated August 25, 2017
11. Review of Inmate Records
12. Interviews with CDCR PREA Coordinator, SATF PREA Compliance Manager and Staff Responsible for PREA Screening

<b>115.43</b>	<b>Protective Custody</b>
	<p data-bbox="244 179 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="244 238 443 261"><b>Auditor Discussion</b></p> <p data-bbox="244 298 1433 523">115.43(a) - CDCR DOM, Section 54040.6, Offender Housing states that offenders at high risk for sexual victimization, as identified on the electronic Initial Housing Review, shall not be placed in segregated housing unless an assessment of all available alternatives has been completed, and a determination has been made that there is no available alternative means of separation from likely abusers. These assessments shall be completed immediately or within 24 hours of placement into segregated housing. SATF Warden confirmed in her interview that the facility does their best to exhaust all means before placing an inmate in involuntary segregation. There were no inmates at high risk for sexual victimization placed in involuntary segregated housing in the last 12 months at SATF and confirmed by facility list.</p> <p data-bbox="244 560 1433 854">115.43(b) - (e) - California Code of Regulations, Title 15, Article 7 states that, Non-Disciplinary Segregation (NDS) means segregated housing placement for administrative reasons to include but are not limited to: (d) Investigation related to being the victim of a Prison Rape Elimination Act (PREA) incident. If the placement in NDS is related to being the victim, the inmate will be afforded all programs, privileges, and education in accordance with section 3044-Inmate Work Groups and subsection 3190 (b) (5) (c), of Title 15 of the CCR. If these are restricted, assigned staff shall document: 1) the opportunities that have been limited; 2) the duration of the limitation; and 3) the reasons for such limitation. This section also addresses the assignment to NDS only until an alternative means of separation from likely abusers can be arranged, and assignment shall not exceed 30 days, if so, a review by assigned supervisor shall be completed to determine whether there is a continuing need for separation.</p> <p data-bbox="244 890 1433 1010">SATF did not have any inmates in segregation for potential risk of sexual victimization. Interviews with SATF Warden and PREA Compliance Manager confirmed that should an inmate be identified to be at risk they would be re-evaluated and only if no available alternative means of separation from likely abusers could be made, a transferred to another facility would be an option. Further, that access to programs, privileges and education is done through review with the assigned counselors.</p> <p data-bbox="244 1046 874 1069">Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol data-bbox="276 1125 995 1317" style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations Manual (DOM), Chapter 5       <ol style="list-style-type: none"> <li>1. Section 54040.6 - Offender Housing</li> </ol> </li> <li>3. California Code of Regulations Title 15 - Article 7 - Segregation Housing</li> <li>4. SATF Inmate Housing Roster</li> <li>5. Interviews with SATF Warden and PREA Compliance Manager</li> </ol>

<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.51(a) - (b) - CDCR DOM, Section 54040.7, Detection Notification and Reporting outlines that an offender may report sexual violence, staff sexual misconduct, or sexual harassment that occurs under the jurisdiction of the CDCR to any staff member, volunteer, contractor, Office of Internal Affairs, Office of the Inspector General, the Inmate Appeals Process, the sexual assault hotline or through a third party. These reports can be verbally or in writing. In addition, offenders being retained solely for civil immigration may contact consular officials or officials at the Department of Homeland Security. During the site review, posters were observed up all around the facility in both English and Spanish informing inmates of the various ways of reporting - to staff, Internal Affairs, Inspector General, or via third party through a family member. The Inmate Orientation Handbook provided to every inmate at intake likewise lists the above. Both interviews with intake staff and random inmates confirmed that they are aware of the various ways to report, to include but not limited to contacting the PREA hotline number, to staff in writing or in person, and on a form 602 (grievance form).</p> <p>115.51(c) - (d) - California Code of Regulations, Title 15, Section 3401.5 requires that any employee who observes, or receives information from any source concerning sexual misconduct, shall immediately report the information or incident directly to the institution head, unit supervisor or highest-ranking official on duty, show shall then immediately notify the Office of Internal Affairs. Interviews with staff confirmed that staff knew of the various ways to report privately. Interviews with staff confirmed that they would report it through their chain of command.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. California Code of Regulations - Title 15       <ol style="list-style-type: none"> <li>1. Section 3401.5 - Employee Sexual Misconduct</li> </ol> </li> <li>3. CDCR Policy - Department Operations Manual (DOM), Chapter 5       <ol style="list-style-type: none"> <li>1. Section 54040.4 - Education and Prevention</li> <li>2. Section 54040.7 - Detection, Notification and Reporting</li> </ol> </li> <li>4. CDCR PREA Sexual Abuse/Assault Prevention and Intervention Booklet</li> <li>5. CDCR Sexual Violence Awareness Brochure</li> <li>6. CDCR PREA Volunteer/Contractor Training - Informational Sheet</li> <li>7. SATF Inmate Orientation Handbook</li> <li>8. Review of Inmate Records (602) Inmate Grievances</li> <li>9. Interviews with SATF Intake Staff, Grievance Coordinator and Random Inmates</li> </ol>

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.52(a) - The agency is not exempt from this standard as it has an appeals process to address inmate grievances regarding sexual abuse. California Code of Regulations, Title 15 - Article 8 states a grievance in whole or part containing allegations of sexual violence or staff sexual misconduct shall be processed as an emergency appeal. As an emergency appeal, the appeal is immediately reviewed by the Hiring Authority or designee and processed directly at the second level of review.</p> <p>115.52(b)-(c) - California Code of Regulations, Title 15 - Article 8 states that there shall be no time limits for allegations of sexual violence of staff sexual misconduct. While the department maintains the right to defend against an inmate lawsuit on the grounds of the applicable statute of limitations, a time limit shall not be imposed upon when an appellant may file such a grievance. Further, Article 8, Section 3084.7 states that appeal responses shall not be reviewed and approved by a staff person who participate in the event of the decision being appealed. The Sexual Abuse/Assault Prevention and Intervention pamphlet that is provided to all inmates upon reception, informs inmates that appeals relating to the reporting of employee sexual misconduct will go directly to the Warden or Superintendent for immediate review and action.</p> <p>115.52(d) - California Code of Regulations, Title 15 - Article 8, Section 3084.8 states that appeal time limits indicates that the first and second level responses have a time limit of 30 days, third level responses have 60 days. If an exceptional delay prevents completion of the review within specified time limits, the inmate shall be provided an explanation of the reasons for the delay and the estimated completion date. Section 3084.9 states that second and third level reviews may be extended in increments of 30 days, but shall not exceed 160 days from the date the appeal was received by the appeals coordinator. The appellant may consider an absence of a timely response at any level, including that of any properly noticed extension, a denial at that level. SATF had nine (9) grievances filed that alleged sexual abuse in the last 12 months. Grievances alleging sexual harassment were reviewed and eight (8) grievances reached final decision within 90 days with one (1) requiring an extension where the inmate was notified in writing. Grievance records were reviewed which confirmed the eight (8) grievances reached final decision within 90 days and one (1) grievance extension with inmate notification.</p> <p>115.52(e) - CDCR COM, Chapter 5, Section 54040.7.2, Notification via Third Party Reporting of Misconduct Against an Employee, Contractor or Volunteer discusses how a third party can file a complaint on behalf of an inmate and it is to be submitted to the hiring authority of the alleged perpetrator. When a third-party files a complaint on behalf of an inmate, a supervisory employee shall take the alleged victim to a private setting to discuss the complaint and assess immediate housing needs. The agency/facility does not require as a condition of processing the request that the alleged victim agree to have the request filed on their behalf. A review of SATF PREA Investigations files confirmed that all allegations of sexual misconduct are investigated, to include those received via third party and through grievance submittal.</p> <p>115.52(f) - California Code of Regulations, Title 15- Article 8, Section 3084.9 establishes a timeframe of 48 hours for an initial risk assessment to be conducted and documented upon submission of an emergency grievance. An inmate is allowed to file an emergency grievance should she be subject to a substantial risk of imminent sexual abuse, with an initial response within 48 hours, and a final decision within 5 calendar days. SATF's PAQ and grievance records indicated that they had no emergency grievances alleging substantial risk of imminent sexual abuse in the last 12 months.</p> <p>115.52(g) - CDCR DOM, Section 54040.15.1, Alleged Victim - False Allegations states that following an investigation, if it is determined that the allegations were made not in good faith the offender making the allegations may be subject to disciplinary action. An allegation that is deemed to be unsubstantiated or unfounded based on lack of evidence, does not constitute false reporting. SATF had no instances in the past 12 months of inmates filing grievances alleging sexual abuse in bad faith.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.15.1 - Alleged Victim - False Allegations</li> <li>2. Section 54040.7 - Notification via Third Party Reporting</li> </ol> </li> <li>3. Sexual Abuse/Assault Prevention and Intervention inmate pamphlet</li> <li>4. California Code of Regulations Title 15 - Article 8 - Appeals, Section 3084</li> <li>5. SATF PREA Investigations Log</li> <li>6. SATF Grievances Alleging Sexual Abuse or Staff Sexual Misconduct</li> <li>7. Interviews with SATF Warden and Grievance Coordinator</li> </ol>	

