## **PREA Facility Audit Report: Final**

Name of Facility: California City Correctional Facility

Facility Type: Prison / Jail

**Date Interim Report Submitted:** 05/17/2022 **Date Final Report Submitted:** 07/24/2022

Auditor Certification			
The contents of this report are accurate to the best of my knowledge.			
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		V	
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.		Z	
Auditor Full Name as Signed: Jillian Shane Date of Signature: 07/24/2022			

AUDITOR INFORMATION	
Auditor name:	Shane, Jillian
Email:	jillianshane@sbcglobal.net
Start Date of On-Site Audit:	02/22/2022
End Date of On-Site Audit:	02/23/2022

FACILITY INFORMATION		
Facility name:	California City Correctional Facility	
Facility physical address:	22844 Virginia Boulevard, California City, California - 93505	
Facility mailing address:		

Primary Contact		
Name:	Randy Nicholas	
Email Address:	randy.nicholas@cdcr.ca.gov	
Telephone Number:	760-246-7600 Extens	

Warden/Jail Administrator/Sheriff/Director		
Name: Leanna Lundy		
Email Address:	Leanna.Lundy@cdcr.ca.gov	
Telephone Number:	(760) 246-7600	

Facility PREA Compliance Manager		
Name: Randy Nicholas		
Email Address:	randy.nicholas@cdcr.ca.gov	
Telephone Number:	O: (760) 246-7600 x7042	

Facility Characteristics		
Designed facility capacity:	2550	
Current population of facility:	2142	
Average daily population for the past 12 months:	1900	
Has the facility been over capacity at any point in the past 12 months?	No	
Which population(s) does the facility hold?	Males	
Age range of population:	18-99	
Facility security levels/inmate custody levels:	Level I to Level II / Maximum custody for restricted housing inmates	
Does the facility hold youthful inmates?	No	
Number of staff currently employed at the facility who may have contact with inmates:	460	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	24	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	95	

AGENCY INFORMATION		
Name of agency:	California Department of Corrections and Rehabilitation	
Governing authority or parent agency (if applicable):		
Physical Address:	1515 S St, Sacramento, California - 95811	
Mailing Address:		
Telephone number:	9163246688	

Agency Chief Executive Officer Information:		
Name: Dr Muhammad Nasir		
Email Address:	muhammad.nasir@cdcr.ca.gov	
Telephone Number:	760 - 348 - 7000	

Agency-Wide PREA Coordinator Information			
Name:	Matthew Rustad	Email Address:	matthew.rustad@cdcr.ca.gov

Name:	Matthew Rustad	Email Address:	matthew.rustad@cdcr.ca.gov
SUMMARY OF AUDIT FINDIN	IGS		
The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.			
Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.			
	Number of stand	dards exceeded:	
0			
Number of standards met:			
45			
Number of standards not met:			
0			

POST-AUDIT REPORTING INFORMATION			
GENERAL AUDIT INFORMATION			
On-site Audit Dates			
1. Start date of the onsite portion of the audit:	2022-02-22		
2. End date of the onsite portion of the audit:	2022-02-23		
Outreach			
10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	• Yes • No		
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Rape Crisis Center in MOU		
AUDITED FACILITY INFORMATION			
14. Designated facility capacity:	2550		
15. Average daily population for the past 12 months:	1900		
16. Number of inmate/resident/detainee housing units:	10		
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<ul> <li>Yes</li> <li>No</li> <li>Not Applicable for the facility type audited (i.e., Community</li> <li>Confinement Facility or Juvenile Facility)</li> </ul>		
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit			
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit			
36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1994		
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1		
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	4		
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	4		

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	2		
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	12		
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	2		
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0		
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	1		
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	3		
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	2		
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.		
Staff, Volunteers, and Contractors Population Characteris	stics on Day One of the Onsite Portion of the Audit		
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	455		
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	95		
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	24		
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.		
INTERVIEWS			
Inmate/Resident/Detainee Interviews			
Random Inmate/Resident/Detainee Interviews			

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	34
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<ul> <li>✓ Age</li> <li>✓ Race</li> <li>✓ Ethnicity (e.g., Hispanic, Non-Hispanic)</li> <li>✓ Length of time in the facility</li> <li>✓ Housing assignment</li> <li>✓ Gender</li> <li>☐ Other</li> <li>☐ None</li> </ul>
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Rosters included intake date, housing, race, age. Selections were random based on all factors provided.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	• Yes • No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	11
As stated in the PREA Auditor Handbook, the breakdown of targeted i cross-section of inmates/residents/detainees who are the most vulners questions regarding targeted inmate/resident/detainee interviews belo satisfy multiple targeted interview requirements. These questions are a inmate/resident/detainee protocols. For example, if an auditor interview housing due to risk of sexual victimization, and disclosed prior sexual those questions. Therefore, in most cases, the sum of all the following categories will exceed the total number of targeted inmates/residents/enot applicable in the audited facility, enter "0".	able to sexual abuse and sexual harassment. When completing w, remember that an interview with one inmate/resident/detainee may asking about the number of interviews conducted using the targeted ws an inmate who has a physical disability, is being held in segregated victimization, that interview would be included in the totals for each of responses to the targeted inmate/resident/detainee interview
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	3
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	3

62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	2
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	2
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	3
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<ul> <li>✓ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</li> <li>☐ The inmates/residents/detainees in this targeted category declined to be interviewed.</li> </ul>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Transgender and intersex inmates are sent to different facilities as per CDRC DOM.
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<ul> <li>✓ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</li> <li>☐ The inmates/residents/detainees in this targeted category declined to be interviewed.</li> </ul>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	there is a DOM which states that transgender and intersex inmates would not be typically housed at this facility. Staff interviewed cooroborated. In addition, inmates were asked and files reviewed.
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	2

68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	3
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<ul> <li>✓ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</li> <li>☐ The inmates/residents/detainees in this targeted category declined to be interviewed.</li> </ul>
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	2
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The two were by accident, the inmates advised us as such and we looked up older investigations. They were not originally targeted.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	22
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<ul> <li>✓ Length of tenure in the facility</li> <li>✓ Shift assignment</li> <li>✓ Work assignment</li> <li>✓ Rank (or equivalent)</li> <li>☐ Other (e.g., gender, race, ethnicity, languages spoken)</li> <li>☐ None</li> </ul>
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<ul><li><b>⊙</b> Yes</li><li><b>⊙</b> No</li></ul>
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the spapply to an interview with a single staff member and that information v	pecialized staff duties. Therefore, more than one interview protocol may would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	39
76. Were you able to interview the Agency Head?	C No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	© Yes
78. Were you able to interview the PREA Coordinator?	C No
79. Were you able to interview the PREA Compliance Manager?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</li> </ul>

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)	<ul> <li>✓ Agency contract administrator</li> <li>✓ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</li> <li>☐ Line staff who supervise youthful inmates (if applicable)</li> <li>☐ Education and program staff who work with youthful inmates (if applicable)</li> <li>✓ Medical staff</li> <li>✓ Mental health staff</li> <li>✓ Non-medical staff involved in cross-gender strip or visual searches</li> <li>✓ Administrative (human resources) staff</li> <li>✓ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</li> <li>✓ Investigative staff responsible for conducting administrative investigations</li> <li>✓ Investigative staff responsible for conducting criminal investigations</li> <li>✓ Staff who perform screening for risk of victimization and abusiveness</li> <li>✓ Staff who supervise inmates in segregated housing/residents in isolation</li> <li>✓ Staff on the sexual abuse incident review team</li> <li>✓ Designated staff member charged with monitoring retaliation</li> <li>✓ First responders, both security and non-security staff</li> <li>✓ Intake staff</li> <li>✓ Other</li> </ul>
If "Other," provide additional specialized staff roles interviewed:	Mailroom, Food Service, Grievance Officer, Training Director
81. Did you interview VOLUNTEERS who may have contact	<b>⊙</b> Yes
with inmates/residents/detainees in this facility?	C No
a. Enter the total number of VOLUNTEERS who were interviewed:	2

b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)  82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<ul> <li>✓ Education/programming</li> <li>☐ Medical/dental</li> <li>☐ Mental health/counseling</li> <li>✓ Religious</li> <li>☐ Other</li> <li>✓ Yes</li> <li>C No</li> </ul>
a. Enter the total number of CONTRACTORS who were interviewed:	23
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<ul> <li>□ Security/detention</li> <li>□ Education/programming</li> <li>✓ Medical/dental</li> <li>□ Food service</li> <li>□ Maintenance/construction</li> <li>□ Other</li> </ul>
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.
SITE REVIEW AND DOCUMENTA	ATION SAMPLING
Site Review	
PREA Standard 115.401 (h) states, "The auditor shall have access to, the requirements in this Standard, the site review portion of the onsite site review is not a casual tour of the facility. It is an active, inquiring p whether, and the extent to which, the audited facility's practices demonthe site review, you must document your tests of critical functions, impidentified with facility practices. The information you collect through the your compliance determinations and will be needed to complete your	audit must include a thorough examination of the entire facility. The rocess that includes talking with staff and inmates to determine astrate compliance with the Standards. Note: As you are conducting ortant information gathered through observations, and any issues a site review is a crucial part of the evidence you will analyze as part of
84. Did you have access to all areas of the facility?	⊙ Yes
	C No
Was the site review an active, inquiring process that incl	uded the following:
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	© Yes

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	• Yes • No
88. Informal conversations with staff during the site review (encouraged, not required)?	© Yes
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contract supervisory rounds logs; risk screening and intake processing records auditors must self-select for review a representative sample of each ty	; inmate education records; medical files; and investigative files-
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	© Yes
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
SEYLIAL ARIISE AND SEYLIAL H	IADASSMENT ALLEGATIONS

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

## Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on- inmate sexual abuse	2	2	2	2
Staff-on-inmate sexual abuse	2	2	2	2
Total	4	4	4	4

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	3	0	3	0
Staff-on-inmate sexual harassment	2	0	2	0
Total	5	0	5	0

## **Sexual Abuse and Sexual Harassment Investigation Outcomes**

#### **Sexual Abuse Investigation Outcomes**

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	1	1	0	0	0
Staff-on-inmate sexua abuse	0	1	0	0	0
Total	1	2	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	0	1	0
Staff-on-inmate sexual abuse	0	1	0	1
Total	1	1	1	1

#### **Sexual Harassment Investigation Outcomes**

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	1	1	1	0
Staff-on-inmate sexual harassment	0	1	1	0
Total	1	1	1	0

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

## Sexual Abuse Investigation Files Selected for Review 5 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled: 99. Did your selection of SEXUAL ABUSE investigation files Yes include a cross-section of criminal and/or administrative investigations by findings/outcomes? C No NA (NA if you were unable to review any sexual abuse investigation files) Inmate-on-inmate sexual abuse investigation files 2 100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:

101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?  102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</li> <li>Yes</li> </ul>		
investigation files include administrative investigations?	© No  NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)		
Staff-on-inmate sexual abuse investigation files			
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3		
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<ul><li>Yes</li><li>No</li><li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li></ul>		
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<ul><li>Yes</li><li>No</li><li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li></ul>		
Sexual Harassment Investigation Files Selected for Revie	w		
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2		
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<ul><li>Yes</li><li>No</li><li>NA (NA if you were unable to review any sexual harassment investigation files)</li></ul>		
Inmate-on-inmate sexual harassment investigation files			
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2		

109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<ul><li>Yes</li><li>No</li><li>NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</li></ul>
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</li> </ul>
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</li> </ul>
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</li> </ul>
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	• Yes • No
a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:	1
Non-certified Support Staff	

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	• Yes • No		
a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:	1		
AUDITING ARRANGEMENTS AND COMPENSATION			
121. Who paid you to conduct this audit?	The audited facility or its parent agency		
	My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)		
	© A third-party auditing entity (e.g., accreditation body, consulting firm)		
	Other		

#### **Standards**

#### **Auditor Overall Determination Definitions**

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

#### **Auditor Discussion Instructions**

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

#### 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

In the Pre-Audit Questionnaire (PAQ), the facility states that the agency has a written policy mandating zero tolerance for all forms of sexual abuse and sexual harassment. The facility further indicated that the policy outlines how it will implement the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment.

#### Provision (a):

CDCR has a comprehensive PREA Policy, contained within the statewide Department Operations Manual. CDCR DOM, Chapter 5, Article 44, §54040.1 Policy Purpose and Zero Tolerance states, "CDCR shall maintain a zero tolerance for sexual violence, staff sexual misconduct and sexual harassment in its institutions, community correctional facilities, conservation camps and for all offenders under its jurisdiction." In addition, CDCR DOM, Chapter 5, Article 44, §54040.2 Purpose states, "the purpose of this policy is to ensure compliance with Public Law 108-79, the Prison Rape Elimination Act of 2003 (PREA), California Assembly Bill 550 (Chapter 303, Statues of 2005), the Sexual Abuse in Detention Elimination Act and 28 Code of Federal Regulations, Part 115, National Standards to prevent, Detect, and Respond to Prison Rape. It will provide guidelines for the prevention, detection, response, investigation and tracking of sexual violence, staff sexual misconduct, and sexual harassment against CDCR offenders. All sexual violence, staff sexual misconduct, and sexual harassment is strictly prohibited."

The auditor was provided with and reviewed a CDCR PREA Implementation Memo dated August 13, 2015. The memo informs all CDCR Warden's and PREA Compliance Managers (PCM) that the PREA policy has been approved and published. Each facility was directed to immediately begin PREA implementation.

CDCR PREA Policy outlines how the agency will implement its approach in preventing, detecting and responding to sexual abuse and sexual harassment within all of its facilities. Prevention strategies include but are not limited to:

- Designation of a department wide PREA Coordinator
- Appointment of PREA Compliance Managers in all facilities
- · Staff, Contractor and Volunteer raining
- · Offender education
- Security rounds

Detection, notification and reporting strategies include but are not limited to:

- Offender Screening for appropriate placement
- · Providing multiple ways for offenders and staff to report sexual abuse and sexual harassment
- · Third party reporting
- · Referral for mental health screening

Response strategies include but are not limited to:

- · Initial contact with victims
- · Supervisor responsibilities
- · Medical/mental health responsibilities
- · Crime scene preservation
- Providing Victim Advocate
- Forensic Medical Examinations
- Investigation
- Prosecution

Inmates are provided the Inmate Orientation Manual at intake, which was observed by the audit team, continuing information on zero-tolerance and how to report. In addition, throughout the facility tour, the audit team observed PREA signage detailing PREA information.

#### Provision (b):

CDCR employs an upper level, agency wide PREA Coordinator. The auditor reviewed the PREA Coordinator Duty Statement, which states that the position is under the direct supervision of the Mission Correctional Administrator and is responsible for providing a safe, humane, secure environment, free from sexual misconduct in California State Prisons. The Duty Statement indicates that ninety-five (95) percent of the PREA Coordinator's time is devoted to PREA duties with five (5)

percent being other duties required or directed. Examples of the PREA Coordinator's duties include but are not limited to providing oversight and supervision of staff assigned to the PREA Unit, coordinate and maintain the development of the policy and procedure addressing PREA issues, coordinate, facilitate, monitor and/or conduct PREA training for all CDCR and contracted staff and review random sampling of the SSVIA submitted by staff for completeness. The PREA Coordinator oversees thirty-five (35) PREA Compliance Managers within the agency facilities. During an interview with the PC, she was extremely knowledgable and stated that she has the time and authority to oversee PREA functions statewide.