115.53	<b>Inmate access to outside confidential support services</b>
	<p data-bbox="244 147 715 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="244 210 443 237"><b>Auditor Discussion</b></p> <p data-bbox="244 273 1422 600">115.53(a) - CDCR DOM, Section 54040.8.2- requires that victims of rape, unlawful sexual intercourse with person under 18, rape of spouse, sodomy, oral copulation, forcible acts of sexual penetration have a right under PC 264.2 and PC 679.04 to victim advocate and victim support person for both the medical examination and investigatory interview. SATF provides access to victim advocates for emotional support services related to sexual abuse through the local rape crisis center, Kings Community Action Organization. Inmates are informed of these services and the contact information (phone and mailing address) of the Kings Community Action Organization through the inmate handbook and the CDCR/SATF "Sexual Abuse/Assault Prevention and Intervention" pamphlet, and the SATF Additional Services of Sexual Abuse poster. The audit team tested the inmate phone system in several areas to contact the local rape crisis center, as listed on the posters throughout the facility. All calls were processed, and the facility was notified of a report being made in a timely manner, as verified by email correspondence and interview with the Rape Crisis Center representative.</p> <p data-bbox="244 631 1434 922">CDCR/SATF has established a way to inform inmates through the PREA Informational Sheet for Orientation Handbook that services from the Rape Crisis Center will maintain confidentiality as required by state and federal laws for Sexual Assault Counselors. Additionally, if inmates chose to write to the Kings Community Action Organization, they are informed that the letter must be sent attention to "PREA Advocate" and the envelope must state: "EVID. CODE 1035.4 PRIVILEGED COMMUNICATION" so that it is treated as confidential mail. Inmate interviews acknowledge that inmates are aware of the services, or at least where to find the information to contact them, should they feel the need for them. Inmates who reported sexual abuse affirmed through interviews that they were informed about support services available to them and knew where they could find the contact information should they choose to receive further services. Inmates reported that they received the information through paperwork at intake and that it is also located on posters throughout the facility.</p> <p data-bbox="244 954 1426 1115">115.53(b) - CDCR/SATF has established a way to inform inmates through the PREA Informational Sheet for Orientation Handbook that the telephone calls from the inmate telephone system are recorded and if PREA allegations are identified on this system, it will be referred to appropriate staff for inquiry and investigation. Interviews with inmates noted that they overall felt that the information they shared would be confidential but also noted that they understood that if it were regarding an incident that occurred at the facility that it would have to be reported so that it could be addressed.</p> <p data-bbox="244 1146 1430 1339">115.53(c) - CDCR/SATF has a Memorandum of Understanding (MOU) with the Kings Community Action Organization to provide emotional support services related to sexual abuse and victim advocate service. The MOU is in effect from April 8, 2019, through June 30, 2024. Contact information for the Kings Community Action Organization is listed in the Inmate Orientation Handbook, and in the Sexual Violence Awareness brochures provided to inmates. The auditor facilitated a phone interview with the Kings Community Action Organization staff who confirmed that they are presently providing emotional support services related to sexual abuse and victim advocate services to inmates at SATF.</p> <p data-bbox="244 1370 871 1397">Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol data-bbox="276 1451 1241 1809" style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5       <ol style="list-style-type: none"> <li>1. Section 54040.8 - Victim Advocate and Victim Support Person</li> </ol> </li> <li>3. CDCR Sexual Violence Awareness Pamphlet</li> <li>4. CDCR Sexual Abuse/Assault Prevention and Intervention Pamphlet</li> <li>5. SATF Inmate Orientation Handbook</li> <li>6. CDCR "Shine the Light on Sexual Abuse" Posters</li> <li>7. PREA Information for Orientation Handbook</li> <li>8. Memorandum of Understanding (MOU) between SATF and Kings Community Action Organization</li> <li>9. Review of Inmate Records</li> <li>10. Interviews with SATF Random Inmates and Inmates who Reported Sexual Abuse</li> </ol>

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<p data-bbox="242 210 443 237"><b>Auditor Discussion</b></p> <p data-bbox="242 273 1410 465">115.54(a) - The CDCR website: provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. The website outlines ways that visitors, inmate family members or associates, and other community members can privately report sexual abuse or sexual harassment. Additionally, PREA posters are posted throughout the facility, to include visitation areas, which provide information on how to report sexual abuse or sexual harassment. The website information was verified and during interviews with staff and inmates it was confirmed that they had knowledge of the information and website.</p> <p data-bbox="242 501 871 528">Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol data-bbox="277 577 1391 801" style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR, DOM, Section 54040.7.3 - Notification via Third Party Reporting of Sexual Violence or Sexual Harassment Against an Offender</li> <li>3. CDCR Agency web page</li> <li>4. CDCR/SATF PREA Posters</li> <li>5. SATF Sexual Abuse/Assault Prevention and Intervention inmate pamphlet</li> <li>6. Interviews with SATF Random Staff and Inmates</li> </ol>

<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.61(a) - (b) - CDCR DOM, Section 54040.7, Detection, Notification and Reporting requires that staff immediately and confidentially report any PREA violation by staff or inmates whether witnessed or reported to the appropriate supervisor. In addition to reporting, employees have a responsibility to assist the offender and refer him/her to medical and mental health for evaluation. Volunteers/Contractors are also required to report incidents of sexual violence, harassment, and staff sexual misconduct to appropriate staff. CDCR DOM, Section 54040.8 outlines the expectations of staff to ensure that reporting of information is done in a confidential manner and that incident-specific information shall be treated as confidential, and disclosure made only to employees who have a "need to know" and to other entities as permitted or requested by law. All staff interviews confirmed that all staff are aware of the agency's policy for reporting any information related to an inmate sexual abuse and compliance with this substandard.</p> <p>115.61(c) - CDCR Health Care Services Policy, Chapter 16, 1.16.1 requires that providers report allegations of sexual violence, staff sexual misconduct, and sexual harassment to include informing patients of the provider's duty to report, and the limitation of confidentiality, at the initiation of services. Medical and Mental Health staff interviews confirmed that the inmates are advised at the beginning of treatment, that there's limitations to confidentiality when it comes to their obligation to reporting sexual abuse incidents that occurred within its institution. SATF also utilizes Informed Consent forms during the medical and mental health orientation.</p> <p>115.61(d) - SATF does not house inmates under that age of 18. Current litigation against CDCR regarding vulnerable adults which resulted in the remedial plans and the State of California - Health and Human Services Agency, there is no requirement for CDCR to report to state of local services agency such as Adult Protective Services. It should be noted that CDCR Investigators are classified as Peace Officers and receive specialized training in conducting sexual abuse investigations of all persons incarcerated up to and including criminal cases.</p> <p>115.61(e) - CDCR DOM, Section 54040.12, Investigations requires that all allegations of sexual violence, staff sexual misconduct, and sexual harassment shall be investigated, and the findings documented in writing, it further states that for allegations reported to the Hiring Authority, the allegation will be assigned to an LDI to investigate and utilizing standard investigatory procedures. Interview with the SATF Warden confirmed this practice. Review of SATF PREA investigations completed during the audit period confirmed compliance with this substandard.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department of Operations Manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.12 - Investigations</li> <li>2. Section 54040.7 - Detection, Notification and Reporting</li> <li>3. Section 54040.8 - Response</li> </ol> </li> <li>3. CDCR Health Care Services Policy, Chapter 16, 1.16.1</li> <li>4. CDCR Memorandum Re: Standard 115.61 - Dated January 27, 2020</li> <li>5. SATF PREA Investigation Files Interviews with SATF Warden, Medical and Mental Health Practitioners, Random Inmates and Staff</li> </ol>