The auditor reviewed the CDCR Organizational chart dated May 2021 and signed by the Secretary of Corrections. Although the PREA Coordinator position is not included in the organizational chart, The CDCR Director of Adult Prisons, confirmed the position is an upper level, agency wide position. The CDCR PREA Coordinator confirmed she has time and authority to effectively oversee the agency's efforts in PREA Compliance. She was extremely knowledgeable regarding the agency's PREA policy and the agency efforts to comply with all the standards. In addition, she reported she communicates at least once a month with the PREA Compliance Managers and provides training, including investigation training.

#### Provision (c):

The auditor reviewed a Statewide PREA Compliance Manager list dated October 6, 2021, which indicates that there are thirty-five facilities within CDCR. All facilities have a designated PCM. Each PCM is either an Associate Warden or a Captain, which are higher-level facility positions. The Duty Statement describes the some of the duties of the PCM, which includes receiving notification for all allegations of PREA incidents, provide reports to the headquarters and act as a member of the PREA Institutional Review Committee.

CAC has a designated PREA Compliance Manager. At CAC, the PREA Compliance Manager is an Associate Warden who reports directly to the Warden of the facility. During an interview with the PCM, he indicated that he had the time and authority to conduct his duties associated with this standard and implementation and monitoring of PREA throughout the facility.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard requiring a zero tolerance policy, designation of a PREA Coordinator and PREA Compliance Managers. No corrective action is required.

#### The auditor reviewed, analyzed, and retained the following evidence related to this standard:

- CAC Pre-Audit Questionnaire (PAQ)
- CDCR Department Operations Manual (DOM), Chapter 5, Article 44, §54040.2 Purpose
- CDCR DOM, Chapter 5, Article 44, §54040.1 Policy Purpose and Zero Tolerance
- CDCR DOM, Chapter 5, Article 44, §54040.3 Definitions
- CDCR DOM, Chapter 5, Article 44, §54040.15 Offender Discipline
- California Code of Regulations (CCR), Title 15, §3401.5 Staff Sexual Misconduct
- CDCR PREA Implementation Memo, 2015
- CDCR PREA Coordinator Duty Statement
- CDCR Agency Organization Work Chart
- CDCR Statewide PREA Compliance Manager (PCM) List, October 6, 2021
- CDCR PCM Duty Statement Clause
- Interviews: Director of Adult Prisons, CDCR PREA Coordinator and CAC PREA Compliance Manager

#### 115.12 Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that the agency has not entered into or renewed contracts for the confinement of inmates after August 12, 2012 or since their last PREA Audit.

#### Provision (a) & (b):

The auditor reviewed the CAC Final Audit Report dated April 18, 2018. The auditor did conclude that the facility was compliant with all requirements of this standard. In addition, the auditor has previously audited other facilities operated by CDCR and has reviewed all contracts with private entities that confine inmates. The contracts do contain language requiring the facilities to comply with all PREA standards and CDCR monitors the compliance. CDCR has not renewed or entered any new contracts for the confinement of inmates since their last PREA Audit.

The previous auditor did conclude that the facility was compliant with with all requirements of this standard. Furthermore, the auditor reviewed the CDCR Shell Bid Agreement-Special Terms and Conditions which is required to be included in any revised or renewed contracts. The Special Terms and Conditions, includes a Prison Rape Elimination Policy section. All contractors are required to ensure compliance with the agency's PREA Policy. In addition, the contract language allows for CDCR staff and outside audit personnel (who also conduct PREA audits of the state prisons) to conduct audits to ensure compliance with the standards.

CDCR has fourteen (14) contracts with Community Confinement Facilities. There are eight (8) facilities, participating in the Male Community Reentry Program (MCRP). This is a voluntary program for eligible males who have two years or less of their prison sentence left to serve. This allows eligible people committed to state prison to serve the end of their sentences in the community, in lieu of confinement in state prison. MCRP is facilitated by the Division of Rehabilitative Programs (DRP). The auditor reviewed all eight (8) contracts, listed below. Each contract does contain the requirement that each entity adopt and comply with the PREA Standards.

- C5609175-CDCR/Butte County Probation Department, executed November 1, 2019
- C5609226-CDCR/Turning Point of Central California, INC, executed November 1, 2019
- C5609507-CDCR/Center Point, INC, executed November 19, 2021 (this site is not active at the time of this audit)
- C5609238-CDCR/Epidaurus DBA Amity Foundation, executed December 19, 2019 (this site is not active at the time
  of this audit)
- C5609258-CDCR/Community Education Centers, INC, executed November 1, 2019
- C5609223-CDCR/Healthright 360, executed November 1, 2019
- C5609181-CDCR/Epidaurus DBA Amity Foundation, executed November 1, 2019
- C5609182-CDCR/Core Civic, INC, executed November 19, 2019

In addition, there are six (6) contracts with Community Confinement Facilities, participating in the Custody to Community Transitional Reentry Program (CCTRP). This program allows eligible offenders with serious and violent crimes committed to state prison to serve their sentence in the community at a CCTRP as designated by CDCR, in lieu of confinement in state prison and at the discretion of the Secretary. The CCTRP will provide a range of rehabilitative services that assist with alcohol and drug recovery, employment, education, housing, family reunification and social support. The auditor reviewed all six (6) contracts, listed below. Each contract does contain the requirement that each entity adopt and comply with the PREA Standards.

- C5609005-CDCR/WestCare California, INC, executed July 1, 2020
- C5607981-CDCR/WestCare California, INC, executed July 1, 2018
- C5609916-CDCR/Saint John's Program for Real Change, executed July 1, 2021
- C5607863-CDCR/Los Angeles Centers for Alcohol and Drug Abuse, executed July 1, 2018 5. C5609006-CDCR/Mental Health Systems, INC, executed July 1, 2020
- C5608846-CDCR/Epidaurus DBA Amity Foundation, executed September 24, 2019

Each CDCR contracted facility has CDCR staff onsite for over site as a position of Correctional Counselor III to monitor the progress and operations of the contractor

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with

this standard and has required contract facilities to adopt and comply with the PREA standards.

The auditor reviewed, analyzed, and retained the following evidence related to this standard:

- 1. CAC Pre-Audit Questionnaire
- 2. CAC PREA Final Audit Report dated April 18, 2018
- 3. CDCR Shell Bid Agreement-Special Terms and Conditions
- 4. Contracts listed herein (14 contracts)
- 5. Interview: CDCR PREA Coordinator

#### 115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that the agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect inmates against abuse. The facility is designed to include two thousand five hundred and fifty bed (2550) authorized beds. The average daily number of inmates in the past twelve months was nineteen hundred (1900).

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.18 (Institutional Staffing Plan) states, "CDCR shall ensure that each facility it operates develops, documents, and makes its best efforts to comply on a regular basis with a staffing plant that provides for adequate levels of staffing, and where applicable, video monitoring to protect offenders against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind spots" or areas where staff or inmate may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State, or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors."

CDCR policy requires the institutional PREA Compliance Manager and the Program Support Unit to assess, determine and document whether adjustments are need to the facility staffing plan whenever necessary, but no less frequent than once each year. The staffing plan is developed in consultation with the CDCR PREA Coordinator, CAC PREA Compliance Manager, and the Program Support Unit. The auditor reviewed the 2021 Staffing Plan and the Annual Data Collection Tool and Staffing Plan Review and confirmed the plan includes all eleven (11) elements listed above that is required by this provision. During discussions with the facility Warden, he confirmed the facility does have a documented Staffing Plan. He stated that the facility has limited video monitoring capabilities but believes the staffing levels are adequate.

During the site review, the auditor observed multiple areas within the facility, where blind spots were created due to the use of blinds and other window coverings in the inner office spaces. These areas were addressed with facility staff and fixed within two weeks of the audit team leaving the facility. Work orders and pictures were sent to the auditor to demonstrate that each of these areas was address.

#### Provision (b):

CDCR DOM Chapter 5, Article 44, §54040.18 states "In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the staffing plan through the Telestaff Program and Daily Activities Report. The Watch Commander is responsible for reporting and justifying all deviations from the approved staffing plan."

The facility Warden indicated there was no deviations from the staffing plan. Staff coverage is provided through the overtime in adhering to the staffing requirement. If deviations to the staffing plan would occur, they would be documented on the Daily Activities Report and forwarded to the facility PCM.

During an interview, the PCM stated that there have been no deviations to the staffing plan in the past few years.

#### Provision (c):

CDCR DOM Chapter 5, Article 44, §54040.17.1 states "Whenever necessary, but no less frequently than once each 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."

The auditor reviewed the the facility 2021 PREA Annual Data Collection Tool and Staffing Plan Review. The facility PCM, in consultation with the PREA Coordinator, reviews the staffing plan, annually to determine whether adjustments are need 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. The process was confirmed by the agency PREA Coordinator and the facility PREA Compliance Manager.

#### Provision (d):

CDCR DOM Chapter 5, Article 44, §54040.4 Security Rounds states "A custody supervisor assigned to each facility or unit

shall conduct weekly unscheduled security checks to identify and deter sexual violence, staff sexual misconduct, and sexual harassment of any kind. These security checks shall be documented in the Unit Logbook in red pen." In addition, the policy states "Staff is prohibited from alerting other staff members that these rounds are occurring, unless such announcement is related to the legitimate functions of the facility."

CDCR In-Service Training 11054378 states, "A custody supervisor assigned to each facility or unit shall conduct weekly unscheduled security checks on all watches, to identify and deter sexual violence, staff sexual misconduct, and sexual harassments of any kind. The security checks shall be documented in the unit logbook in red pen. The unit logbook shall indicate the date, time and location the security check was conducted."

During the site review, control logs were reviewed and found that intermediate to higher level supervisors conducted unannounced rounds. The rounds are documented in red ink. The auditor was able to distinguish these rounds from other rounds being completed at the facility and there did not appear to have a pattern on times or days that the rounds were being completed.

During the on-site visit, the auditor noticed cameras in locations throughout the facility. In addition, reviewed all cameras and angles on the computer, as they are reviewed by staff. At the time of the on-site visit, three (3) cameras were down, as they were being repaired, but the angles were covered by additional cameras and staff supervision. The work orders for the parts were reviewed to repair these cameras. There were 291 cameras in the facility.

In addition, control logs were reviewed and demonstrated that intermediate to high level staff conduct unannounced rounds. The auditor was able to distinguish these rounds from other rounds being completed at the facility and there did not appear to have a pattern on times or days that the rounds were being completed. Interviews with intermediate or higher level staff indicate that they conducting unannounced rounds in all areas of the facility. Staff confirmed the purpose of these rounds is to identify and deter prohibited behaviors. Through staff interviews of multiple levels of staff, it was confirmed that staff do not alert other staff that the unannounced rounds are occurring.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard and has required contract facilities to adopt and comply with the PREA standards.

The auditor reviewed, analyzed, and retained the following evidence related to this standard:

- CAC Pre-Audit Questionnaire
- CDCR DOM, Chapter 5, Article 44, §54040.4 Security Rounds
- CDCR DOM, Chapter 5, Article 44, §54040.17.1 Annual Review of Staffing Plan
- CDCR DOM, Chapter 5, Article 44, §54040.18 Institutional Staffing Plan
- CDCR DOM, Chapter 5, Article 44, §54040.3 General Information
- Staffing Plan Analysis Template
- Staff Codes for Staff Vacancies
- · Average Statewide Population
- Number of Inmates prior to August 20, 2012
- Statewide Population Report April 29, 2021
- Sample Annual Data Collection Tool and Staff
- CAC Annual Data Collection 2020
- CAC Sample Supervisor Security Rounds
- Staff In-service Training Curriculum
- · Auditor Observations
- · Interviews: Warden, PCM, intermediate or higher levels staff, random staff

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
1	The facility indicated in their response to the Pre-Audit Questionnaire that the facility does not house youthful offenders.
	Provision (a) & (b) & (c):
	The auditor reviewed the agency website. CAC houses adult males only. Youthful inmates are held in the custody of the Division of Juvenile Justice (DJJ). The auditor asked for and reviewed a roster of the inmate population that included the inmates DOB. After a review, no inmates under the age of eighteen (18) were determined to be housed at the facility.
	During the site review, interviews with the facility Warden, the facility PREA Compliance Manager, and various random staff, the auditor confirmed, that the facility does not house youthful offenders.
	Conclusion:
	Based upon review and analysis of all available evidence, the auditor has determined that this standard is not applicable to CAC and is in full compliance with this standard.
	The auditor reviewed, analyzed and retained the following evidence related to this standard: CAC Pre-Audit Questionnaire
	<ul> <li>CAC Pre-audit Questionaire</li> <li>Interviews: PREA Compliance Manager, Warden and Random Staff</li> <li>Inmate Roster, with DOB and age</li> </ul>

#### 115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that they do not conduct cross gender strip searches or cross gender visual body cavity searches of inmates and have not conducted any in the past twelve (12) months.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §52050.16.5 (Unclothed Body Search of Inmates), states in part, "Unclothed body searches: 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." In addition, DOM Chapter 5, Article 44, §54040.5 (Searches), states "Institutions shall document all cross-gender strip searches and cross-gender visual body cavity searches in accordance with DOM Section 52050.16.5."

The auditor reviewed a memo dated February 8, 2019, to all Associate Directors, Wardens, PREA Compliance Managers and In-service Training Managers regarding the use of the Adani Conpass Low Dose scanners. The memo was issued to bring the agency into compliance with this provision by directing that only operators viewing the image produced shall be the same gender as the inmate being scanned. If cross-gender staff use the Adani Conpass Low Dose Scanner during exigent circumstances, the search must be documented in a Notice of Unusual Occurrence (NOU).

A scan or search that is conducted by opposite gender, would be documented by a Notice of Unusual Occurrence. The facility PREA Compliance Manager will maintain this documentation and during an interview, stated that no cross gender scans or searches have occurred at the facility. Interviews conducted with staff and inmates did not indicated that crossgender unclothed body searches are occurring at the facility.

#### Provision (b):

This provision does not apply to CAC, as the facility only houses male inmates.

CDCR DOM Chapter 5, Article 44, §52050.16.4 (Clothed Body Search of Female Inmates) states "Clothed Body Searches of female inmates shall be conducted by female correctional staff only, except in emergency situations."

#### Provision (c):

CDCR DOM Chapter 5, Article 44, §54040.5 Searches require facilities to document all cross-gender searches and cross-gender visual body cavity searches. If these cross-gender searches occur, the facility must document the search on a Notice of Unusual Occurrence (NOU). All NOU's must be reviewed by a supervisor and forwarded to the PREA Compliance Manager for retainment.

The PREA Compliance Manager indicated that no cross-gender strip searches, cross-gender visual body cavity searches have occurred at the facility. The facility does not house female inmates. Interviews with random staff and inmates did not indicate that cross gender searches are occurring at the facility.

#### Provision (d):

CDCR has implemented DOM Chapter 5, Article 44, §54040.4 Cross Gender Viewing-Preventative Measures which directs each institution to 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. In addition, the policy requires that staff of the opposite biological sex shall announce their presence when entering the housing unit. The announcement is required at the beginning for the shift and/or when the status quo within the housing unit changes.

CDCR staff and contractors are reminded of this policy each year during the In-Service training, CDCR PREA Training Lesson 11054378, Section D. Privacy/Modesty Screens and Announcements, which mirrors the policy stated above.

CDCR DOM Chapter 5, Article 44, §52050.16.7 (Unclothed and Clothed Body Searches of Transgender or Intersex Inmates) states, "In the event that there is an individual going through Receiving and Release (R&R) who self-identifies as transgender or self-identifies with a gender that seems not to match their biological sex, the each will be conducted by staff of the same biological sex as the inmate to be searched. In the event that 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, the inmate shall be placed on single-cell status or in administrative segregation for his/her safety, until the standard intake medical evaluation is completed. This standard medical examination will establish the genital status of the inmate."

The auditor reviewed the Instructor Guide, participant workbook and the PowerPoint for Transgender Inmates. This training is provided to all correctional staff during the annual in-service training. The training goes over issues and concerns regarding transgender inmate, terminology, professional conduct and communication, clothed and unclothed body searches, and state issued clothing and authorized personal property.

The auditor reviewed the "Search and Inmate Property" training. This training covers clothed and unclothed body searches, pat-down searches, to include the proper way to conduct a pat-down search for a transgender inmate. The training indicates that for female inmates that who identify as male, the inmate will be searched utilizing the usual and customary process for searching female inmates. Male inmates who identify as female, staff will utilize the alternate search method. The technique to be used will require the lower body to be searched the same as all male inmates and the upper body to be searched utilizing the back of the hand, as you would any female inmate. Random staff interviews confirmed that the staff are trained. Each staff member could articulate the proper ways to conduct down search of a transgender inmate.

During the site walk through and after discussions with staff, there appeared to be some confusion amongst staff on the 'change in status quo' and the requirement to announce each time there is a change in gender. Due to the design of some of the housing units, the control station is separate and in the middle of various pods, however, two doors are opened and closed for staff doing rounds. After meeting with staff at the facility and agency level, reviewing the FAQ provided on the PREA Resource Center website, and clarification on the standard, the facility re-trained ALL staff and contractors on the requirements and now requires that the announcement is made in accordance with the standard and FAQ and logged each time. Documentation of this training and new process was forwarded to and reviewed by the auditor.

#### Provision (e):

Staff interviewed stated that the facility does not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

During the on-site visit, the auditor noticed cameras in locations throughout the facility. In addition, reviewed all cameras and angles on the computer, as they are reviewed by staff. At the time of the on-site visit, three (3) cameras were down, as they were being repaired, but the angles were covered by additional cameras and staff supervision. The work orders for the parts were reviewed to repair these cameras. There were 291 cameras in the facility.

CDCR DOM Chapter 5, Article 44, §52050.16.7 (Unclothed and Clothed Body Searches of Transgender or Intersex Inmates) states "In the event that there is an individual going through Receiving and Release (R &R) who self-identifies as a transgender or self-identified 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. In the event that 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 record (i.e., paperwork indicates male, inmate will be searched by a male staff member). If staff unable to determine the genital status through medical records or an interview with the inmate, the inmate shall be placed on single-cell status or in administrative segregation for his/her safety, until the standard intake medical evaluation is completed."

#### Provision (f):

Training was reviewed which demonstrated that the facility trains 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.

The auditor reviewed the Instructor guide, participant workbook and the PowerPoint for "Transgender Inmates." This training is provided to all correctional staff during the in-service training. The training goes over issues and concerns regarding transgender inmates, terminology, professional conduct and communication, clothed and unclothed body searches, state issued clothing and authorized personal property. In addition the auditor reviewed the "Searches and Inmate Property" training. The training covers clothed and unclothed body searches, pat down searches, to include the proper way to conduct a pat-down search on a transgender inmate. The training indicates that for females who identify as male, the inmate will be searched utilizing the usual and customary process for searching female inmates. Male inmates who identify as female, staff will utilize the alternate search method. The technique to be used will require the lower body to be searched the same as all male inmates and the upper body to be searched utilizing the back of the hand, as you would any female inmate. These searches can be conducted by either male or female staff.

Random staff interviews indicated that staff were aware that policy prevented a staff member from searching a transgender inmate for the sole purpose of determining the genitalia status and could articulate that if there is a need to know, you can speak with the inmate or contact medical staff. In addition, staff could demonstrate how to conduct a pat search of a transgender inmate, which included the use of the back of the hand.

During the tour and while at the facility, the audit team noticed that some staff announced in the beginning of shift and if they

remained in the control center, did not announce after entering each individual unit. The auditors and management staff reviewed the definitions and FAQ's and agreed that all staff would be retrained on this requirement and would announce in each pod, not just the unit. The facility immediately educated all staff and contractors via email and through briefings and provided the auditors with documentation of this.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.5 Searches

CDCR DOM Chapter 5, Article 44, §52050.16.5 Unclothed Body Searches of Inmates

CDCR DOM Chapter 5, Article 44, §54040.4 Cross Gender Viewing-Preventative Measures

CDCR DOM Chapter 5, Article 44, §54050.16.7 Unclothed and Clothed Body Searches of Transgender and Intersex Inmates

CDCR DOM Chapter 5, Article 44, §54050.16.4 Clothed Body Search of Female Inmates

Memorandum-Adani Compass Low Dose Scanner

**PREA Training Codes** 

Transgender Inmate Training Code 11058564 (Instructor Text)

Transgender Inmate Training Code 11058564 (Participant Workbook)

Transgender Inmate Training Code 11058564 (PowerPoint)

Transgender Intersex Pat-down Training Code 11060835

Body Searches Code 11059429

Senate Bill 132 11062278

PREA Lesson Plan Code 1054378

Office of Training and Professional Development (OPTD) Search Training Lesson Plan

Interviews: Random Staff, Random Inmates, and Transgender/Intersex Inmates

#### 115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that the agency has established procedures to provide disabled inmates and limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. In addition, the facility indicated the use of inmate interpreters, inmate readers or other types of inmate assistants are only relied upon in limited circumstances.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.4 (Offender Education) states, "Appropriate provisions shall be made to ensure effective communication for offenders not fluent in English, those with low literacy levels and those with disabilities."

CCR Title 15, §3000, defines effective communications means providing the inmate, to the extent possible, the means to understand and participate in the disciplinary process to the best of their ability. The auditor reviewed a justification memo dated October 6, 2017, the memo states "In order to ensure that inmate 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, CDCR provides reasonable modifications or accommodations to inmates with physical or communicational disabilities pursuant to the Americans with Disabilities Act. Appropriate provision are made to ensure effective communications 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. When an inmate's Test of Adult Basic Education (TABE) score is 4.0 or lower, employees are required to query the inmate to determine whether or not assistance is needed to achieve effective communication. The employee is required to document on appropriate CDCR form his/her determination of whether the inmate appeared to understand, the basis for that determination and how it was made. For instances involving due process, employees 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."

TABE scores are documented in SOMS (inmate electronic file). TABE scores can also be found on classification review forms under committee notes, indicating that the score is considered and if any type of effective communication is needed.

The auditor reviewed a justification memo dated October 6, 2017 which state's "In order 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 or sexual harassment, CDCR provides reasonable modifications or accomodations to inmates with physical or communicational disabilities pursuant to the American with Disabilities Act. Appropriate provisions are made to ensure effective communication for offenders who are 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. For example, in instances where an inmate's Test of Adult Basic Education (TABE) score is 4.0 or lower, employees are required to query the inmate to determine whether or not assistance is need 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."

The CDCR has a contract with Voiance Language Services, for foreign language telephone interpreter services. In June 2009, a memo was sent to all Directors and Wardens, to serve as a reminder to all CDCR staff of procedures to ensure effective communication with Limited English Proficient (LEP) inmates. The memo provides instructions on how to access the service as well as a directive to appoint an LEP Coordinator in each facility. The Coordinator is responsible for ensuring the "I-Speak" cards are available in all housing units, ensuring the 1-800 toll free number is current and operational.

A roster was provided to the auditor while onsite, printed from the CDAC inmate management system titled Inmate Disability Roster. This roster included 32 inmates with disabilities that were housed at the facility. Of this, five were selected and interviewed.

#### Provision (b):

Policy, a contract for interpreter services and posters, in addition to interviews with staff, demonstrated that the facility takes reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

The auditor reviewed, CDCR I-Speak (Language Identification Guide) posters. The posters include phone numbers for inmates and staff to call to access an interpreter. The designated LEP Coordinator is responsible for ensuring that the posters

are available in all housing units and to ensure the numbers are correct and updated. An inmate can point to the desired language, if they are unable to speak English. During the site review of CAC, the auditor did not observe very many of these posters in the housing units or dorms or areas where the inmates are likely to congregate. The I-Speak posters were observed in all areas of the conservation camps. In addition, the Director of Adult Prisons confirmed that all PREA documentation is provided in both English and Spanish. If other languages are needed the agency does have contracts with outside agencies who can provide the documentation in other languages. Staff are required to ensure that an inmate understands the agency's zero tolerance policy and how to report. Interviews were conducted with limited english inmates. The staff were able to assist with setting up the interviews, indicating a clear knowledge on how to access the information.

#### Provision (c):

Staff interviewed were able to articulate that they shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations.

CDCR DOM Chapter 5, Article 44, §54040.12 Investigations states, "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.

CDCR DOM Chapter 5, Article 44, section 54040.7 (Detection, Notification, and Reporting) states, "The department shall not rely on offender interpreters, offender readers, or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties, or the investigation of the offender's allegations."

A roster was provided to the auditor while onsite, printed from the CDAC inmate management system titled Non-English Inmate Roster. This roster included 50 inmates. From this list, three were selected by the audit team and interviewed. These were randomly selected from each of the housing units.

Staff interviewed at various levels of rank and custody and non-custody levels and all were versed on the process of when and how to use the language line. In addition, staff advised that if an inmate needed assistance in understanding the information or how to report, that they would assist.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

#### The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire
CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention
CDCR DOM Chapter 5, Article 44, §54040.12 Investigations
California Code Regulations, Title 15, §3000
Justification memo
CDCR Disability Code Definitions
CDCR I-Speak Poster
Rosters of LEP and disabled Inmates
Interpreters Unlimited call numbers
LEP Memo, Contract with Interpreters
Interviews: LEP inmates, inmates with disabilities, staff

#### 115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses on the Pre-Audit Questionnaire that the agency policy prohibits hiring or promoting anyone who may have contact with inmates, and prohibits enlisting the services of any contractor who may have engaged in sexual abuse in a prison, jail, community confinement facility, juvenile facility or any other institution or any who has been convicted or attempting to engage in sexual activity in the community by force, overt or implied threats or coercion, or if the victim did not consent or was unable to consent or anyone who has been civilly or administratively adjudicated to have engaged in this activity.

#### Provision (a) & (b):

CDCR DOM Chapter 3, Article 6, §31060.3 Appointments prohibits hiring or promoting anyone who may have contact with inmates who: has engaged in sexual violence, or staff sexual misconduct of an inmate in a prison, jail, community confinement facility, juvenile facility or any other institution; 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; has been civilly or administratively adjudicated to have engaged in this activity described above.

The auditor reviewed the CDCR Supplemental Application. The supplemental application was revised in August 2016, to include the questions mandated by this provision of the standard. In addition to the above listed questions, the supplemental application includes asking the candidate if they have received any disciplinary action as a result of allegations of sexual harassment of an inmate in a prison, jail, lockup, community confinement facility or any other institution. This form is required of all applicants seeking employment with CDCR, to include both internal and external candidates with the exception of Peace Officers applying for the same classification. The form is also used for transfers with a change in classification or promotions. All Human Resource Personnel were instructed that this form is to be maintained in the employee personnel file in a sealed envelope.

CDCR DOM Chapter 3, Article 6, §31060.3 (Appointments) states "Hiring authorities shall consider substantiated incidents of sexual harassment in all hiring decisions; ask all applicants and employees who may have contact with inmates directly about previous staff sexual misconduct and sexual harassment of inmates, in written applications or interviews for hiring or promotions and in any interview or written self-evaluations as part of the reviews of current employees." In addition to the questions above, the supplemental applications inquires if the applicant has ever had a substantiated finding of sexual harassment of an inmate in prison, jail, lockup, community confinement center or other institution".

The auditor reviewed CDCR Form 2301 PREA Policy Information for Volunteer and Contractors Memo. In May 2020, CDCR revised CDCR form 2301. All contractors and volunteers are required to read and sign this form prior to employment with the agency. The form was revised to include all questions required by this provision.

During an interview with Human Resource staff, it was confirmed that all applicants are required to complete the 1951 Supplemental Application. In addition, all contractors are required to complete the CDCR Form 2301, prior to employment.

The auditor randomly selected 67 staff files to review and of these files, each file was complaint with the CDCR documentation for this standard.

#### Provision (c) & (d) & (e):

CDCR DOM Chapter 3, Article 6, §31060.16 Criminal Records Check states that a criminal records check is a requirement for employment with CDCR and includes that the employee must consent to be fingerprinted (live scanned) at the time of hire. The live scan system notifies the department of any subsequent arrests an employee or contractor has and on an ongoing basis. An employee or contractors fingerprints remain in the live scan system until the employee or contractor is no longer employed with the CDCR. This also alleviates CDCR from running background checks on all employees every five (5) years as required by this provision of the standard.

The auditor reviewed a memo entitled Personnel Identification Card Issuance. All ID Cards that are red, blue, white or gold have an expiration date of five (5) years. Contractors are issued green cards, which also has a five (5) year expiration or upon completion of the project they are currently working on. Volunteers are issued brown cards with an expiration date of one (1) year. In order to renew the ID Cards once expired they must complete a background check.

All background investigators are required to make an attempt to contact all previous institutional employers to inquire about substantiated investigations or if the applicant resigned during a pending sexual abuse investigation. Background investigators utilize CDCR 2025 (Employment Reference Questionnaire) when conducting a background check. The form

includes the following questions: While this individual was employed with your agency/institution, was he/she ever proven, through a substantiated investigation, to have engaged in sexual abuse? Did this individual resign from his/her employment with your agency/institution prior to completion of an investigation into sexual abuse.

Contracts for the service of contractors, include language which states, "you shall not assign an employee to a CDCR facility or assign an employee to duties if that employee will have contact with CDCR inmates, if that employee 1) has engaged in sexual violence, or staff sexual misconduct of an inmate in a prison, jail, community confinement facility, juvenile facility or any 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; 3) has been civilly or administratively adjudicated to have engaged in this activity described above." In addition, the contractor shall conduct a criminal background records check for each contract employee who will have contact with CDCR inmates and provide written certification that it was done.