<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.62(a) - CDCR DOM, Section 54040.7, Detection, Notification and Reporting establishes a responsibility for CDCR employees to protect the inmates in their custody. All staff are responsible for reporting immediately and confidentially to the appropriate supervisor any information that indicates an offender is being, or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment. CDCR DOM, Section 54040.6 states that inmates at high risk for sexual victimization, as identified on the electronic Housing Review, shall not be placed in segregated housing unless an assessment of all available alternatives has been completed and a determination has been made that there is no available alternative means of separation from likely abusers.</p> <p>SATF reported on the PAQ to have no instances in the past 12 months of determining that an inmate was at risk of imminent sexual abuse. Agency Head/Designee and SATF Warden both confirmed in interviews that housing alternatives are always available to ensure protection of inmates at risk of imminent sexual abuse. Some of the alternatives considered would be moving the inmate to a different housing unit, single cell placements, and recommending a transfer to a different facility if deemed necessary. Based on staff interviews, it was evident that staff is aware of their responsibility to protect inmates in their care and that any perceived threat of harm including sexual abuse would result in immediate reporting and preventative action by staff. CDCR and SATF does not limit PREA to actual reported incidents, but will consider any information related to imminent harm based on the potential for sexual abuse.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.6 - Offender Housing</li> <li>2. Section 54040.7 - Detection, Notification and Reporting</li> </ol> </li> <li>3. Interviews with CDCR Agency Head/Designee, SATF Warden, Random Staff</li> </ol>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.63(a) - (c) - CDCR DOM, Section 54040.7.4, Notification from/to Other Confinement Facilities states that upon receiving an allegation that an upon receiving an allegation that an offender was the victim of sexual violence or staff sexual misconduct while confined at another institution/confinement facility, the hiring authority where the allegation was received shall notify the hiring authority of the institution or appropriate office of the agency where the alleged incident occurred. The notification shall be made via telephone contact or electronic mail and will be followed up with a written summary. Notifications must be made as soon as possible but no later than 72 hours. The institution or facility where the alleged sexual violence or staff sexual misconduct is reported will be responsible to complete the SSV-IA form. In the past 12 months, SATF received five (5) allegations of an inmate being sexually abused while confined at another confinement facility. SATF ISU were assigned the investigations and investigation files reviewed by the auditor which verified that SATF completes an investigation report and documentation of notification to the other confinement facility.</p> <p>115.63(d) - CDCR DOM, Section 54070.7.4, Notification from/to Other Confinement Facilities further states that the agency receiving notification that an incident occurred at their institution, shall assign, and ensure that the allegation is investigated and reported in according with DOM Section 54040.12. Upon completion, a closure report shall be returned to the institution where the alleged incident was reported. In the past twelve months, SATF received four (4) allegations of sexual abuse occurring at SATF from other facilities. PREA investigation file reviews and interviews with staff confirmed the practice.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.7.4 - Notification from/to Other Confinement Facilities</li> </ol> </li> <li>3. SATF Investigation Files</li> <li>4. Interviews with CDCR Agency Head/Designee, SATF Warden, SATF Investigative Staff</li> </ol>

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.64(a) - (b)- CDCR DOM Section 54040.8, Response requires that the employee who the inmate makes initial contact with will take the alleged victim to a private secure location and utilize the Initial Contact Guide to complete the tasks associated with the initial contact which includes preservation of evidence, requesting that the alleged victim and alleged abuser not take any actions that could destroy physical evidence. The custody supervisor shall ensure that a perimeter has been established and an officer has been posted to keep persons out of the crime scene area and keep a chronological log of all persons entering the crime scene area and purposes for doing so. CDCR developed a checklist for watch commanders to follow in these incidents and is currently in use, in addition to this checklist, CDCR has a PREA Initial Contact Guide for staff. The CDCR Custody Supervisor PREA checklist and the PREA Initial Contact Guide clearly outlines the steps and covers items (1) through (4) in this substandard.</p> <p>Review of SATF PREA Investigation files confirmed that the CDCR Custody Supervisor PREA checklist and the PREA Initial Contact Guide is followed and completed. Interviews with Custody and Non-Custody staff confirmed that staff is aware of the procedures and their responsibilities as a first responder to a PREA incident.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.8 - Response</li> </ol> </li> <li>3. CDCR Custody Supervisor PREA Checklist</li> <li>4. CDCR PREA Initial Contact Guide</li> <li>5. SATF PREA Investigations Files</li> <li>6. Interviews with Random Custody and Non-Custody Staff, Custody and Non-Custody First Responders, Inmates Who Reported Sexual Abuse</li> </ol>

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.65(a) - SATF Supplement to CDCR DOM Section 54040 outlines and addresses SATF's institutional plan to responding to incident and coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership, required by PREA standard 115.65. SATF Supplement to CDCR DOM Section 54040.3 is reviewed annually by the SATF PREA Compliance Manager and was last reviewed in February 2020. Interviews with SATF Warden and facility staff confirmed that staff is aware of the coordinated response in place at SATF.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.8 - Response</li> <li>2. Section 54040.8.1 - Custody Supervisor Responsibility</li> </ol> </li> <li>3. SATF Supplemental to CDCR DOM Section 54040 - Revised February 2020</li> <li>4. CDCR CCHCS, Chapter 16, 1.16.2 - Prison Rape Elimination Act Procedure</li> <li>5. Interviews with SATF Warden and Random Staff</li> </ol>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<p data-bbox="240 174 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="240 236 443 264"><b>Auditor Discussion</b></p> <p data-bbox="240 298 1430 528">115.66(a) - CDCR Collective Bargaining Agreement (CBA) for Unit 6 contract is effective July 3, 2020, through July 2, 2022. The CBA does not limit management'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. The CBA section 4.01: Management Rights states that management has the authority to hire, transfer, promote and demote employees as the employer may determine to be necessary for the orderly, efficient, and economical operation of CDCR. Interview with the CDCR Agency Head/Designee confirmed that involuntary actions related to the removal and reassignment of staff is within their authority.</p> <p data-bbox="240 557 871 585">Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol data-bbox="277 635 1067 732" style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. California Correctional Peace Officers Association Bargaining Unit 6 Agreement</li> <li>3. Interviews with CDCR Agency Head/Designee</li> </ol>

115.67	<b>Agency protection against retaliation</b>
	<p data-bbox="242 147 715 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 210 443 237"><b>Auditor Discussion</b></p> <p data-bbox="242 273 1417 564">115.67(a) - (e) - CDCR DOM, Section 54040.13, Allegation Follow-Up requires that for at least 90 days following a report of sexual violence or staff sexual misconduct, the institutional PREA Compliance Manager shall assign a supervisory staff member to monitor the conduct and treatment of inmates or employees who reported the allegation to ensure there are no changes that may suggest retaliation. The assigned supervisor shall notify the PREA Compliance Manager of any changes and the PREA Compliance Manager shall act promptly to remedy any such retaliation and ensure a CDCR form 2304 or 2305, Protection Against Retaliation (PAR) is initiated which includes; periodic inmate status checks, inmate disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff. This section also states that the monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need and that the obligation to monitor shall terminate if the investigation determines that the allegation is unfounded or proven false.</p> <p data-bbox="242 600 1433 958">Interviews with the CDCR Agency Head/Designee, SATF Warden, PREA Compliance Manager and staff charged with monitoring retaliation revealed that they were very knowledgeable on the responsibilities and duties to monitor and report any changes to the PREA Compliance Manager. However, review of the SATF PREA Investigation Files found that while SATF does have a policy and practice in place, documentation of monitoring the conduct and treatment of inmates or employees who reported the allegation to ensure there are no changes that may suggest retaliation are not always occurring on the PAR-CDCR 2304 forms after the initial report is made. In the 12 months prior to the audit, SATF did not receive any reports of retaliation from PREA related incidents. Therefore, substandard 115.67 (c) required corrective action, as the auditor could not confirm that SATF is ensuring and documenting the monitoring and treatment of inmates or staff who reported the sexual abuse and of inmates who reported to have suffered sexual abuse, to include any changes that may suggest retaliation by inmates or staff. If failing to conduct the retaliation monitoring SATF would not be able to act promptly to remedy any such retaliation.</p> <p data-bbox="242 994 1404 1182">SATF conducted refresher training with the Local Designated Investigator (LDI) Supervisors assigned to the Investigative Services Unit (ISU). The training emphasized specific guidelines and responsibilities when completing PREA investigative reports. The training also included the assurance of conducting follow up meetings with inmates and employees who reported allegations of sexual abuse and sexual harassment. Training documentation, PAR's for investigations during the corrective action period following the refresher training were submitted to the auditor for review. After review of documents submitted by SATF, this corrective measure was removed and is now compliant.</p> <p data-bbox="242 1218 1433 1370">Additionally, CDCR DOM, Chapter 5, Section 54040.1, PREA Policy states that retaliatory measures against employees or offenders who report incidents of sexual violence, staff sexual misconduct or sexual harassment as well as retaliatory measures against those who cooperate with investigations shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. This is also reiterated in California Code of Regulations, Title 15, Section 3401.5. Interviews with CDCR Agency Head/Designee and SATF Warden affirmed the zero-tolerance for retaliation.</p> <p data-bbox="242 1406 874 1433">Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol data-bbox="274 1487 1420 1818" style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5       <ol style="list-style-type: none"> <li>1. Section 54040.1 - Prison Rape Elimination Act Policy</li> <li>2. Section 54040.13 - Allegation Follow-Up</li> </ol> </li> <li>3. California Code of Regulations - Title 15       <ol style="list-style-type: none"> <li>1. Section 3401.5 - Employee Sexual Misconduct</li> </ol> </li> <li>4. CDCR Protection Against Retaliation Forms (PAR-CDCR 2304, 2305)</li> <li>5. SATF PREA Investigation Files</li> <li>6. Interviews with CDCR Agency Head/Designee, SATF Warden, PREA Compliance Manager and supervisors charged with monitoring retaliation</li> </ol>

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.68(a) -CDCR DOM, Section 54040.6, Offender Housing states that offenders at high risk for sexual victimization, as identified on the electronic Initial Housing Review, shall not be placed in segregated housing unless an assessment of all available alternatives has been completed, and a determination has been made that there is no available alternative means of separation from likely abusers. These assessments shall be completed immediately or within 24 hours of placement into segregated housing.</p> <p>California Code of Regulations, Title 15 - Section 3335, Administrative Segregation states that non-disciplinary segregation (NDS) means segregated housing placement for administrative reasons to include investigations related to being the victim of a PREA incident. If the placement in NDS is related to being the victim of a PREA incident, the inmate will be afforded all programs, privileges, and education in accordance with CCR, Title 15, sections 3044-Inmate Work Groups and subsection 3190 (b)(5)(c). If programs, privileges, and education are restricted, assigned staff shall document: 1) the opportunities that have been limited; 2) the duration of the limitation; and 3) the reasons for such limitation. This section also addresses the assignment to NDS only until an alternative means of separation from likely abusers can be arranged, and assignment shall not exceed 30 days. If NDS will exceed the 30 days, then it shall be documented on CDC Form 128-G, General Chrono. The inmate is reviewed every 30 days to determine whether there is a continuing need for segregation from the general population and documented on CDC Form 128-B, General Chrono. If the custody supervisor determines the need for continued segregation no longer exists, the inmate is referred to the classification committee for a programmatic review.</p> <p>Further, when the reasons for ordering an inmate's placement in administrative segregation shall be clearly articulated on an CDC Form 114-D - Order and Hearing on Segregated Housing, by the initial segregating authority. The CDC Form 114-D shall include sufficient information and detail to allow the inmate to present a written or verbal defense to the state reason and circumstances for segregation during the classification hearing.</p> <p>SATF reported no instances of involuntary non-disciplinary segregation (NDS) to protect an inmate who is alleged to have suffered sexual abuse within the last 12 months. Interview with the SATF Warden confirmed they do not place inmates who have alleged to have suffered sexual abuse in involuntary segregation though, if there was an inmate that was identified as a risk they would re-evaluate and only if no available alternative means of separation from likely abusers could be mad, a transfer to another facility would be an option.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.6 - Offender Hosing</li> </ol> </li> <li>3. California Code of Regulations - Title 15, Article 7 - Segregation Housing</li> <li>4. Interviews with the SATF Warden</li> </ol>

115.71	<b>Criminal and administrative agency investigations</b>
	<p data-bbox="240 174 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="240 236 443 264"><b>Auditor Discussion</b></p> <p data-bbox="240 298 1436 691">115.71(a) - CDCR DOM, Section 54040.12, Investigations requires that all allegations of sexual violence, staff sexual misconduct, and sexual harassment be investigated, and findings documented in writing. This includes any allegations made through a third-party or anonymous report. CDCR DOM, Section 54040.8., Custody Supervisor Responsibilities requires immediate notification to the Hiring Authority which will assign an LDI to conduct inquiry work-until sufficient information is obtained to warrant an Office of Internal Affairs (OIA) investigation, or the information collected refutes the allegations, as determined by the Hiring Authority. Information will be thoroughly documented on a Confidential Memorandum that shall be maintained with the investigatory file. The complaint will be investigated utilizing standard investigatory procedures. Upon conclusion the alleged victim will be provided written notification of the findings as described in section 54040.12.5, Investigations. This section states that all incidents shall be investigated, and the findings documented in writing. Further, CDCR DOM, Section 54040.8.1, Custody Supervisor Responsibilities state that if it is believed by staff to constitute an emergency they shall report immediately to a supervisor where notifications to OIA, Regional Office, SAC or OIA AOD can be made.</p> <p data-bbox="240 725 1436 851">Interviews with Investigative Staff confirmed that an investigation is immediately started when there is an allegation of sexual abuse or sexual harassment. When there is an anonymous or third-party report, Investigative Staff handles it immediately and appropriately. Investigation files of sexual abuse/sexual harassment completed during audit period were provided to auditor for review and review of the files confirmed that investigations are completely promptly and thoroughly.</p> <p data-bbox="240 886 1436 1212">115.71(b) - (c) - CDCR DOM, Section 54040.4, Education and Prevention requires that investigators assigned to sexual violence and/or staff sexual misconduct cases will receive specialized training and that the Facility PREA Compliance Manager shall ensure employees investigating these incidents are properly trained. CDCR DOM section 54040.1 has Locally Designated Investigators (LDI) who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct. SATF refers to their investigator as the Investigative Services Unit (ISU) and trained LDI's. CDCR PREA Specialized Training for LDI curriculum and training records for LDI's were provided and reviewed by the auditor. Review of training records confirmed that all LDI's received specialized training in sexual abuse investigations, interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection and identifying evidence required to substantiate a case for administrative action or prosecution referral. Interviews with Investigation staff affirmed that they received specialized training and are highly knowledgeable in completing PREA related investigations.</p> <p data-bbox="240 1246 1436 1333">115.71 (c) Required corrective action. After reviewing forty-six (46) PREA investigations, it was found that there was no documented review of prior complaints and reports of sexual abuse involving the suspected perpetrator in any of the completed PREA investigative reports.</p> <p data-bbox="240 1368 1436 1563">SATF conducted refresher training with the facility Local Designated Investigators (LDI). The training emphasized specific guidelines and responsibilities when completing PREA investigative reports to include components of available electronic monitoring data, interviews, complaints, and reports of sexual abuse involving the suspected perpetrator. Training documentation and investigations during the corrective action period following the refresher training were submitted to the auditor for review. After review of documents submitted by SATF, this corrective measure was removed and is now compliant.</p> <p data-bbox="240 1598 1436 1786">115.71(d) -California Code of Regulations, Title 15, Section 3316, states that all criminal misconduct by persons under the jurisdiction of the department or occurring on facility property shall be referred by the institution head or designee to appropriate authorities for possible investigation and prosecution, when there is evidence substantiating each of the elements of the crime to be charge. Review of PREA investigation files and interviews with the CDCR PREA Coordinator and SATF Investigation staff affirmed that this process was being followed and that when quality of evidence appears to support criminal prosecution, the agency conducts compelled interviews only after consulting with prosecutors.</p> <p data-bbox="240 1820 1436 2008">115.71(e) - CDCR DOM, Section 14030.5, Who May Request a Polygraph states that no person shall be ordered to take a polygraph examination. No coercion or of offer of reward shall be used to induce any person to take a polygraph examination. Interviews with SATF Investigations staff confirmed that they treat any alleged victim as a victim and do not discriminate or have a bias based on the inmate or staff's status during an investigation. Interviews with SATF Investigation staff and inmates who reported sexual abuse confirmed that SATF does not require alleged victims, suspects or witnesses to submit to a polygraph examination as a condition of proceeding with an investigation.</p> <p data-bbox="240 2043 1436 2169">115.71(f) - (h) - Interviews with SATF Investigative staff verified that thorough investigations are done and that all pertinent information such a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings is gathered and documented, to include an effort to determine whether staff actions or failures of actions contributed to the abuse. This includes statements, staff rosters and inmate housing</p>

assignments. Interviews also confirmed that all investigations are documented in writing and that all cases that appear to be criminal are referred for prosecution. In the past 12 months, SATF had two (2) completed investigations of sexual abuse that were referred for prosecution. Investigation files were reviewed and confirmed that investigations include an effort to determine whether staff actions or failures to act may have contributed to the abuse, description of physical and testimonial evidence, reasoning behind credibility of statements, and investigative facts and findings.