The agency PREA Coordinator confirmed that during the background process, all previous correctional employers are contacted. In addition, she will respond to outside agencies that request this information. The PREA Coordinator provided the auditor with samples of such inquire and response.

The auditor randomly selected 67 staff files to review and of these files, each was complaint with the CDCR documentation for this standard.

#### Provision (f):

On October 27, 2021, California Code of Regulations, Title 15, §3411 was revised to include the following: "The employee or contractor has a continuing duty to report, and shall promptly notify the institution head, or appropriate Director, if any of the following occur:

They have engaged in sexual violence, or staff sexual misconduct of an inmate in a prison, jail, community confinement facility, juvenile facility or any other institution;

They have 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; They have been civilly or administratively adjudicated to have engaged in this activity described above."

The auditor reviewed CDCR Form 2301 PREA Policy Information for Volunteer and Contractors Memo. In May 2020, CDCR revised CDCR form 2301. All contractors and volunteers are required to read and sign this form prior to employment with the agency. The form was revised to include the following statement "as a contract employee you have a continuing duty to promptly report and you are required to notify your employer and the Appointing Authority of the Institution to which you are assigned if the answer to any of the above questions changes." Both volunteers and contractors are required to sign the form prior to employment with the agency.

Each of the volunteer and contractor staff files reviewed contained this documentation.

#### Provision (g):

The auditor reviewed the California Employment Application, STD 678. The form includes a statement that each applicant must read before signing which states, "I certify under penalty of perjury that the information I have entered on this application is true and complete to the best of my knowledge. I further understand that any false, incomplete, or incorrect statements may result in my disqualification form the examination process or dismissal from employment with the State of California."

In review of the CDCR form 1951 Supplemental Application, it also states, "I understand that if material fact are later discovered which are inconsistent with or differ from the facts that I furnished before beginning employment, I may be rejected on probation and/or disciplined, up to and including dismissal from State service."

CDCR DOM Chapter 3, Article 22, §33030.19 Employee Disciplinary Matrix (8) indicates that an employee can and will be dismissed for falsification of an application or omission of information for employment or promotion when it materially affects acceptance or rejection for employment or promotion.

**Provision (h):** According to policy and the interviews of Agency and HR staff, the agency will 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

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

#### The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 3, Article 6, §31060.3 Appointments

CDCR DOM Chapter 3, Article 6, §31060.3 Background Checks

CDCR DOM Chapter 3, Article 6, §31060.16 Criminal Records Check

CDCR DOM Chapter 3, Article 22, §33030.19 Employee Disciplinary Matrix

California Code of Regulations, Title 15, §3411

ID Cards, DOM 31070.1

California Employment Application, STD 678

CDCR form 1951 Supplemental Application

CDCR Form 2164 Live Scan ResponseCDCR Memo-Use of the CDCR Form 1951 Supplemental Application

CDCR Memo-Personnel Identification Card Issuance

CDCR 2025 Employment Reference Questionnaire

CDCR PREA Memo-Background Investigators

CDCR Justification Memo

Interviews: Human Resource Staff and PREA Coordinator

#### 115.18 Upgrades to facilities and technologies

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that there has not been substantial expansion or modifications to the facility and has not installed or updated video technology since the last PREA Audit.

#### Provisions (a) & (b):

CDCR Facility Planning, Construction and Management (Design and Construction Policy Guidelines) states:

a. When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.

b. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.

While being interviewed, the Director or Adult Prisons stated that any time new requests are made for construction or modifications, a request is made for video monitoring equipment, as well. She also stated the agency PREA Coordinator and the facility PREA Compliance Manager are involved in all aspects of expansions or modifications, to ensure the agency's ability to protect inmates from sexual abuse. Both the facility Warden and the PREA Compliance Manager explained the process and confirmed that there has not been substantial expansion or modifications to the facility and has not installed or updated video technology since the last PREA Audit.

During the site review and walk-through, the auditor did not see ongoing construction or installation of video monitoring equipment within the facility grounds.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire
CDCR Design and Construction Policy Guidelines
PREA Consideration Forms
Design Change Request
Div 27 51 23 CSO CSC technology Project Manual
Interviews: Warden and Director of Adult Prisons

#### 115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that the facility is responsible for conducting both criminal and administrative investigations, to include inmate on inmate sexual abuse and staff sexual misconduct. In addition, the facility reported that there have not been any SANE exams required in the past twelve (12) months.

#### Provision (a) & (b):

California Penal Code 830.5 states "The following persons are peace officers whose authority extends to any place in the state while engaging in the performance of the duties of their respective employment and for carrying out the primary function of their employment or as required under Sections 8597, 8598, and 8617, (b) correctional officer employed by the Department of Corrections and Rehabilitation..."

CDCR DOM Chapter 5, Article 44, §54040.8.1 (Evidence Protocol) states "care must be taken to ensure that any potential evidence is identified, preserved, and collected. Examples of evidence include but are not limited to any clothing worn by the victim and suspect, hair or clothing fibers, dried or moist secretions, semen, blood or saliva stains, stained articles of clothing blankets, or other foreign materials on the body of the victim or suspect, fingernail scrapings, and any other trace evidence (including the rape examination kit)."

Investigations are conducted by Locally Designated Investigators (LDI). An LDI may be an investigator from the Investigative Service Unit or a designated institutional staff member who has been trained to conduct investigations of sexual abuse, staff sexual misconduct or sexual harassment. In cases that involve an accused staff member, an LDI will conduct an initial inquiry until sufficient information has been obtained to conduct an Office of Internal Affairs (OIA) investigation.

The auditor reviewed the specialized training that is provided to all LDI's. The training is based on the April 2012 edition of the National Protocol for Sexual Assault Medical Forensic Examination, published by the US Department of Justice. A justification memo and CDCR DOM, Chapter 5, Article 44, §54040.8.1, state, CDCR ensures that any potential evidence is identified, preserved, and collected. Examples of evidence include but are not limited to any clothing worn by the victim and suspect, hair or clothing fibers, dried or moist secretions, semen, blood or saliva stains, stained articles of clothing, blankets, or other foreign materials on the body of the victim or suspect, fingernail scrapings, and any other trace evidence (including the rape examination kit). CAC does not house youthful offenders; however, the process addresses sexual assault examinations appropriate for both adult and adolescents.

CDCR has developed protocols for each step of the process in the event of a sexual assault. Staff are provided checklists to ensure that all protocols are followed. The checklists consist of the Initial Contact Guide, Custody Supervisor Information, Watch Commander Checklist, and a Transportation Guide.

#### Provision (c):

CDCR DOM Chapter 5, Article 44, §54040.9 Forensic Medical Examinations states "In accordance with DOM Sections 54040.12.1 and 54040.12.2, the victim will be taken to the designated outside hospital, or on-site location, where SART Contract Staff will complete the forensic exam. The SANE shall provide the required Forensic Medical Examination, per the Office of Emergency Services, as well as the appropriate Forensic Medical Report....These examinations will consist of an explanation of the process, the offender's signature on consent forms (some offenders will require assistance to explain the consent forms prior to signing them), discussion of the incident and when/how it occurred and a detailed physical examination that will include evidence collections and photographs..."

California Health Care Services Policy- Grievance and Administration Chapter 10, 1.10 Copayment Program Policystates "The copayment shall not be charged if the health care service(s) is considered to be...treatment services relating to sexual abuse or assault."

#### Provision (d) & (e):

CDCR DOM Chapter 5, Article 44, §54040.8.1 Custody Supervisor Responsibilities states "A Watch Commander Notifications Checklist has been developed to identify the tasks to be completed. When the call is made to request the ambulance, it is critical to inform the dispatcher that the injured offender is the victim of sexual assault/battery. At the time the victim is sent to the outside hospital or on-site location, the Watch Commander is required to contact the Rape Crisis Center to request a Victim Advocate be dispatched. If one is not available, designated, trained staff from the facility will be dispatched or called in to act as the Victim Advocate as defined in Section 54040.3."

CDCR DOM Chapter 5, Article 44, §54040.8.2 Victim Advocate and Victim Support Person for Investigatory Processstates "Victims of alleged sexual violence or staff sexual misconduct, have the right to have a victim advocated and a victim support

person of the victim's choosing, present at any investigatory interviews, interviews by law enforcement, the district attorney or defense attorneys."

CDCR DOM Chapter 5, Article 44, §54040.3 Victim Advocate states "An individual typically employed by a Rape Crisis Center whose primary purpose is the rendering of advice or assistance to victims of sexual assault and who has received a certificate evidencing completion of a training program in the counseling of sexual assault victims issued by an approved counseling center. The victim advocate will be summoned to assist the alleged victim of an in-custody sexual assault including rape, sodomy, oral copulation, or forcible acts of sexual penetration for the SANE exam or interview process...In 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 trained in counseling of sexual assault victims...."

The auditor reviewed a Memorandum of Understanding between CDCR, CAC and the Women's Center - High Desert, Inc.. The MOU was executed on July 12, 2019 and remains in effect. The MOU defines the roles and responsibilities of each entity, to ensure that emotional support services are provided to inmates housed within CAC. In addition, the MOU defines emotional support services to include: toll-free, non-recorded, non-monitored calls utilizing the inmate telephone system to CNVC's hotline number; confidential written correspondence with contractor personnel; in-person crisis counseling sessions between incarcerated victims and Contractor Personnel meetings and prearranged by the PCM or designee telephone calls to Contractor Personnel via chaplain, counselor, psychologist, or ISU staff as resources and scheduling allow. The auditor called and spoke with staff at the Woman's Center and

In review of the Watch Commander Checklist, attempts to contact the Rape Crisis Center is documented with the time it was completed. If the Rape Crisis Center is unable to provide a victim advocate, the watch commander will contact an individual from the facility who is a trained victim advocate, which must be on the level of a psychiatrist, psychologist, licensed clinical social worker, psychiatric mental health registered nurse or a staff member with a master's degree in counseling.

In addition, the auditor reviewed CDCR Sexual Assault Interview Guidelines, this confidential form is used to aid the interviewer in asking pertinent questions needed to complete a confidential memorandum. The instructions on the top portion of the form states, "Per PC Section 679.04, victims of sexual assault have the right to have a victim advocate, and a victim support person of the victim's choosing present at any interview by law enforcement, the district attorney, or defense attorney."

#### Provision (f) & (g):

All CDCR custody staff are sworn peace officers and are authorized and trained in conducting both criminal and administrative investigations of sexual abuse. Therefore, these provisions are not applicable.

#### Provision (h):

CDCR DOM Chapter 5, Article 44, §54040.3 states "...In 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 trained in counseling of sexual assault victims and who either: is a psychiatrist, psychologist, licensed clinical social worker, psychiatric mental health registered nurse or a staff member with a master's degree in counseling."

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

#### The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.12 PREA Investigations

CDCR DOM Chapter 5, Article 44, §54040.9 Forensic Medical Examinations

CDCR DOM Chapter 5, Article 44, §54040.8 Initial Contact

CDCR DOM Chapter 5, Article 44, §54040.8.1 Evidence Protocol

CDCR DOM Chapter 5, Article 44, §54040.8.2 Victim Advocate Support Person and SANE/SART Examination

CDCR DOM §54040.3 Facility provides a qualified staff member, definition of victim advocate

CCHCS Chapter 10 1.10 Co-Payment Policy

CA Penal Code 830.5

Justification Memo

PREA - Working with Rape Crisis Centers ToolKit

Specialized Training LDI Lesson Plan and PowerPoint

Initial PREA Check-Off for Staff and Supervisors

National protocol for sexual assault

LDI Evidence Training based on a National Protocol for Sexual Assault 2012

Sexual Assault Kit Processing Memo
CDCR Sexual Assault Interview Guidelines
Memorandum of Understanding CDCR and Women's Center - High Desert, Inc
Statewide Rape Crisis Center 24-hour Sexual Abuse List

Interviews: Random Staff, SAFE/SANE Staff, PREA Compliance Manager, Inmates who reported sexual abuse

# 115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that the agency ensures that an administrative or a criminal investigation is completed for all allegations of sexual abuse and sexual harassment. In addition, the facility stated that there have been five (5) allegations received and five (5) investigations were completed.

#### Provision (a) & (b):

CDCR DOM Chapter 5, Article 44, §54040.12 Investigations for Allegations states "All investigations of sexual violence, staff sexual misconduct, and sexual harassment shall be investigated and the findings documented in writing...."CDCR DOM Chapter 3, Article 14, §31140.1 Policy states, "Every allegation of employee misconduct within the California Department of Corrections and Rehabilitation (CDCR or Department) shall be promptly reported, objectively reviewed, and investigated when appropriate."

CDCR DOM, Chapter 5, Article 44, §15080.2 states the Office of Internal Affairs is the departmental entity with authority to investigate allegations of employee misconduct when appropriate.

CDCR DOM Chapter 3, Article 14, §31140.6 states in part: Pursuant to Government Code Section 11182, the Secretary of the Department delegates the authority to initiate and conduct investigations to the Assistant Secretary, OIA."

All CDCR custody staff are sworn peace officers that have been trained and authorized to conduct criminal and administrative investigations.

The auditor reviewed a justification memorandum. All inmate-on-inmate sexual violence and harassment allegations are investigated by the Investigative Services Unit (ISU). The findings are documented on a confidential memorandum and an SSV-IA form. If the allegations are found to be substantiated, ISU collaborates with the District Attorney to decide on prosecution.

The auditor reviewed a memorandum to all Wardens, dated December 29, 2021. The memorandum indicates that within the Office of Internal Affairs (OIA) the Allegation Inquiry Management Section (AIMS) was established to conduct independent and objective inquiries into specified allegations originating from grievances submitted by incarcerated persons and parolee. Effective January 1, 2022, the scope of AIMS is expanded to include all allegations of unnecessary or excessive use of force (UOF) and all allegations of staff (on offender) sexual misconduct, to include allegations of sexual harassment and sexual assault by a staff member. All allegations of staff sexual harassment or staff sexual assault of an incarcerated person or parolee shall be accepted from any source.

Staff sexual misconduct and staff sexual harassment allegations are initially conducted by ISU. ISU will gather preliminary information concerning the allegations. The findings are documented on a confidential memorandum and an SSV-IA form. If the allegations are found to have potentially occurred, ISU then refers the case to the Office of Internal Affairs (OIA), an entity within CDCR with authority to investigate all staff misconduct. The OIA completes the investigation and works with the District Attorney to decide on prosecuting the suspect.

In the past twelve months the facility received 8 allegations of sexual abuse and sexual harassment. There were 8 allegations that resulted in an administrative investigation and 1 allegation was referred for prosecution. When requesting documentation on a case brought up during interviews with the inmate population, it was discovered that the documents were not at the facility and were sent to OIG to investigate. The auditor acknowledged the process that certain staff involved matters require the OIG to investigate. The auditor recommends that the facility investigators still maintain copies so that proper retaliation monitoring and other follow ups can be performed. The facility agreed and will maintain complete files onsite as well.

# Provision (c) & (d) & (e):

CDCR has the authority to investigate all criminal and administrative allegations, therefore these provisions are not applicable to CAC.

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.12 Investigations for Allegations

CDCR DOM Chapter 3, Article 14, §31140.1 Policy

CAC PREA Allegation Log 2020

Justification Memorandum

Memorandum Referral of all unnecessary or Excessive use of force and specified Prison Rape Elimination Act Allegations to the

Allegation Inquiry Management Section

CDCR 2020 Annual Report

Interviews: Director of Adult Prisons and Investigative Staff

# 115.31 Employee training

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that the agency trains all employees who may have contact with inmates on all elements of this standard and that the training is tailored to the gender of the facility.

## Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.4 (Staff Training) states "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. This training will be conducted during new employee orientation, annual training, and will be included in the curriculum of the Correctional Training Academy."

CDCR DOM Chapter 5, Article 44, §54040.4 Staff Training indicates that all staff, which includes employees, volunteers and contractors receive instruction related to the prevention, detection, response and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. The training is conducted during new employee orientation, annual training and is included in the curriculum of the Correctional Training Academy.

CDCR has three separate PREA training curriculums. PREA BCOA 11055014 is training this is provided to custody staff in the agency correctional academy. PREA IST 11054378 is training that is included in the facility in-service training and PREA OJT 11053499 is on the job training, which is a one hour refresher course.

The auditor reviewed the agency PREA Training curriculum and lesson plans provided. Each lesson plan covers the required elements of this provision which includes but is not limited to:

#### Zero Tolerance:

How to fulfill your responsibilities under the agency sexual abuse and sexual harassment policy and procedures; Inmate's right to be free from sexual abuse and sexual harassment;

Inmate and Staff rights to be free from retaliation for reporting sexual abuse or sexual harassment;

The Dynamics of sexual abuse and sexual harassment in a confinement setting;

Common reactions of sexual abuse and sexual harassment;

How to detect and respond to signs of threatened and actual sexual abuse;

How to avoid inappropriate relationships with inmates;

How to communicate effectively and professionally with inmates including LGBTI inmates; and

How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

# Provision (b):

CDCR DOM Chapter 5, Article 44, §54040.4 (Staff Training) states "The training shall be gender specific based on the offender population at the assigned institution..." The training curriculum includes gender specific information. In addition, the curriculum contains information on the dynamics of sexual abuse and sexual harassment in a confinement setting that informs the student of the female dynamics, the male dynamics and the transgender populations dynamics.

CDCR has developed protocols for each step of the process in the event of a sexual assault. Staff are provided checklists to ensure that all protocols are followed. The checklists consist of the Initial Contact Guide, Custody Supervisor Information, Watch Commander Checklist and a Transportation Guide.

# Provision (c) & (d):

CDCR DOM Chapter 5, Article 44, §54040.4 Staff Training states that PREA Training will be conducted during new employee orientation, annual training and will be included in the curriculum of the Correctional Training Academy. In addition, it states that participation in the training shall be documented on a CDCR 844, Training Participation Sign-in sheet.

CDCR DOM Chapter 5, Article 44, §54040.4 (Staff Training) states "...participation in the training will be documented on a CDCR 844, Training Participation Sign-in Sheet."

CDCR DOM Chapter 3, Article 18, §32010.8.3 (Record Keeping Forms) states, "For each training activity conducted, the following records shall be maintained:

CDCR Form 844 shall be used for all IST, CDCR Form 844 or the unit approved training documentation for OJT, a record of score achieved through a written test or performance demonstration of the learned skill. All training shall be recorded in the departmentally approved electronic tracking system."

Staff and contractor are required to attend PREA training on a yearly basis. Once training has been completed staff is required to complete a "Knowledge Review" test which documents the employee's level of understanding and contains the employee signature.

Of all of the staff files reviewed, each was compliant with the provisions of this standard.

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

# The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC PRE-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.1 Zero Tolerance Policy

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention

CDCR In-Service PREA Training Lesson Plan, 11054378

CDCR BCOA PREA Training Lesson Plan, 11055014

CDCR OTJ PREA Training Lesson Plan, 11053499

Inmate/Staff Relations Instructor Guide, version 1.2 for BCOA 11055030 and IST 11053211

Staffing Training Memo

Staff Training WorkBook

Inmate Staff Interaction, BET Code

CDCR Training Memo for TG inmates

PREA Training Curriculum Knowledge Review

LMS PREA OJT BET Code

Interviews: Random Staff

# 115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

**Auditor Discussion** 

The facility indicated in their response to the Pre-Audit Questionnaire that the agency ensures that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse/harassment.

## Provision (a) & (b):

CDCR DOM Chapter 5, Article 44, §54040.4 (Staff Training) states "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. This training will be conducted during new employee orientation, annual training, and will be included in the curriculum of the Correctional Training Academy."

CDCR DOM Chapter 10, Article 9, §101090.5 Community Resource Manager states, "Under the direction of the hiring authority, the CRM....provides volunteers the approved training schedule and training materials as noted in the DOM Sections 101090.7 and 101090.7.1 at onset of service and annually thereafter." In addition it states, "Records all tracking information regarding volunteers in the Volunteer Tracking System (VTRACK)."

The auditor reviewed the CDCR Justification Memo - Volunteers and Contractor Training. Volunteers and contractors who work eight hour shifts with little to no custody staff supervision are required to attend the same training that is specific for staff. However volunteer or contract staff that conduct self-help groups or similar are required to to complete the one hour mandatory training, in addition to the information that is provided to them with CDCR Form 2301.

The CDCR form 2301-PREA Policy Information for Volunteers and Contractors is required prior to employment. The potential volunteer or contractor, must sign and date the form. The form provides information which includes but is not limited to PREA historical information, CDCR PREA Policy, retaliation measures for employees or inmates who report incidents of sexual violence, professional behavior, preventative measures and detection.

## Provision (c):

CDCR DOM Chapter 3, Article 18, §32010.8.3 (Record Keeping Forms) states, "For each training activity conducted, the following records shall be maintained: CDCR Form 844 shall be used for all IST, CDCR Form 844 or the unit approved training documentation for OJT, a record of score achieved through a written test or performance demonstration of the learned skill. All training shall be recorded in the departmentally approved electronic tracking system."

In addition, Contractors and Volunteers are given a PREA Policy Information Sheet prior to employment. This document includes PREA Historical Information and CDCR DOM Chapter 5, Article 44 Policy, Professional Behavior, Preventative Measures and Detection. Each volunteer or contractor is required to sign the document which contains the statement "I have read the information above and understand my 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."

The audit team interviewed contractors and volunteers, randomly selected from rosters provided by the facility. Each recalls training and education on PREA and was able to detail how they would report, the requirement that they are mandatory reporters and what PREA is and means. In addition, each stated that they work well with staff and would feel safe going to staff with concerns and that they know staff would take them seriously.

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.4 Staff Training

CDCR DOM Chapter 10, Article 9, §101090.5 Community Resource Manager

CDCR DOM Chapter 3, Article 18, §32010.8.3 (Record Keeping Forms)

CDCR In-Service Training Curriculum 110554378

CDCR Form 2301 PREA Policy Information for Volunteers and Contractors Memo

CDCR Form 2301 PREA Policy Information for Volunteers and Contractors

CDCR Justification Memo - Volunteers and Contractor Training

Interviews: Facility Volunteers and Contractors

# 115.33 Inmate education

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that inmates receive information at the time of intake about the agency zero tolerance policy. The facility reported that two thousand six hundred and ninety-one (2691) inmates have been admitted into the facility in the past twelve months and two thousand six hundred and eighty-five (2685) received this information at intake. In addition, the facility reported all inmates who were admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake:

### Provision (a) & (b):

CDCR DOM Chapter 5, Article 44, §54040.4 (Offender Education) states "Initial offender orientation on PREA will be provided to the offender population in reception centers (RC) via either written or multi-media presentation on a weekly basis in both English and Spanish."

CDCR DOM Chapter 5, Article 44, §54040.4 (Offender Education) states, "The PREA Brochure entitled "Sexual Violence Awareness" and the PREA booklet entitled "Sexual Abuse/Assault Prevention and Intervention" will be distributed during initial processing in RC institutions. Both the brochure and the booklet shall be available through Receiving and Release or the correctional counselors at each institution, and the information will also be included in each institution's offender orientation handbook."

The PREA Sexual Violence Awareness Brochure is both in English and Spanish. The Brochure informs the inmate what to do if you are sexually assaulted, avoidance of sexual violence, address for the local rape crisis center and how to report utilizing the Officer of Internal Affairs or Office of Inspector General Ombudsperson. The brochure also informs the inmate that the Office of Inspector General will keep name anonymous if requested.

CDCR DOM Chapter 5, Article 44, §54040.4 (Offender Education) states "PREA Offender education shall be documented on a CDC Form 128 B, General Chrono. The offender shall be asked to sign the CDC Form 128 B indicating they received the training. Refusal to sign will be noted by staff on the CDC Form 128 B."

The Sexual Abuse/Assault Prevention and Intervention Brochure is both in English and Spanish. The brochure is intended to give an inmate an overview of and to know their rights and responsibilities. The brochure explains what sexual abuse is, recovering from sexual assault, provides the address for the local rape crisis center, how to report, how to avoid sexual abuse and answers several other questions that the inmate may have such as do you have to reveal your attacker, do I have to consent to a medical exam and what will happen to me if I make an allegation knowing it to be false.

Senate Bill 132 Brochure is intended for the transgender population. The Senate Bill 132 was signed into law by the Governor on September 26, 2020 and has take effect as of January 1, 2021. The brochure provides the transgender inmate with a multitude of information, including what is the bill and such items as listed below: you can be authorized to possess clothing consistent with your gender; you are allowed to purchase and possess personal clothing, hygiene items, cosmetics, and makeup consistent with your gender identity; and you have the option to shower separately. PREA Standards require all offenders who identify as transgender, intersex or non-binary to be evaluated twice a year to check for safety in placement and programming.

Senate Bill 320 allows you to petition the court to obtain a name or gender change.

In addition, the brochure notifies the transgender inmate how this Senate Bill affect him/her and frequently known questions, such as can I be housed in a facility consistent with my gender identity, and can I be search by staff of the opposite gender?

The auditor reviewed the inmate "Orientation Handbook". The handbook contains a PREA section, which explains the facility zero tolerance policy, right to be free from retaliation, and reporting an incident with phone numbers and addresses.

The auditor reviewed the CDCR form 128-B. This form is utilized to document the inmate's participation in PREA education. The form indicates, by inmate signature, that the inmate has received the PREA materials and training. The form indicates that the inmate has received the following information at intake:

- 1. Video "what you need to know" (English/Spanish/Hmong Version) and;
- 2. Given information brochure on PREA reporting information;
- 3. Given Inmate Orientation Handbook with PREA reporting information;
- 4. Opposite Gender Announcement was explained, "staff on the floor" means staff of the opposite gender are in the

Housing Unit.

## Provision (c):

The auditor reviewed a memorandum issued on November 4, 2015, which indicates that all facilities within CDCR provided all inmates a copy of the PREA Information sheet for the Orientation Handbook and on September 2, 2015, proof of practice memorandums were received from all facilities verifying completion.

## Provision (d) & (e):

CDCR DOM Chapter 5, Article 44, §54040.4 (Offender Education) states "appropriate provisions shall be made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and those with disabilities."

CDCR DOM Chapter 5, Article 44, §54040.4 (Offender Education) states "Verbal and written information shall be provided to offenders, which will address: prevention/intervention, reporting, treatment and counseling."

CDCR DOM Chapter 5, Article 44, §54040.4 (Offender Education) states "PREA Offender education shall be documented on a CDC Form 128 B, General Chrono. The offender shall be asked to sign the CDC Form 128 B indicating they received the training. Refusal to sign will be noted by staff on the CDC Form 128 B."

The auditor reviewed the CDCR form 128-B. This form is utilized to document the inmates participation in PREA education. The form indicates, by the inmate signature, that the inmate has received the PREA materials and training.

CCR Title 15, §3000 states, "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"

CDCR DOM Chapter 5, Article 44, §54040.4 (Offender Education) states "PREA Offender education shall be documented on a CDC Form 128 B, General Chrono. The offender shall be asked to sign the CDC Form 128 B indicating they received the training. Refusal to sign will be noted by staff on the CDC Form 128 B."

The auditor reviewed the CDCR form 128-B. This form is utilized to document the inmate's participation in PREA education. The form indicates, by the inmate signature, that the inmate has received the PREA materials and training. The form indicates that the inmate has received the following information at intake: Video "what you need to know" (English/Spanish/Hmong Version) and; Given information brochure on PREA reporting information; Given Inmate Orientation Handbook with PREA reporting information; Opposite Gender Announcement was explained, "staff on the floor" means staff of the opposite gender are in the Housing Unit.

The auditor reviewed sixty-six (66) inmate files. Each file contained CDCR Form 128 B. The form appears to be pre-filled with a computer generated check mark on:

Video "what you need to know" (English/Spanish/Hmong Version) and Given Inmate Orientation Handbook with PREA reporting information. The auditor advised the facility to ensure that this form is not pre-completed and filled out with each inmate.

The Director of Adult Prisons confirmed that staff must establish effective communications with an inmate. Interpreters can be provided, staff will read to the inmate or speak slowly and all material can be printed in other languages as needed.

# Provision (f):

The auditor reviewed a sample of the "Shine the light on Sexual Abuse" posters. The posters are in both English and Spanish. The posters include the agency zero tolerance policy, and "no means no and yes is not allowed", In addition, the posters inform inmates of three (3) ways to report sexual abuse, to include tell any staff member, use the confidential telephone number or addresses listed below or have a family member or friend contact the institution and report it.

In addition, the auditor reviewed a sample of the Officer of the Inspector General PREA Posters. This poster is colorful and eye catching and is in English and Spanish. The poster informs the inmate that all reports of sexual abuse as defined by the Prison Rape Elimination Act may be reported to any CDCR staff member or the prison PREA contact person. Sexual Abuse may be reported to any prison medical or mental health worker. Any inmate in a California institution, may also contact the Office of Inspector General and provides the inmate with a number to call from any inmate phone. The poster also states that the call is toll free and is unrestricted from the inmate phone system.

During the site review, the auditor did observe many of the PREA posters throughout the facility, including the housing units.

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.4 Offender Education

CCR Title 15, §3000

CDCR Prison Rape Elimination, Written Material Distribution Memo

CDCR Form 128-B

Shine the Light on Sexual Abuse Poster in both English and Spanish

Live in Fear Posters, English and Spanish

Office of the Inspector General PREA Poster

Senate Bill 132 Brochure, Transgender Inmates

**CAC Inmate Rosters** 

Intake Packet from Facility with Education Materials

Booklet for Inmates: Sexual Abuse/Assault Prevention and Intervention, English and Spanish

Inmate Orientation Manual, English and Spanish Interviews: Intake Staff and Random Inmates

# 115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that agency policy requires that investigators are trained in conducting sexual abuse investigations in a confinement setting. In addition the facility reported that there are Locally Designated Investigators (LDI) at the facility.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.3 Locally Designated Investigator (LDI) states, "The Investigative Services Unit Investigator or other designated institutional staff who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct."