115.71(i) - CDCR DOM, Section 54040.20, PREA Data Storage and Destruction states that CDCR shall ensure that all PREA data collected are securely retained and are maintained for 10 years after the date of the initial collection. The PREA Instructions for Records Retention Schedule (RRS) states that Investigatory files are retained in the ISU for a minimum of 10 years or for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, whichever is longer.

115.71(j) - CDCR DOM, Section 54040.12, Investigations states that the departure of the alleged suspect or victim from the employment or control of CDCR shall not provide a basis for terminating an investigation. This was confirmed through interviews with Investigative staff and investigation files.

115.71(l) - CDCR/SATF conducts their own investigations whether administrative or criminal so this substandard does not apply.

Interviews, Policy, Documentation and Other Evidence Reviewed:

1. SATF Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations manual (DOM)
  1. Chapter 2, Section 14030.5 - Who May Request a Polygraph Examination
  2. Chapter 3, Section 31140.6 - Authority to Conduct Investigations
  3. Chapter 5, Section 54040 - Prison Rape Elimination Act
  4. Chapter 5, Section 54040.4 - Education and Prevention (Staff Training)
  5. Chapter 5, Section 54040.8.1 - Custody Supervisor Responsibilities
  6. Chapter 5, Section 54040.12 - Investigations
  7. Chapter 5, Section 54040.17 - Records Retention
  8. Chapter 5, Section 54040.20 - PREA Data Storage and Destruction
3. California Code of Regulations - Title 15, Section 3316 - Referral for Criminal Prosecution
4. CDCR Office of Internal Affairs (OIA) Investigator's Field Guide - Compelled Interviews
5. CDCR PREA Specialized Training for Locally Designated Investigators Curriculum
6. CDCR - PREA Instructions for Records Retention Schedule (RRS) updated
7. SATF Investigation Files Interviews with CDCR PREA Coordinator, SATF Warden, PREA Compliance Manager, Investigative Staff and Inmates Who Reported Sexual Abuse

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="242 210 443 237"><b>Auditor Discussion</b></p> <p data-bbox="242 273 1426 600">115.72(a) - CDCR, DOM, Section 33030.13.1, Investigative Findings defined the findings of each allegation shall be determined by the Hiring Authority in consultation with the Vertical Advocate for designated cases and the SAIG. For a case to be SUSTAINED or substantiated, this section states, "The investigation disclosed a preponderance of evidence to prove the allegation(s) made in the complaint." Further, CDCR DOM, Section 33030.17, Applying the Employee Disciplinary Matrix requires that sufficient evidence establishing a preponderance is necessary before any disciplinary action can be taken. The Employee Disciplinary Matrix shall be the foundation for all disciplinary action considered and imposed by the Department and shall be utilized by the Hiring Authority to determine the penalty to impose for misconduct. Auditor review of documentation of standard of proof used in investigative findings followed the standard. The auditor reviewed SATF PREA investigative files and conducted interviews with investigative staff which verified the same level of standard in substantiating a sexual harassment or sexual abuse allegation.</p> <p data-bbox="242 631 871 658">Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol data-bbox="277 712 963 904" style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 3       <ol style="list-style-type: none"> <li>1. Section 33030.13.1 - Investigative Findings</li> <li>2. Section 33030.17 - Applying the Employee Disciplinary Matrix</li> </ol> </li> <li>3. SATF PREA Investigation Files</li> <li>4. Interviews with Investigative Staff</li> </ol>

<b>115.73</b>	<b>Reporting to inmates</b>
	<p data-bbox="240 174 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="240 236 443 264"><b>Auditor Discussion</b></p> <p data-bbox="240 298 1425 661">115.73(a) - (f) - CDCR DOM, 54040.12.5, Reporting to Offenders states for staff on offender that following an offender's allegation that a staff member has committed sexual misconduct against an offender, the alleged victim shall be informed as to whether the allegation has been substantiated, unsubstantiated, or unfounded. The PREA Compliance Manager or designee shall inform that offender unless determined to be unfounded, whenever the alleged abuser is no longer posted within the inmate's unit, is no longer employed at the facility, has been indicted or convicted of the alleged sexual misconduct. This section further states that following an investigation into an offender's allegation of sexual violence by another offender, the institution shall inform the alleged victim of the outcome of the investigation and whenever the alleged abuse has been indicted or convicted of the alleged sexual violence. The agency's obligation to report/inform the offender of changes shall terminate if the offender is released from the agency's custody. CDCR DOM, Section 54040.8.1, Custody Supervisor Responsibilities states that upon conclusion of the investigation, the alleged victim will be provided written notification of the findings as described in DOM Section 54040.12.5.</p> <p data-bbox="240 691 1433 817">Interviews with the SATF PREA Compliance Manager and Investigative staff found that they were very knowledgeable on their responsibilities and duties of the notification process to alleged victims upon conclusion of the investigation. Additionally, a review of the SATF PREA Investigation Files revealed that SATF does have a policy in place and is consistent with documenting notification of the findings to the victim as described in DOM Sections 54040.8.1 and 54040.12.5.</p> <p data-bbox="240 849 871 877">Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol data-bbox="277 929 1412 1125" style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5       <ol style="list-style-type: none"> <li>1. Section 54040.8.1 - Custody Supervisor Responsibilities</li> <li>2. Section 54040.12.5 - Reporting to Offenders</li> </ol> </li> <li>3. SATF Investigative Files Interviews with SATF Warden, PREA Compliance Manager, Investigative Staff and Inmates Who Reported Sexual Abuse</li> </ol>

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.76(a) - (d) - California Code of Regulations, Title 15, Section 3401.5, Staff Sexual Misconduct states that any sexual behavior between an inmate/parolee, departmental employee, volunteer, agent, or individual working on behalf of CDCR shall subject the employee to disciplinary action and/or prosecution under the law. Additionally, CDCR DOM, Section 33030.15 - Types of Adverse Action Penalties outlines the five types of adverse action penalties; (15.1) Letter of Reprimand, (15.2) Salary Reduction, (15.3) Suspension without Pay, (15.4) Demotion to a Lower Class, (15.5) Dismissal from State Service. Per the Employee Disciplinary Matrix Penalty Levels in CDCR DOM, Section 33030.16 there are nine levels ranging from official reprimands, suspensions, salary reductions and dismissals. According to DOM section 33030.19 - Employee Disciplinary Matrix (EDM) number (18)-Over-familiarity with an inmate(s)/parolee(s) would follow a penalty of (6) which is, salary reduction of 10 for 13-24 months or suspension without pay for 26-48 workdays. EDM number (19)-Sexual Misconduct with an inmate(s)/Parolee(s) would follow a penalty of (9) which is, Dismissal.</p> <p>CDCR DOM, Section 54040.12.3 and 54040.12.4, Reporting to Outside Agencies states that for all employees, contractor or volunteers that are terminated for violations of agency sexual misconduct or harassment policies, or resignations by employees that would have been terminated if not for their resignation, shall be reported to any relevant licensing body by the hiring authority or designee.</p> <p>In the past 12 months, there have been no employees, volunteer, contractor, or individuals working on behalf of CDCR that were terminated for violating agency sexual abuse or sexual harassment policies at SATF. SATF PREA Investigative files were reviewed and interviews with CDCR and SATF leadership verified compliance with this standard.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM) <ol style="list-style-type: none"> <li>1. Chapter 3, Section 33030.15 - Types of Adverse Action Penalties</li> <li>2. Chapter 3, Section 33030.16 - Employee Disciplinary Matrix Penalty Levels employee</li> <li>3. Chapter 5, Section 54040.12.3 - Reporting to Outside Agencies</li> <li>4. Chapter 5, Section 54040.12.4 - Report to Outside Agencies for Contractors</li> </ol> </li> <li>3. California Code of Regulations - Title 15, Chapter 3, Section 3401.5 - Staff Sexual Misconduct</li> <li>4. SATF Investigative Files</li> <li>5. Interviews with CDCR Agency Head/Designee, CDCR PREA Coordinator, SATF Warden, PREA Compliance Manager and Investigative Staff</li> </ol>