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention states "All employees who are assigned to investigate sexual violence and/or staff sexual misconduct will receive specialized training per PC Section 13516 (c)." In addition, the policy states "All staff including employees, volunteers and contractor, shall receive instructions 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 training and will be included in the curriculum of the Correctional Training Academy."

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention states, "All employees who are assigned to investigate sexual violence and/or staff sexual misconduct will receive specialized training per PC Section 13516(c). The curriculum utilized in the class must be POSED approved. The hiring authority or PREA Compliance Manager shall ensure employees investigating incidents or sexual violence and/or staff sexual misconduct are properly trained."

Interviews with facility Investigators, confirmed that they are required to attend annual PREA training and the specialized training to conduct investigations in a confinement setting. Many of the investigators were new. After a review of the investigations and some minor errors contained within, the auditor recommended that all reviewed and discussed these to ensure that they, the new staff, are clear on the standards. All immediately were retrained, provided with the PRC FAQ's and Standards in Focus, and discussed samples. Documentation of this additional training was provided to the audit.

## Provision (b):

The auditor reviewed the CDCR Specialized PREA Training for Locally Designated Investigators Course Curriculum and PowerPoint. The length of the course is eight (8) hours. The instructional goal states "Investigators will understand their role and responsibilities in conducting an investigation within the correctional institution." The curriculum includes sections on interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, proper handling of sexual abuse evidence collection in a confinement setting and how to identify evidence required to substantiate a case for administrative action or prosecution referral. The auditor reviewed the BIC per Institution which states that all CAC investigators that have received specialized training. Documentation of each of these training was provided to the auditor.

CDCR DOM Chapter 5, Article 44, §54040.3 Locally Designated Investigator (LDI) states, "The Investigative Services Unit Investigator or other designated institutional staff who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct."

# Provision (c):

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention states, "Participation in training will be documented on a CDCR 844, Training Participation Sign-in Sheet."

CDCR DOM Chapter 3, Article 18, §32010.8.3 Record Keeping Forms states, "For each training activity conducted, the following records shall be maintained: CDCR Form 844 shall be used for all IST, CDCR Form 844 or the unit approved training documentation for OJT, a record of score achieved through a written test or performance demonstration of the learned skill. All training shall be recorded in the departmentally approved electronic tracking system."

All investigators assigned to CAC have been trained and documentation was provided to the auditor to review.

## Provision (d):

CAC investigators are peace officers under the California Penal Code 830.5 and are authorized to conduct criminal and administrative investigations, therefore this provision does not apply to the facility.

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

# The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention

CDCR DOM Chapter 5, Article 44, §54040.3 Locally Designated Investigator (LDI)

CDCR DOM Chapter 3, Article 18, §32010.8.3 Record Keeping Forms

CDCR Specialized PREA Training for Locally Designated Investigators Course Curriculum and PowerPoint.

Interviews: Investigative Staff

# 115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that the agency has as policy related to the training of medical and mental health practitioners who work regularly in its facilities.

## Provision (a) & (d):

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention states, "All staff including employees, volunteers and contractor, shall receive instructions 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 training and will be included in the curriculum of the Correctional Training Academy."

The auditor reviewed a memo issued by the Health Care Policy Administrator for the California Correctional Health Care Services on August 9, 2017, to all CCHCS staff. The memo issued was in response to an audit finding of non-compliance with the specialized training, and states "to bring CCHCS and DHCS into compliance with this standard, an eLearning module has been developed. The eLearning module is located on the CCHCS Learning Management System (LMS) and is to be completed by each Medical and Mental Health staff practitioner who has contact with inmates. It is a one-time training to be provided to current and new staff practitioners as they begin work with an institution." Medical and mental health staff were instructed to complete the training no later than sixty (60) days after the issuance of the memorandum.

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention states, "Participation in training will be documented on a CDCR 844, Training Participation Sign-in Sheet."

CDCR DOM Chapter 3, Article 18, §32010.8.3 Record Keeping Forms states, "For each training activity conducted, the following records shall be maintained: CDCR Form 844 shall be used for all IST, CDCR Form 844 or the unit approved training documentation for OJT, a record of score achieved through a written test or performance demonstration of the learned skill. All training shall be recorded in the departmentally approved electronic tracking system."

The auditor reviewed the Prison Rape Elimination Act (PREA) Policy Specialized Training for Medical and Mental Health Staff 11057450 PowerPoint. The training includes sections which cover identifying potential signs of sexual abuse and sexual harassment, identifying how and whom to report an allegation or suspicions of sexual abuse and sexual harassment, identifying methods to respond effectively and professionally to victims of sexual abuse and sexual harassment and identifying the steps required to preserve evidence of sexual abuse.

In addition, the auditor reviewed the CDCR On-the-Job Training Prison Rape Elimination Act (PREA) Policy Specialized Training for Medical and Mental Health Staff. The course is a one hour mandatory training and is intended for volunteer or contract staff that conduct self-help groups or similar as they do not spend a great amount of time with inmates. The learning objectives include identifying potential signs of sexual abuse and sexual harassment, identifying how and whom to report an allegation or suspicions of sexual abuse and sexual harassment, identifying methods to respond effectively and professionally to victims of sexual abuse and sexual harassment and identifying the steps required to preserve evidence of sexual abuse.

During interviews, medical and mental health staff reported that they are required to attend annual PREA training, during inservice training. Each interviewed was extremely well versed in the processes and requirements of this standard. All training documentation was reviewed for the medical and mental health staff that were selected by the auditor, and each was in compliance with this provision.

## Provision (b):

CAC does not conduct forensic examinations at the facility, therefore this provision is not applicable.

## Provision (c):

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention states, "Participation in training will be documented on a CDCR 844, Training Participation Sign-in Sheet."

CDCR DOM Chapter 3, Article 18, §32010.8.3 Record Keeping Forms states, "For each training activity conducted, the following records shall be maintained: CDCR Form 844 shall be used for all IST, CDCR Form 844 or the unit approved training documentation for OJT, a record of score achieved through a written test or performance demonstration of the learned skill. All training shall be recorded in the departmentally approved electronic tracking system."

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

# The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention

CDCR DOM Chapter 3, Article 18, §32010.8.3 Record Keeping Forms

**CCHCS Specialized Training Memo** 

Prison Rape Elimination Act (PREA) Policy Specialized Training for Medical and Mental Health Staff 11057450

CDCR On-the-Job Training Prison Rape Elimination Act (PREA) Policy Specialized Training for Medical and Mental

Health Staff 11057450

Interviews: Medical and Mental Health Staff

# 115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

## Provision (a):

California Penal Code Section 667.5 (c) defines the following sexual abuse related terms in the following manner and as used in the screening process:

- Rape as defined in paragraph (2) or (6) of subdivision (a) of Section 261 or paragraph (1) or (4) of subdivision (a) of Section 262.
- Sodomy as defined in subdivision © or (d) of Section 286
- · Oral Copulation as defined in subdivision © or (d) of Section 288a
- Lewd or lascivious act as defined in subdivision (a) or (b) of section 288
- Sexual penetration as defined in subdivision (a) or (j) of Section 289
- · Continuous sexual abuse of child, or sexual penetration, in convert, in violation of Section 264.1

According to the CDCR Operations Manual, "Offenders at high risk for sexual victimization, as identified on the PREA Screening From, 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 means of separation from likely abusers.

Offenders at high risk for sexual victimization shall have a housing assessment completed immediately or within 24 hours of placement into segregated housing. If temporary segregation is required, the inmate shall be issued an Administrative Segregation Placement Notice explaining the reason for segregation is the need to complete a housing assessment based on high risk for sexual victimization. If a determination is made at the conclusion of the assessment that there are no available alternative means of separations from likely abusers, the inmate will be retained in segregated housing and issued an Administrative Segregation Placement Notice, explaining the reason for retention. The assigned counseling staff shall schedule the offender for appearance before the Institution Classification Committee for discussion of his/her housing needs. The offender's retention in segregation should not ordinarily exceed 30 days, if retention is continued beyond 30 days, staff shall ensure compliance with DOM section 54040.14.1. PREA Victims Non-Disciplinary Segregation.

On August 28, 2017, a Memorandum was issued to all Associate Directors and PCM's which outlined, in detail, the purpose and process for Risk Screenings and applicable standards. The memo also required each facility to training all staff in the process and form contained within. The memo included a copy of the utilized intake screening forms and definitions for each question to guide staff on how each question should be answered.

During the site review, the auditor viewed the intake area. No inmates were being processed into the facility at the time, as much of the inmate movement was still slow due to Covid. The auditor asked the sergeant to walk her through the process.

According to CDAC DOM 54046.5, Initial Screening, "upon arrival at an institution reception center, a program institution, or an ASU or SHU, an inmate shall be screened for an appropriate housing assignment". Further, it states "additionally, the screening authority shall review prior in-cell behavior towards cell partners. Verification an inmate is or has been predatory towards a cell partner, has a history of in-cell sexual abuse...".

According to the PAQ, each of the 1,439 inmates entering the facility within the past twelve months whose length of stay in the facility was for 72 hours or more or who were screened for risk of sexual victimization or risk of sexually abusing behavior were completed within 72 hours of their entry into the facility.

# Provision (c):

Correctional Training Facility utilizes the PREA Screening. This screening tool was implemented in August 2017, as noted in a memorandum to Associate Directors, Wardens and PREA Compliance Managers. In July 2020 the tool was modified to better assess for risk of victimization. This modification was announced on July 23, 2020 in a memorandum to Associate Directors, Wardens, Prison Rape Elimination Act Compliance Managers and Chief Executive Officers. This tool was reviewed and discussed with staff and leadership and is objective.

According to Title 15, Section 3269 Inmate Housing Assignments, "upon arrival at an institution, facility, or program reception center, a designated custody supervisor shall screen an inmate for an appropriate housing assignment". Based on available information and the inmate interview, the screening authority shall determine if the inmate is suitable for single or double cell housing.

# Provision (d):

The PREA Screening was reviewed and considers:

- Experienced sexual victimization in a correctional setting
- Experienced sexual victimization in a non-correctional setting
- Whether the inmate has a mental, physical, or development disability,
- Age of the inmate
- Physical build of the inmate
- Previous incarcerations
- Exclusively non-violent criminal history
- Prior convictions for a sexual offence non correctional setting within 5 years
- History of sexual violence in a correctional setting
- Whether inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender-non-conforming Inmate's own perception of vulnerabilityCAC does not house inmates solely for civil immigration purposes.

# Provision (e):

In assessing inmates for risk for risk of being sexually abuse, the PREA Screening Form was reviewed and includes:

- Prior conviction for non- sexual violent offenses in a non-correctional setting within five years
- Guilty finding for non-sexual violent offense in a correctional setting within 5 years
- History of sexual violence in a correctional setting
- Prior convictions for sex offenses in a non-correctional setting

## Provision (f):

A memorandum, was reviewed by the auditor, dated September 29, 2017, to Associate Directors, Wardens and PREA Compliance Managers assigns the Correctional Counselor with completing the legacy PREA Screens at the inmate's annual classification. Once the initial screen is completed, the Corrections Counselor will review the file annually in preparation for the inmate's Unit Classification Committee meeting. If there is new information, it is reviewed by the unit Classification Committee. If the information changes the "at risk" designation, the Correctional Counselor II Supervisor completes a new PREA Screening form. During the committee, the chairperson reviews the completed PREA Screening tool and discusses the inmate's concerns as they relate to sexual violence or sexual harassment. Samples of these Classification reviews were provided with each inmate file which was randomly selected.

The reassessment process was formalized and addressed in a memorandum date March 13, 2019, to Associate Directors, Wardens, Classification and Parole Representatives, Correctional Counselor II Supervisors, and PREA Compliance Managers. This memo provides instruction to Reception Centers regarding the Reception Center - PREA Reassessment form. This form is comprised of four questions completed by the Corrections Counselor. If there are any "yes" answers, the Corrections Counselor will interview the inmate the same day. CAC is not a Reception Center and therefore follows the memorandum issued in 2017.

A PREA 30 Day Reassessment Report dated December 1, 2019 was submitted for review. This is a statewide tracking mechanism which indicated the inmate, arrival date, date of screen, reassessment date and result. There are no inmates listed who are assigned to CTF.

A list is developed weekly by the Classification and Parole representative with the names of inmates that arrived at the reception center 8-14 days prior to the list date. The list is provided to the Correctional Counselors assigned to the reception center. The Correctional Counselor has 14 days to complete the reassessment process. Samples of the tracker were reviewed by the Auditor.

CDCR DOM Section 62010.8.3, Initial Classification Committee (ICC) states that the ICC will meet with each inmate privately within 14 days after arrival at the institution. A review of medical/ mental health needs, the inmate's ability to understand and participate in the hearing, gang or enemy concerns, work assignments, and programming needs, and the completed PREA screening tool is conducted by the counselor. The counselor will discuss any concerns the inmate may have. In addition, they review any newly received information that may require an updated PREA risk assessment.

# Provision (g):

CDCR DOM Section 54040.7 requires "the inmate's risk level be reassessed due to a referral, request, incident, of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness".

# Provision (h):

Section 54040.6 - Offender Housing states "Offenders will not be disciplined for refusing to answer, or not disclosing complete information related to mental, physical, or developmental disabilities, their sexual orientation, sexual victimization or perception of vulnerability."

As noted in the memorandum dated November 6, 2020 to Associate Directors, Wardens, PREA Compliance Managers, and In-Service Training Lieutenants regarding the training of Senate Bill 132, CDCR is prohibited from "disciplining any individual

for refusing to answer or not disclosing complete information in response to questions about their gender identity".

## Provision (i):

The initial PREA Screening is completed at intake prior to the inmate being assigned a housing unit. This is completed in a one-on-one interview in a private setting. The information is documented. The reassessment is completed within 14 days of intake in preparation for the initial Committee. The Corrections Counselor identifies any new information or behaviors that may indicate sexual violence or harassment. The information from the screening tool is reviewed with the inmate and a new screen completed only if there is new information. The screening tool and information is again reviewed at the committee.

Department Operations Manual, Chapter 5, Article 44, section 54040.3 (Definitions) defines need-to-know as when the information is "relevant and necessary in the ordinary performance of that employee's official duties".

This process was formalized in a memo from 2017.

The auditor reviewed sixty-six (66) inmate files. Of these screenings, nine (9) were late or had no Classification Chrono was provided. In addition, the auditor reviewed several samples of screening assessments that were completed based on new information received. There were also some inconsistencies in the language on when the screening was completed and notes about the completed education that, according to their process, should be completed with the screenings. For this reason, the auditor placed the facility in corrective action whereas they sent the auditor a chart and all new intakes, on a weekly basis, and detailed:

Inmate intake date
Initial screening
Initial education
second screening
comprehensive education
mental health follow up (as required).

Of these, all supporting documentation was sent and reviewed by the auditor. In total, 237 inmates were reviewed, and each was in compliance for this time period.