<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.77(a) - CDCR DOM, Section 54040.12.4, Reporting to Outside Agencies for Contractors states that any contractor or volunteers who engages in staff sexual misconduct shall be prohibited from contact with the offenders and shall be reported to relevant licensing body by the hiring authority or designee. Further, CDCR Contractor Bid/Agreement (Exhibit D) provision (59) informs the contractor that any contract employee who engages in sexual abuse of an inmate shall be prohibited from contact with inmates and shall be subject to administrative and/or criminal investigation including possible referral to the District Attorney, unless the activity was clearly not criminal, and shall be subject to reporting to relevant licensing bodies. The agreement also states that by signing the contract they agree to all provisions and shall abide by the laws, rules and regulations governing conduct in associating with prison inmates or wards.</p> <p>115.77(b) - CDCR DOM, Section 101090.9, Termination states that the hiring authority may limit or discontinue activities of any volunteer or group which may impede the security and/or orderly operation or threatens security and safety of the volunteer, employees, public, or inmates. Termination can be carried out in an expeditious manner if there is evidence of volunteer misconduct that includes acts of inappropriate familiarity with inmates, parolees, participating in behavior either on or off duty that is of such nature that it may cause discredit to CDCR or its services.</p> <p>SATF reported that there were no substantiated PREA incidents involving a contractor or volunteer within the past 12 months. Interview with SATF Warden affirmed that appropriate and immediate measures would be taken to assure contact with inmates would cease, investigation conducted to include reporting to relevant licensing body and referral to law enforcement agencies.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM) <ol style="list-style-type: none"> <li>1. Chapter 5, Section 54040.12.4 - Report to Outside Agencies for Contractors</li> <li>2. Chapter 10, Section 101090.9 - Termination</li> </ol> </li> <li>3. CDCR Contractor Bid/Agreement Contract Special Terms and Conditions (Exhibit D)</li> <li>4. Interviews with SATF Warden</li> </ol>

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.78(a) - (b) - CDCR subject inmates to a disciplinary process and sanctions for those who engage in sexual abuse and sexual misconduct. Sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history as described in California Code of Regulations Title 15, Section 3323, which describes the level of rule violation and CDCR DOM, Section 54040.15. CDCR DOM, Section 54040.15, Disciplinary Process states, that upon completion of the investigative process, the existing disciplinary process, which includes referral for criminal prosecution and classification determinations, shall be followed. If the allegation of sexual violence warrants a disciplinary/criminal charge, a CDCR Form 115, Rules Violation Report shall be initiated. The offender who is charged will be entitled to all provisions of CCR Section 3320 regarding hearing procedures and time limitations and CCD Section 3316, Referral for Criminal Prosecution. There was one (1) administrative findings of inmate-on-inmate sexual abuse at SATF within the past 12 months, and was referred to the District Attorney's Office for Criminal Prosecution. A review of SATF PREA investigations was completed by the auditor.</p> <p>115.78(c) - California Code of Regulation, Title 15, Section 3317, Mental Health Evaluations for Disciplinary Hearings requires that inmates in the Mental Health program or any inmate showing signs of possible mental illness may require a CDC 115 MH, Rules Violation Report: Mental Health Assessment. Persons who exhibit bizarre, unusual, or uncharacteristic behavior at the time of the rule's violation shall be referred for a Mental Health Assessment. Interviews with SATF Warden and mental health staff confirmed that SATF considers an inmate's mental health status when determining what type of sanction, if any, should be imposed.</p> <p>115.78(d) - CDCR DOM, Section 54040.7, Referral for Mental Health Screening states that an offender who during the initial intake screening reports that he/she has experienced prior sexual victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is referred to mental health utilizing the CDCR form 128-MH5, mental health referral chronological. Interviews with SATF's mental health staff confirmed that the services are offered by mental health practitioners to offenders who have sexually abused another offender, and that they do not require the offending inmate to participate in interventions as a condition of access to programming or other benefits.</p> <p>115.78(e) - California Code of Regulations, Title 15, Section 3323, Discipline Credit Forfeiture Schedule outlines that in inmate who commits Rape, attempted rape, sodomy, attempted sodomy, oral copulation, and attempted oral copulation against the victim's will shall be assessed credit forfeiture ranging from 181-360 days. SATF had no instances of inmate on staff sexual abuse within the past 12 months.</p> <p>115.78(f) - CDCR DOM, Section 54040.15.1, Alleged Victim - False Allegations states that CDCR and its facility will not apply disciplinary action against an inmate for filing any report of sexual violence, or staff sexual misconduct, unless it is clearly demonstrated and documented that the inmate knowingly made a false report. An allegation deemed unsubstantiated or unfounded based on lack of evidence, does not constitute false reporting. SATF had no instances of taking disciplinary action against an inmate for making a false report within the last 12 months.</p> <p>115.78(g) - California Code of Regulations, Title 15, Section 3007, Sexual Behavior indicates that inmates may not participate in illegal sexual acts. Inmates are specifically excluded in laws, which report legal restraints from acts between consenting adults. SATF also investigates any "consensual sex" misconduct to avoid abuse under consent as means to deter sexual abuse in the facility and that inmates are disciplined accordingly should they participate in illegal sexual acts.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.7 - Referral for Mental Health Screening</li> <li>2. Section 54040.15 - Disciplinary Process</li> <li>3. Section 54040.15.1 - Alleged Victim - False Allegations</li> </ol> </li> <li>3. California Code of Regulations - Title 15 <ol style="list-style-type: none"> <li>1. Section 3007 - Sexual Behavior</li> <li>2. Section 3317 - Mental Health Evaluations for Disciplinary Hearings</li> <li>3. Section 3323 - Discipline Credit Forfeiture Schedule</li> </ol> </li> <li>4. SATF PREA Investigation Files and Inmate Disciplinary Sanctions Report Interviews with SATF Warden, Medical and Mental Health Staff</li> </ol>