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No further corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

- · CAC Pre-Audit Questionnaire
- California Penal Code Section 667.5 (c) defines violent felony
- · CDAC DOM 54040.6 Screening for Risk of sexual abuse
- · CDCR Memo on Screening as per 115.41 to PCM's from Prison Director
- · PREA Screening SOMS Instructions for staff
- CDAC DOM 54046.5, Initial Screening
- Title 15, Section 3269 Inmate Housing Assignments
- · PREA Risk Screening, Correctional Counselor Responsibilities
- PREA 30 Reassessment Report (Tracker)
- PREA DOM 54040.7, Inmate Reassessment Review within 30 days
- · CDCR DOM 54040.6, Offender Non-Discipline for Refusal to Answer
- Memorandum, dated November 6, 2020on the Transgender Respect, Agency and Dignity Act
- · CDCR, DOM 54040.3, Definitions
- · Changes to PREA Screening Form
- CDCR 128 MH5

# 115.42 Use of screening information

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

In the Pre-Audit Questionnaire, the facility indicated that the agency utilizes information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping those high risk of being sexually victimized from those at high risk of being sexually abusive.

### Provision (a) & (b):

CDCR DOM Chapter 5, Article 44, §54040.6 (Single Cell Status) states, "The process review and evaluation for single cell status shall be initiated during the RC processing as part of the initial screening. This process will include completion of the PREA Screening form, which includes questions related to sexual violence and victimization. Upon the offender's arrival at his/her assigned institution, this information will again be assessed and a PREA Screening form will be updated as necessary."

CDCR DOM Chapter 5, Article 44, §54040.7 (Screening for Appropriate Placement) states, that "based on the information that the offender has been a victim of sexual violence of victimization, the custody supervisor conducting the initial screening shall discuss housing alternatives with the offender in a private location."

CCR Title 15, §3375.2 (Administrative Determinants) states, "An inmate with a history of sex crimes designated in section 3377.1(b) shall be housed in accordance with their placement score and shall not be assigned outside the security perimeter."

The auditor reviewed the PREA Screening Form Instructions #4 states, "Custody supervisors assigning/approving housing moves are required to review the inmate precautions screen to determine if inmate(s) being moved are identified as being "PREA-At risk as a Victim" or "PREA-At risk of an Abuser." If either precaution exists, the custody supervisor is to review the potential cellmate's precaution screen and case factors to ensure inmates identified are not housed together in a cell."

Housing, work assignments and programming are documented on the inmate Classification Chrono. During the initial review inmates are asked if their housing, work assignments and programming are appropriated.

The PREA Screening Form Instructions #4 states, "Custody supervisors assigning/approving housing moves are required to review the inmate precautions screen to determine if inmate(s) being moved are identified as being "PREA – At risk as a Victim" or PREA- At risk as an Abuser" If either precaution exists, the custody supervisor is to review the potential cellmate precaution screen and case factors to ensure inmates identified are not housed together in a cell." In addition, #5 states, "when housing inmates in a dorm, inmates identified as "PREA at risk as victim" shall be assigned to a location close to the staff office/podium.

CDCR DOM Chapter 6, Article 5, §62010.8.3 Initial Classification Committee states, "Each institution shall establish an initial classification committee to review and initiate a suitable program for each inmate within 14 days after arrival at the institution."

CDCR Compliance Letter was reviewed by the auditor. An inmate is reassessed within 14 days of arrival at an institution by the Initial Unit Classification Committee. During this committee the PREA Screening form is reviewed and considered in all decisions affecting the inmate to include housing, work, education, etc. The actions taken are documented on a Classification Chrono. The committee members are as follows:

- 1. Captain (chairperson)
- 2. CC-III or captain (alternate chairperson
- 3. CC-II or CC-I (committee recorder
- 4. Assignment Lieutenant
- 5. Educational or vocational program representative Other staff required

The initial committee shall:

Initiate an educational, vocational training, or work program and privilege group designation 42

- 1. Evaluate case factors and assist the inmate to understand institution expectations, available programs and resources
- 2. Designate the degree of custody necessary to control the inmate
- 3. Refer complex cases to the ICC (Institutional Classification Committee chaired by the Warden
- 4. Recommend transfer of a new arrival determined to be inappropriately placed

5. Grant work time credits to which the inmate is entitled while in transit.

During the initial review, the inmates are asked if their housing, work assignments and programming are appropriate. Each are documented on the inmate Classification Chrono. The auditor reviewed several samples of the classification chrono and confirmed the notations are made regarding housing, work assignments and programming.

## Provision (c), (d), (e), (g):

CDCR DOM Chapter 6, Article 44, §62080.14 (Transgender or Intersex Inmates) states that "Inmates who have diagnosed as transgender or intersex, as documented on the Medical Classification Chrono, shall be referred to a classification committee for review of all case factors and determination of appropriate institutional placement and housing assignment."

To ensure inmate-patients received the necessary medical are/mental health treatment, CDCR has identified fourteen (14) facilities within the State to house the transgender population. The designated facilities provided services in line with the needs of the transgender population, however they are not solely housed at the designated facility based on their transgender status. The inmates are not housed in specific housing units but are housed throughout the facilities.

The auditor reviewed a memo regarding transgender biannual reassessments, dated August 25, 2017, which states, "If an inmate is due to be seen for his/her annual classification review during the identified review period (August through January or February through July), the Correctional Counselor will ask the inmate about any threats they have received during the pre-committee interview. In addition, to interview the inmate the CC shall review the inmate's case factors in the Strategic Offender Management System and the Electronic Records Management System for any additional information which may indicate the inmate has any placement or programming concerns."

A memo regarding Transgender Biannual Reassessment for safety in Placement and Programming dated August 25, 2017 states, "If an inmate is due to be seen for his/her annual classification review during the identified review period (August through January or February through July), the Correctional Counselor will ask the Inmate about any threats they have received during the pre-committee interview. In addition, to interviewing the inmate, the CC shall review the inmate's case factors in the Strategic Offender Management System and the Electronic Records Management System for any additional information which may indicate the inmate has any placement or programming concerns."

On a biannual basis the agency will send out a list to all PREA Compliance Managers identifying all transgender/intersex inmates that are known to the department. The list contains each institutions respective inmates, along with the month of the inmate's scheduled annual classification review. If an inmate is due to be seen for his/her annual classification review during the identified review period, the Correctional Counselor will ask the inmate about any threats they have received during the pre-committee interview. In addition to interviewing the inmate the CC 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. The CC documents his/her actions, as they relate to the PREA Biannual Assessment, in the Classification Committee Chrono.

The auditor reviewed the statewide list of transgender inmate tracking form. No entries were found for CAC. CAC is not one of the dedicated facilities to house transgender/intersex inmates.

# Provision (f):

CDCR DOM Chapter 5, Article 44, §54040.4 (Preventative Measures) states, "Per 28 CFR, Standard 115.42, upon request, transgender and intersex inmates shall be given the opportunity to shower separately from other inmates."

The Senate Bill 132 Brochure informs transgender/intersex inmates that they have the option to shower separately if they identify as transgender, intersex or non-binary. The PREA Compliance Manager confirmed that a transgender inmate can shower separately from the other inmates if they request it.

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard.

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.4 Preventative Measures

CDCR DOM Chapter 5, Article 44, §54040.7 Screening for Appropriate Placement

CDCR DOM Chapter 5. Article 44, §62080.14 Transgender or Intersex Inmates

CCR Title 15, §3377 Security Levels

How to run a Transgender Inquiry, handout instructions

Use of Screening Information Memo

CDCR Compliance Letter

Changes to PREA Screening Form-Mental Health Referral Process

Counselor Responsibilities-Memo

128-B Transgender Biannual Assessment Chrono

Statewide list of Transgender Inmate tracking

Transgender Bi-annual Reassessment for Safety in Placement and Programming

Brochure for Transgender Inmates, English and Spanish

Memorandum to all Directors, Re: PREA Risk Screening

Interviews: Staff Responsible for Screening, PREA Coordinator, PREA Compliance Manager,

Transgender/Intersex Inmate

# 115.43 Protective Custody

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

In the PAQ, the facility stated that the agency does have a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no alternative means of separation from likely abusers. In addition, the facility reported that there have not been inmates at risk for sexual victimization held in involuntary segregation in the past twelve (12) months.

# Provision (a), (b), (c), (d), & (e):

CDCR DOM Chapter 5, Article 44, §54040.6 (Offender Housing) states that "offenders at high risk for sexual victimization, as identified on the PREA Screening Form, 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. Offenders at high risk for sexual victimization shall have a housing assessment completed immediately or within 24 hours of placement into segregated housing."

CCR Title 15, Article 7, §3335 (Administrative Segregation) (D)(1) states that "If the placement in NDS is related to being a victim of a PREA incident, the inmate will be afforded all programs, privileges, and education in accordance with section 3044 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 limitations. (D)(2) The facility shall assign such inmates to NDC only until an alternative means of separation from likely abusers can be arranged and such an assignment shall not ordinarily exceed a period of 30 days. If the period of segregation exceeds 30 days, the reasoning shall be documented on a CDC Form 128-G, Classification Chrono. (D)(3) Every 30 days, the facility shall afford each such inmate with a review by the assigned custody supervisor to determine whether there is a continuing need for segregation from the general population. This review shall be documented on the CDC Form 128-G, Classification Chrono."

CCR Title 15 Article 7, §3335 (D) (2) Administrative Segregation states, "The facility shall assign such inmates to NDC only until an alternative means of separation from likely abusers can be arranged and such an assignment shall not ordinarily exceed a period of 30 days. If the period of segregation exceeds 30 days, the reasoning shall be documented on a CDC Form 128-G, Classification Chrono."

CCR Title 15 Article 7, §3335 (D) (3) Administrative Segregation states, "Every 30 days, the facility shall afford each such inmate with a review by the assigned custody supervisor to determine whether there is a continuing need for segregation from the general population. This review shall be documented on the CDC Form 128-G, Classification Chrono."

An interview with a staff member who supervises the segregation unit, indicated that inmates are not placed in to segregation for being high risk, there are other options, like moving them to another housing unit. However if an inmate is placed into segregations there must be paperwork to document the placement and they would not be in segregation for very long. In addition, the facility Warden confirmed that inmates at high risk for sexual victimizations would not be placed in to segregation. However, during document reviews and discussions with inmates, there was documentation of two instances where those who were victims were placed in segregation. Each situation had unique circumstances discussed with management. The facility retrained all staff in this standard to ensure that were versed in the requirements of the standard and policy.

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard.

CAC Pre-Audit Questionnaire

CCR Title 15, Article 7, §3335 Segregated Housing 30-day Review

CDCR DOM Chapter 5, Article 44, §54040.6 Offender Housing

Interviews: Warden, Staff who Supervise Inmates in Segregated Housing and Inmates in Segregated Housing

# 115.51 Inmate reporting

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

In the PAQ, the facility stated that the agency has established procedures for multiple internal ways for inmates to report privately to agency officials. In addition, the agency has provided at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity that is not part of the agency.

## Provision (a), (b), (c), & (d):

CDCR DOM Chapter 5, Article 44, §54040.4 *Offender Education* states that "verbal and written information shall be provided to offenders which will address: prevention/intervention, reporting and treatment and counseling."

CDCR DOM Chapter 5, Article 44, §54040.7 *Detection, Notification and Reporting* states that "offenders may report violations of this policy to any staff member verbally or in writing, utilizing the Inmate Appeals Process, through the sexual assault hotline, or through a third party."

CCR Title 15, §3401.5, *Staff Sexual Misconduct- Reporting Requirements* states that "any employee who observes, or who receives information from any source concerning staff sexual misconduct, shall immediately report the information or incident directly to the hiring authority, unit supervisor, or the highest-ranking official on duty. Failure to accurately and promptly report any incident, information or facts which would lead a reasonable person to believe sexual misconduct has occurred may subject the employee who failed to report it to disciplinary action."

CCR Title 15, §3401.5 (d), *Confidentiality* states that "alleged victims who report criminal staff sexual misconduct falling into one of the Penal Code sections set forth in Government Code Section 6254 (f)(2) shall be advised that their identity may be kept confidential pursuant to Penal Code Section 293.5, upon their request."

The auditor reviewed the Sexual abuse/Assault Prevention and Intervention Brochure. The brochure is available in both English and Spanish. This informs inmates of numerous ways to privately report sexual abuse, sexual harassment or retaliation, which includes but is not limited to:

Tell any staff member
Use the confidential telephone numbers to CDCR Office of Internal Affairs
Call or write the Inspector General PREA Ombudsperson
Tell a family member or friend who can report

The auditor reviewed the Sexual Violence Awareness brochure. The brochure is in both English and Spanish. The brochure is given to each inmate at the time of intake and provides the inmates with addresses and telephone numbers for the Office of Internal Affairs and Office of Inspector General Ombudsperson.

The auditor reviewed a sample of the Officer of the Inspector General PREA Posters. This poster is colorful and eye catching and is in English and Spanish. The poster informs the inmate that all reports of sexual abuse as defined by the Prison Rape Elimination Act may be reported to any CDCR staff member or the prison PREA contact person. Sexual Abuse may be reported to any prison medical or mental health worker. Any inmate in a California institution, may also contact the Office of Inspector General and provides the inmate with a number to call from any inmate phone. The poster also states that the call is toll free and is unrestricted from the inmate phone system. The Office of Inspector General is not part of the agency and is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment. All documentation informs the inmates that it is a collect call and they will have to leave a message. In addition, it informs them that they can remain anonymous if they request it. During the site review, the audit team tested all phone numbers, and left messages. In addition, the Deputy Inspector General confirmed, inmates can report via the telephone and the OIG will keep the identity confidential and only use "the reporting party".

CDCR DOM Chapter 5, Article 44, §54040.7 Detection, Notification and Reporting states, "Offenders may report violations of this policy to any staff member verbally, or in writing, utilizing the Inmate Appeals Process, through the sexual assault hotline or through a third party."

CCR Title 15, §3401.5 (Staff Sexual Misconduct) states, "Reporting Requirements. Any employee who observes, or who receives information from any source concerning staff sexual misconduct, shall immediately report the information or incident directly to the hiring authority, unit supervisor, or the highest-ranking official on duty. Failure to accurately and promptly report any incident, information, or facts which would lead a reasonable person to believe sexual misconduct has occurred may subject the employee who failed to report it to disciplinary action." All staff, to include contractors and volunteers can report sexual abuse or sexual harassment privately to any supervisor. Random staff interviews confirmed that staff could use the same reporting mechanisms that are afforded to inmates, if they felt the need to privately report. However, all reported there

would not be a need and could report all violations through their chain of command. In addition, staff confirmed that reports must be taken verbally, in writing, anonymously or through a third party and they must immediately document such report.

During random staff and inmate interviews, they could articulate the multiple ways that an inmate could utilize to report an incident. The PREA Coordinator and the PREA Compliance Manager confirmed that the facility does not house inmates solely for civil immigration purposes.

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

# The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.4 Offender Education

CDCR DOM Chapter 5, Article 44, §54040.7 Third Party and Mandated Reporting

CCR Title 15, §3401.5 Reporting Mandates

PREA Handbook (English and Spanish)

Sexual Abuse/Assault prevention & Intervention Brochure, English and Spanish

Mailroom Correspondence Instructions

Sexual Violence Awareness Brochure, English and Spanish

Contractor, Volunteer and Staff Reporting Training

Intake Packet received from Facility

Interviews: Random Staff, Random Inmates, CDCR PREA Coordinator and PREA Compliance Manager

## 115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

In the PAQ, the facility indicated that the agency does have an administrative procedure for dealing with inmate grievances regarding sexual abuse. In addition, the facility reported there have been zero grievances that alleged sexual abuse within the review period.

## Provision (a), (b), (c), (d), (e), & (f):

CCR Title 15, §3084.8 *Appeal Time Limits* (c) (1) states that the "first level responses shall be completed with 30 working days from date of receipt by the appeals coordinator. Section (2) states then, "second level responses shall be completed within 30 working days from the date of receipt by the appeals coordinator; and (3) states that "third level responses shall be completed within 60 working days from date of receipt by the third level Appeals Chief."

CCR Title 15, §3084.9, Exceptions to the Regular Appeal Process, Section (5) states that " a grievance in whole or part containing allegations of sexual violence or staff sexual misconduct shall be processed as an emergency appeal. The appeal shall be immediately reviewed by the Hiring Authority or designee and processed directly at the second level or review. When the appeal alleges or indicates that the inmate may be substantial risk of imminent sexual violence or imminent staff sexual misconduct, a risk assessment shall be undertaken."

CCR Title 15, §3084.9 Exceptions to the Regular Appeal Process, section (1) (A) Staff Sexual Misconduct Appeals states that "there shall be no time limit for allegations of staff sexual misconduct, but once received by the appeals coordinator, the appeal shall be screened in accordance with subsection 3084.5(b)(4) and (B) PREA Allegations against another Offender states, "A time limit shall not be imposed upon when an appellant may file a grievance alleging inmate on inmate sexual violence."

CDCR DOM Chapter 5, Article 44, §54040.7.2 *Notification via Third Party Reporting of Misconduct Against an Employee, Contractor, or Volunteer* states that "when a third party, on behalf of an inmate, makes an allegation of staff sexual misconduct or sexual harassment against a departmental employee, contractor or volunteer, that allegation or complaint shall be submitted to the Hiring Authority of the area in which the individual is assigned."

CDCR DOM Chapter 5, Article 44, §54040.15.1 Alleged Victim-False Allegations states, "Following the investigation into sexual violence, or staff sexual misconduct, if it is determined that the allegations made were not in good faith or based upon a a reasonable believe that the alleged conduct occurred, the offender making the allegation may be subject to disciplinary action. A charge of "making a false report of a crime," a Division "E" offense, is appropriate only if evidence received indicates the offender knowling made a false report. An allegation deemed unsubstantiated or unfounded based on a lack of evidence, does not constitute false reporting.

CCR Title 15, §3084.1 (Right to Appeal) (a) states, "Any inmate or parolee under the department's jurisdiction may appeal any policy, decision, action, condition, or omission by the department or its staff that the inmate or parolee can demonstrate as having a material adverse effect upon his or her health, safety, or welfare."

CDCR DOM Chapter 5, Article 44, §54040.7.1 Notification via Inmate Appeals or Form 22 Process states, "Any employee receiving notice of alleged staff sexual misconduct via a completed CDCR Form 602, Inmate/Parolee Appea, CDCR Form 22, Inmate/Parolee Request for Interview, Item or Service, or CDCR Form 602HC, Inmate/Parolee Health Care Appeal shall immediately notify the institution head, unit supervisor or highest ranking official on duty as required by CCR, Title 15, Sections 3401.5, 3084.9(a)(5), 3084.9(a)(5)(A), or 9086."

The agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse and sexual harassment and is therefore not exempt from this standard. Appeals are collected from the locked appeal boxes daily by the Appeal Coordinator. The Appeal Coordinator logs the date and time when appeals are picked up in the control log books. The auditor did review control log books and confirmed entries are made with the date and time of the pick up. All appeals involving sexual abuse or sexual misconduct are forwarded to the ISU for investigation. Of all the investigations reviewed, there did not appear to have time constraints imposed and the investigation was began immediately upon receiving the appeal. During interviews with investigators, it was confirmed that an investigation is immediately started, and there are no time limits imposed.

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.7 Notification via Inmate Appeals

CDCR DOM Chapter 5, Article 44, §54040.15.1 Alleged Victim, False Allegations

CCR Title 15, §3084.2 Appeal Preparation and Submittal

CCR Title 15, §3084.9 Filing of Emergency Appeals

CCR Title 15, §3084.9 Grievance with no Time Constraint

CDR Title 15, §3084.7 Not required to Submit appeal to subject of complaint

CDR DOM §54040.7.2 Notification via 3rd Party Reporting and Procedures

Interviews: Inmates who reported sexual abuse and Appeal Coordinator

# 115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The PAQ submitted stated that the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. In addition, the facility informs inmates, prior to giving them access to outside services of the mandatory reporting rules and limits of confidentiality.

### Provision (a) & (b):

CDCR DOM Chapter 5, Article 44, §54040.8.2 *Victim Advocate for Emotional Support Services* states, that "the facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available. This information is available to the inmate population in the PREA Brochure entitled "Sexual Violence Awareness" and the PREA booklet entitled "Sexual Abuse/Assault-Prevention and Intervention. It shall also be included in each institution's offender orientation handbook".

CDCR DOM Chapter 5, Article 44, §54040.8.2 *Victim Advocate for Emotional Support Services* states that, "the facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential manner as possible."

The auditor reviewed the Sexual Violence Awareness brochure. The brochure is available in both English and Spanish. The brochure states, "If you would like to speak with someone about previous incidents of sexual violence, you may contact a mental health professional at this facility, you may write to a victim advocate at the local rape crisis center, or you may write Just Detention International." Mailing addresses are provided for the local rape crisis center and for Just Detention International.

## Provision (c):

CDCR DOM Chapter 5, Article 44, §54040.8.2 *Victim Advocate and Victim Support Person for Medical Examination* states that, "A Method of Understanding (MOU) between the Institution and Local Rape Crisis Center (Victim Advocate) shall be established to ensure that both agencies understand their roles and responsibilities when responding to sexual violence or staff sexual misconduct."

The auditor reviewed an MOU between CDCR-CAC and Woman Center High Desert, Inc. The purpose of the MOU is to define the roles and responsibilities of each entity regarding CDCR's duty to provide emotional support services related to sexual abuse and victim advocate services. The CAC inmate handbook states in the section Victim Advocate and Victim Support Person, "if you are the victim of sexual violence or staff sexual misconduct while in this institution, you are eligible to have a victim advocate and a victim support person with you during the medical examination and investigatory interviews. You may write or call the local rape crisis center for emotional support services at: Woman Center High Desert, Inc., PO Box 309, Ridgecrest, CA 93558".

The Mailroom Correspondence Instructions provided to the auditor provide sample envelopes for mailroom staff and states that "Mail with EVIDE. CODE 1035.4 on the outside of the envelope should NOT be read by CDCR staff and should ONLY be opened in the presence of the addressee." The document also lists addresses for Rape Crisis Centers State wide with whom CDCR contracts including the Woman's Center High Desert and the address provided in the inmate handbook.

During the intake process, all inmates are given an CAC Inmate Handbook. The manual is in both English and Spanish. Contained within the manual is a PREA information section, which states "If you are the victim of sexual violence or staff sexual misconduct while in this institution, you may be eligible to have a victim advocate and a victim support person with you during the medical examination and investigatory interviews. You may write or call the local rape crisis center for emotional support services at: Center for a Non Violent Community and provides the mailing address."

Inmates are also given a Sexual Abuse/Assault Prevention and Intervention brochure and a Sexual Violence Awareness brochure. Both brochures inform the inmate that they can write to a victim advocate. The address is provided in the Sexual/Abuse Prevention and Intervention Brochure, as well as a hotline phone number they can access. Random inmates confirmed there are phone numbers to call for advocacy. During random interviews, inmate could articulate that there is a number and address for victim advocacy available to them.

The auditor spoke with staff at this Rape Crisis Center and the staff were well versed in the requirements of PREA and the MOU.

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

# The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

DOM Chapter 5, Article 44, §54040.8.1 Victim Advocate Communications

CDCR DOM Chapter 5, Article 44, §54040.8.2 Access to outside Victim Advocate

PREA Sexual Violence Awareness Brochure-English and Spanish

Inmate Handbook Information for Victim Advocate-English and Spanish

Rise Poster (SEE AT FACILITY, REFERENCED BUT NO COPY)

Victim Restricted Information Deletion Form

Victims of Sex Crimes Confidential

California Advancing PREA: A Guide to Working with Rape Crisis Centers Toolkit for PCM's

Mailroom Correspondence Instructions

Interviews: Random Inmates, Inmates who reported Sexual Abuse and Rape Crisis Center Staff

# 115.54 Third-party reporting

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

In the PAQ, the facility indicated that they provide a method to receive third party reports of inmate sexual abuse and sexual harassment.

Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.7.2 Notification via *Third Party Reporting of Misconduct against an Employee, Contractor or Volunteer* states that "when a third party, on behalf of an inmate makes an allegation of staff sexual misconduct or sexual harassment against a departmental employee, contractor or volunteer, that allegation or complaint shall be submitted in writing to the Hiring Authority. "The policy defines "third party" as inmates, family members, attorneys, or outside advocates. "When a third-party files such a compliant on behalf of an offender, a supervisory employee shall take the alleged victim to a private setting to discuss the complaint and assess immediate housing needs. Third party reports of staff sexual misconduct or staff sexual harassment shall be forwarded to the Hiring Authority. The Hiring Authority shall forward all documented third-party report of the allegation to a locally designated investigator."

The PREA Information Sheet contained in the Orientation Handbook, informs inmates that a family member or friend, can make a report on their behalf. The agency website provides the public with information on how to report an allegation of sexual abuse. The reporting page provides the public with telephone numbers to the Office of Internal Affairs and the Office of the Inspector General. In addition, the public is informed to provide as much detail as possible to include:

Inmate victim's name and CDCR number
Perpetrator's name and ID number (if available)
Facility at which the incident occurred (date, time, location -i.e. cell, showers, etc.) Incident description
Your name, contact information and relationship to the inmate/victim

The auditor submitted a test report to the Office of the Inspector General utilizing the report misconduct function on the website. The system does notify the user that the report has been received and a reference number. It informs the user that they do not conduct investigations into the allegations, however staff may attempt to resolve issues by communicating and working directly with the prison administrators at the involved institution. In addition, the Office of Inspector General also provides a reporting mechanism for reporting retaliation. The auditor also submitted a test report utilizing this function. The auditor was informed that this was successful.

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.7.2 Third Party Reporting

PREA Orientation in Inmate Handbook- English and Spanish

Agency PREA Web Page

# 115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

In the PAQ, the facility indicated that the agency requires all staff to report immediately any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in the facility, whether it is part of the agency. In addition, the staff are prohibited from revealing any information related to a sexual abuse report to anyone than to the extent necessary.

## Provision (a) & (b):

CDCR DOM Chapter 5, Article 44, §54040.7 (Detection, Notification and Reporting) states, "CDCR employees have a responsibility to protect the offenders 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 Chapter 5, Article 44, §54040.8 (Response) states that "it is the expectation that all staff shall maintain professional behavior when interacting with an alleged victim of sexual violence or staff sexual misconduct and display sensitivity to the potential emotional impact of the situation. Incident-specific information will be treated as confidential, and disclosure made only to employees that have a "need to know" and to other persons and entities as permitted by law."

The auditor reviewed the PREA training curriculum. The curriculum mirrors the above policy. During random staff interviews, all staff reported that are required to immediately report any knowledge, suspicion or information received regarding sexual abuse or sexual harassment. In addition, staff were aware that all information regarding a report of sexual abuse or sexual harassment must be kept confidential.

A memo was sent to all Directors and Wardens in January 2020 which outlines a senate bill on mandatory reporting. It states, in part, that "the reporting requirements apply to California Correctional Health Care Services and the CDCR. CDCR utilizes the PRERA Act of 2003 as the departmental guideline when a patient makes an allegation of sexual abuse or misconduct. CEOs in collaboration with the Warden, shall assign a designee to coordinator with the institutions PCM and grievance staff, to ensure timely notification and reporting of any sexual abuse or misconduct allegations made by patients against a healing arts licensee."

## Provision (c):

CCHCS Chapter 4, 4.1.6 (Prison Rape Elimination Act Procedure) A. Policy (2) states, "Inform the patient of health care staff's duty to report all allegations of sexual violence, staff sexual misconduct, and sexual harassment, and the limitations of confidentiality, at the initiation of services."

Interviews with medical and mental health staff, confirmed that staff disclose limits of confidentiality immediately to the inmates.

## Provision (d):

The State of California does have mandatory reporting laws. Suspected child abuse must be reported to a child protection agency. All allegations of abuse under the Elder and Dependent Adult abuse must be reported to appropriate law enforcement agencies, public agencies and/or licensing entities having jurisdiction. The law requires that reports be made to any police department or sheriff's department. CDCR investigators are classified as peace officers and can receive such reports.

CAC does not house youthful offenders. The facility does house individuals that may be considered elder or a dependent adult. In a memo to the auditor from the agency PREA Coordinator it was stated, "A review of current litigation against CDCR regarding vulnerable adults which resulted in the Clark (developmentally disabled) and Armstrong (physically disabled) remedial plans and the State of California-Health and Human Services Agency, there is no indication of a requirement for CDCR to report to state or local services such as Adult Protective Services. CDCR Investigators are classified as peace officers and receive specialize training in conducting sexual abuse investigations of all persons incarcerated up to and including criminal cases."

The auditor reviewed the agency Watch Commander Checklist (PREA). This facility does not house youthful offenders, however the agency checklist does include notification to the Child Protective Services, if the victim is a minor. The facility Warden was aware of this requirement, however she reiterated that CMC does not house persons under the age of 18.

# Provision (e):

CDCR DOM Chapter 5, Article 44, §54040.7 (Detection, Notification and Reporting) states, "CDCR employees have a responsibility to protect the offenders 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 Chapter 5, Article 44, §54040.7.2 (Notification via Third Party Reporting of Misconduct against an Employee, Contractor or Volunteer) states, "Third party reports of staff sexual misconduct or staff sexual harassment shall be forwarded to the Hiring Authority. The Hiring Authority shall forward the documented third-party report of the allegation to a locally designated investigator."

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

## The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention

CDCR DOM Chapter 5, Article 44, §54040.7 Detection, Notification and Reporting

CDCR DOM Chapter 5, Article 44, §54040.13 Allegation Follow up

CDCR DOM Chapter 5, Article 44, §54040.8 Response

Division of Juvenile Justice Policy 1435 Reporting Suspected Child Abuse or Neglect