115.81	<p><b>Medical and mental health screenings; history of sexual abuse</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.81(a) -(d) - CDCR DOM, Section 54040.7, Referral for Mental Health Screening states that if it is reported by an offender during the initial intake screening, that he/she has experienced prior sexual victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is referred to mental health utilizing the CDCR form 128-MH5, Mental Health Referral Chrono. During the on-site review of the intake area an observation of a medical/mental health satellite office where all new intakes are seen as part of the initial screening prior to being assigned to a housing unit. During the interview of the Intake Officer, it was verified that all inmates who disclose either previous sexual abuse or previously perpetrating sexual abuse, will immediately be offered a follow-up meeting with a mental health practitioner. Documentation of the referral utilizing the CDCR Form 128-MH5 was reviewed by the auditor and interview with the inmates who disclosed sexual victimization at Risk Screening confirmed that the practice of referrals and follow ups were being conducted by mental health staff.</p> <p>CCHCS PREA Health Care Guidelines outline the mental health referral process. Referrals to mental health may be made on an Emergent, Urgent, or Routine Basis. Emergent referrals are seen immediately, Urgent referrals are seen within 24 hours and a Routine referral are seen within five working days. All referrals are made on the CDCR-MH5 Mental Health Referral Chrono and forwarded to the mental health office. Emergent and Urgent referrals should also be made by phone to facilitate a timely response. Interviews with mental health staff and reviews of mental health referrals confirmed that these guidelines are in practice. Interviews with staff also verified that information related to sexual victimization or abusiveness of an inmate is shared with the appropriate staff on a need-to-know basis.</p> <p>115.81(e) - CDCR utilizes Authorization for Release of Information (CDCR 7552) to obtain consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. Information may be released to others including but not limited to authorized law enforcement agencies, authorized prosecutors, and other appropriate agencies to include health care information. Informed Consent for Mental Health Care (Form CDCR MH-7448) is provided to the inmate for all CDCR mental health services. Interviews with mental health staff confirmed the practice of obtaining informed consent.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5       <ol style="list-style-type: none"> <li>1. Section 54040.7 - Referral for Mental Health Screening</li> </ol> </li> <li>3. CCHCS PREA Health Care Guidelines</li> <li>4. CDCR PREA Authorization to Release Information Form (CDCR 7552)</li> <li>5. CDCR Informed Consent for Mental Health Care Form (CDCR MH 7448)</li> <li>6. CDCR PREA Screening Forms</li> <li>7. CDCR Memorandum Re: Standard 115.81 (d)-1, Dated December 5, 2017</li> <li>8. SATF Mental Health Referrals Interviews with SATF Inmates Who Disclosed Sexual Victimization at Risk Screening, Mental Health Staff and Staff Responsible for Risk Screening</li> </ol>
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115.82	<p><b>Access to emergency medical and mental health services</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.82(a) - (d) - CCHCS Volume 1, Chapter 16, outlines the procedures of CCHCS to provide medically necessary emergency and follow-up treatment; follow-up plans; and necessary referrals to CCHCS patients who are alleged victims or suspects of sexual violence, staff sexual misconduct, and sexual harassment consistent with its duties under CDCR PREA policy. Health care staff are responsible to provide emergency care until the alleged victim or suspect can be sent to the county Sexual Assault Response Team (SART) facility for forensic clinical evaluation and treatment, and/or hospital for medical stabilization, determine if the injuries sustained by the alleged victim qualify as serious bodily injury as defined in the CCR and report the injuries. The policy further states that health care must ensure a follow-up testing for pregnancy, sexually transmitted infections/diseases (STI/STD), and HIV, as indicated; and provide follow-up clinical care as indicated. Interviews with medical, mental health staff and inmates who reported sexual abuse confirmed this practice.</p> <p>115.82(b) - Interviews with custody and non-custody staff confirmed that staff are aware of the preliminary steps to protect the victim and to report the incident to medical and mental health in the event a report of sexual abuse is made.</p> <p>115.82(c) - CDCR DOM, Section 54040.10, Return to Triage and Treatment Area states that upon return of the victim from the SART/SANE Exam one of the processes are that the offender, if appropriate, shall be given educational materials to provide information related to the medical and mental health conditions which may have resulted after a sexual violence/staff sexual misconduct incident.</p> <p>115.82(d) - CCHCS Volume 1. Chapter 10 indicates that there will be no copayment charge to the inmate if the health care service(s) are to be considered treatment services relating to sexual abuse or assault. Interviews with medical staff and inmates who reported sexual abuse confirmed that there is no copayment charge to the inmate.</p> <p>A review of medical and mental health documentation and referrals contained in SATF's PREA Investigative files verified that CDCR and SATF have proper policies and procedures in place and confirms practice as such.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.8.3 - Medical Services Responsibilities</li> <li>2. Section 54040.10 - Return to Triage and Treatment Area</li> </ol> </li> <li>3. California Correctional Health Care Services (CCHCS) <ol style="list-style-type: none"> <li>1. Volume 1, Governance and Administration, Chapter 10 - Copayment Program Policy</li> <li>2. Volume 1, Governance and Administration, Chapter 16 - PREA Procedures</li> <li>3. Volume 4, Medical Services, Chapter 12 - Emergency Medical Responses</li> </ol> </li> <li>4. Interviews with SATF Medical and Mental Health Staff, Custody and Non-Custody Staff First Responders and Inmates who reported sexual abuse</li> </ol>
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115.83	<p><b>Ongoing medical and mental health care for sexual abuse victims and abusers</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.83(a) - (f) - CCHCS Volume 1, Chapter 16 and CDCR DOM, Section 54040.10, outlines the procedures and responsibilities of CCHCS and CDCR to provide medical and mental health evaluations, treatment, and follow-up services to all inmates who have been victims of sexual abuse in any institution. CDCR provides follow-up medical and mental health services to include treatment plans and when necessary referrals for continued care when transferred or placed in other facilities. Further, this includes follow-up testing for sexually transmitted infections/diseases (STI/STD), and HIV. Interviews with medical, mental health staff and inmates who reported sexual abuse confirm that is in practice at SATF.</p> <p>SATF is a male facility, therefore 115.83(d) and 115.83(e) are not applicable. CDCR agency policy does states that victims of vaginal penetration are offered pregnancy tests among other STD testing, treatment, and relevant information.</p> <p>115.83(g) - CCHCS Volume 1, Chapter 10 indicates that there will be no copayment charge to the inmate if the health care service(s) are to be considered treatment services relating to sexual abuse or assault. Interviews with medical staff and inmates who reported sexual abuse confirmed that there is no copayment charge to the inmate. The "no copayment" is not conditional upon cooperating with any investigation.</p> <p>115.83(h) - CDCR DOM, Section 54040.11 states that all prisons shall attempt to conduct a mental health evaluation of all known inmate on inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. Health care procedures to reflect the obligation of staff to complete a Mental Health referral form when there is an inmate suspect in a PREA sexual abuse incident. This referral triggers an emergent or urgent mental health assessment immediately or within 5 days, which is well in advance of the standards 60-day requirement. The 30-day Institutional PREA Review Committee (IPRC), which functions as the sexual abuse incident review is a checks and balance for medical and mental staff of the identity of any inmate suspects to facilitate the mental health evaluation. Interviews with mental health staff confirmed that referrals for alleged perpetrators of sexual abuse are done and that the mental health evaluation conducted as with any other inmate.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.10 - Return to Triage and Treatment Area</li> <li>2. Section 54040.11</li> </ol> </li> <li>3. CCHCS Volume 1, Governance and Administration <ol style="list-style-type: none"> <li>1. Chapter 10 - Copayment Program Policy</li> <li>2. Chapter 16 - PREA Procedures</li> </ol> </li> <li>4. Interviews with SATF Medical and Mental Health Staff and Inmates who reported sexual abuse</li> </ol>
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115.86	<b>Sexual abuse incident reviews</b>
	<p data-bbox="240 174 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="240 236 443 264"><b>Auditor Discussion</b></p> <p data-bbox="240 298 1423 459">115.86(a) - (b) - CDCR DOM, Section 54040.17, Institutional PREA Review Committee (IPRC) requires that the Hiring Authority conduct an incident review of every sexual violence or staff sexual misconduct allegation, including allegations that have not been substantiated. A review is not required for allegations that have been determined to be unfounded. Further, it requires that the facility PREA Compliance Manager normally schedule these PREA incidents for review by the Institutional PREA Review Committee (IPRC) within 60 days of the date of discovery.</p> <p data-bbox="240 491 1423 716">Substandard 115.86 (a) required corrective action. Part of the DOJ PREA Standard 115.86 (a) states, that the facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded. The auditor reviewed forty-four (44) PREA investigations which sixteen (16) of them were sexual abuse allegations with unsubstantiated findings. The review discovered that half of those (16) cases for sexual abuse reviews were completed prior to the closing of the investigation without another being conducted at the conclusion of the investigation. SATF shall ensure incident reviews of every sexual violence or staff sexual misconduct allegation, excluding those with unfounded findings at the conclusion of the investigation.</p> <p data-bbox="240 748 1423 1212">During the corrective action period SATF provided additional clarification as to how their Institutional PREA Review Committee (IPRC) was being conducted. In their monthly Incident Review Committee meetings, they reviewed multiple types of incidents, to include the PREA sexual abuse reviews (IPRC) for the previous month whether the investigation was completed or not. This resulted in conducting and documenting the sexual abuse reviews prior to the closure of a case and not necessarily conduct another at the closure of the case. The corrective action that SATF took were to include the Local Designated Investigator (LDI) Supervisors in their Investigative Services Unit (ISU) along with the PCM and Assistant PCM to ensure that the sexual abuse reviews are being conducted at the completion of the investigation. The PCM, Assistant PCM and LDI Supervisors were given training on the process of the sexual abuse review process and to ensure adherence to the process is done. The sexual abuse reviews (IPRC) will be held every month, on the last Friday of the month where all PREA cases to include any cases which were closed during that month are reviewed during the monthly IPRC's. Cases which are initiated during the month and closed in the following months, will be reviewed by the IPRC monthly until closed, once closed the case will be reviewed at a final IPRC review and documented properly. SATF submitted documentation of the training and sexual abuse reviews for closed investigations during the corrective action period. After review of the documentation this corrective measure was removed and now is compliant.</p> <p data-bbox="240 1244 1423 1405">115.86(c) - (d) - The Institutional PREA Review Committee (IPRC) is the designated sexual abuse incident review team for SATF. The committee consist of institutional staff chaired by the respective Institution Head tasked with reviewing these PREA related incidents. The IPRC generally consist of the Hiring Authority or designee, PREA Compliance Manager, In-Service Training Manager, Health Care Clinician, Mental Health Clinician, and Incident Commander or ISU staff. When conducting a review, the IPRC must consider:</p> <ol data-bbox="276 1460 1423 1924" style="list-style-type: none"> <li>1. Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;</li> <li>2. Whether the incident or allegation was motivated by race; ethnicity; gender identity; LBGTI status, or perceived status; gang affiliation; or was it motivated or otherwise caused by other group dynamics at the facility</li> <li>3. Examines the area in the facility where the incident occurred to assess whether physical barriers in the area may enable abuse;</li> <li>4. If the staffing plan was not complied with and this fact shall be documented in the review as a part of the corrective action plan;</li> <li>5. Assess the adequacy of staffing levels in that area during different shifts;</li> <li>6. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff;</li> <li>7. Prepare a report of the IPRC findings and any recommendations for improvement to correct any deficiencies;</li> <li>8. Determine a plan to correct findings and document in the report;</li> <li>9. Document implementation of the Action Plan or reasons for not doing so, and;</li> <li>10. Submit the report to the Hiring Authority for final review.</li> </ol> <p data-bbox="240 1956 1423 2048">The findings of the review are documented as a formal written report and shall be submitted to the Hiring Authority. The final report shall be provided to the Associate Director and the CDCR PREA Coordinator. Completed IPRC forms and IPRC meeting minutes related to that case are stored in the PREA investigation file.</p> <p data-bbox="240 2080 1423 2172">115.86 (c) required corrective action. The DOJ standard states that the review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. CDCR DOM, Section 54040.17 states that the IPRC includes a Health Care Clinician and Mental Health Clinician. The auditor reviewed forty-four</p>

(44) PREA investigations which sixteen (16) of them were sexual abuse allegations with unsubstantiated findings. All IPRC's conducted for the sexual abuse allegations did not include any medical or mental health practitioners.

In Conjunction with the corrective action in 115.86 (a) and in line with CDCR Policy 54040.17, SATF implemented the standard committee participants for the IPRC's which included the proper required staff. SATF submitted IPRC documents for closed sexual abuse investigations throughout the corrective action period and has demonstrated compliance with this substandard.

115.86 (e) - Interviews with the SATF Warden verified that the recommendations on the sexual abuse reviews are highly considered and are implemented where possible. Recommendations that are out of her specified authority for implementation is forwarded for further review by those who would have such authority. The auditor reviewed SATF's Institutional PREA Review Committee's reports which confirmed the policy and practice. The facility implements the recommendations for improvement and documents the reasons for not doing so.

Interviews, Policy, Documentation and Other Evidence Reviewed:

1. SATF Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations manual (DOM), Chapter 5
  1. Section 54040.17 - Institutional PREA Review Committee
3. SATF PREA Investigative Files
4. Interviews with the SATF Warden and PREA Compliance Manager

<b>115.87</b>	<b>Data collection</b>
	<p data-bbox="244 179 715 202"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="244 238 443 261"><b>Auditor Discussion</b></p> <p data-bbox="244 298 1409 390">115.87(a) - (f) - CDCR DOM, section 54040.17, Institutional PREA Review Committee states that the agency is required to review data collected pursuant to standard §115.87 to assess and improve the effectiveness of its sexual violence prevention, detection, and response policies, practices, and training.</p> <p data-bbox="244 427 1409 851">CDCR DOM, Section 54040.19, outlines CDCR's procedure to collect accurate, uniform data for every allegation of sexual abuse at the facilities under its direct control. CDCR uses the Survey of Sexual Victimization Form (SSV-IA) as a standardized instrument with a set of definitions for all allegations of sexual abuse and misconduct incidents. CDCR DOM Section 54040.19 further states that the Office of Internal Affairs maintains records of investigations into allegations of staff/offender sexual misconduct, and will report by case number, the type of sexual misconduct, subcategory; whether the allegations were sustained; and whether a DA referral was made. CDCR shall aggregate the incident-based data at least annually. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the SSV conducted by the Federal Department of Justice. CDCR shall maintain, review, and collect data as needed from all available documents including incident reports, investigation files, and PREA incident reviews. CDCR shall also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of inmates. Upon request, the agency shall provide all such data from the previous calendar year to the federal Department of Justice no later than June 30. The most recent annual report available is for Calendar Year 2019. The annual report can be found at: <a href="https://www.cdcr.ca.gov/prea/prea/reports-audits/">https://www.cdcr.ca.gov/prea/prea/reports-audits/</a></p> <p data-bbox="244 863 1409 920">This report includes 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.</p> <p data-bbox="244 955 874 978">Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol data-bbox="276 1069 959 1322" style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5       <ol style="list-style-type: none"> <li>1. Section 54040.17 - Institutional PREA Review Committee</li> <li>2. Section 54040.19 - Tracking - Data Collection and Monitoring</li> <li>3. Section 54040.20 - PREA Data Storage and Destruction</li> </ol> </li> <li>3. Survey of Sexual Victimization Form (SSV-IA)</li> <li>4. CDCR PREA Annual Report - Calendar Year 2019</li> <li>5. Interviews with CDCR PREA Coordinator</li> </ol>

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.88(a) - CDCR DOM, Section 54040.17, requires CDCR to review data collected pursuant to standard §115.87 to assess and improve the effectiveness of its sexual violence prevention, detection, and response policies, practices, and training. On an annual basis the Department PREA Coordinator will forward to each institution, a data collection tool which will be utilized by the institutional PREA Compliance Manager to summarize information gathered through the institutional PREA committee. The departmental PREA Coordinator will prepare an annual report of the findings and corrective actions for each facility, as well as the agency as a whole. The final report will be routed through the chain of command to the agency Secretary for review and approval, once it is approved the report will be forwarded to the Office of Public and Employee Communication for placement on the CDCR Website.</p> <p>The completed SSV-IA forms were reviewed and interviews with the CDCR Agency Head/Designee, CDCR PREA Coordinator, and SATF's PREA Compliance Manager all confirmed that the facility collects data, aggregates data, and analyzes the information to assist them in creating a safer environment for the inmates and staff. These interviews revealed that the agency collects and uses aggregated data to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training.</p> <p>115.88(b)- (d)- CDCR DOM, Section 54040.19, Tracking - Data Collection and Monitoring states that CDCR shall aggregate the incident-based data at least annually, reports shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual violence and staff sexual misconduct. The report shall be approved by the CDCR Secretary and made available to the public through the CDCR website. Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility; however, the report must indicate the nature of the material redacted. CDCR's Agency Head/Designee stated that she approves the annual reports and the CDCR PREA Coordinator confirmed that personal identifiers are redacted from reports.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.17 - Institutional PREA Review Committee</li> <li>2. Section 54040.19 - Tracking - Data Collection and Monitoring</li> </ol> </li> <li>3. CDCR PREA Annual Report - Calendar Year 2019</li> <li>4. Interviews with CDCR Agency Head/Designee, CDCR PREA Coordinator and the SATF PREA Compliance Manager</li> </ol>

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.89(a) - (d) - CDCR DOM, Section 54040.20, PREA Data Storage and Destruction requires that CDCR ensures that PREA data collected are securely retained. All aggregated PREA data, from facilities under CDCR's direct control and private facilities with which it contracts, shall be made readily available to the public at least annually through the CDCR website. Before making aggregated PREA data publicly available, all personal identifiers shall be removed. PREA data collected shall be maintained for 10 years after the date of the initial collection. CDCR PREA Coordinator as well as a review of CDCR Annual PREA Reports confirmed that all personal identifiers are redacted.</p> <p>Interviews, Policy, Documentation and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. SATF Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. CDCR Policy - Department Operations manual (DOM), Chapter 5 <ol style="list-style-type: none"> <li>1. Section 54040.20 - PREA Data Storage and Destruction</li> </ol> </li> <li>3. CDCR PRA Annual Report - Calendar Year 2019</li> <li>4. CDCR Agency website (PREA)</li> <li>5. Interviews with CDCR Agency Head/Designee, CDCR PREA Coordinator, SATF PREA Compliance Manager</li> </ol>

115.401	Frequency and scope of audits
	<p data-bbox="242 147 715 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 210 443 237"><b>Auditor Discussion</b></p> <p data-bbox="242 273 1430 564">CDCR has in previous years submitted Governor Assurances of Intention to Adopt and Achieve Full Compliance with the standards. CDCR is currently working to ensure that one third of their facilities are audited in the second year of the three-year audit cycle. This commitment by CDCR was reiterated and confirmed during interviews with the Agency Head/Designee and PREA Coordinator. It should be noted that due to concerns relating to the Novel Coronavirus (Covid-19), any housing units flagged as "isolation" or "quarantine" were not physically toured but the auditor was provided photos of the areas requested for review. While onsite at SATF, the audit team was provided with access to, and the ability to observe, all other areas of the facility. The auditor received copies of all requested documents and was permitted to conduct private interviews with staff and inmates with physical distance with health and safety precautions. Inmates and staff were permitted to send confidential correspondence to the auditor. This standard is rated as a "meets standard".</p>

115.403	Audit contents and findings
	<p data-bbox="242 152 715 174"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="242 215 443 237"><b>Auditor Discussion</b></p> <p data-bbox="242 277 1410 367">CDCR has submitted Governor Assurances and California is working to ensure that their facilities are audited at least once during the three-year cycle by a DOJ Certified Auditor. The completed CDCR PREA Audit reports are located the CDCR website at <a href="https://www.cdcr.ca.gov/PREA/Reports-Audits.html">https://www.cdcr.ca.gov/PREA/Reports-Audits.html</a>.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	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
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</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

<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

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

<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or 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
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

<b>115.42 (d)</b>	<b>Use of screening information</b>	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

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

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually 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
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant 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
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes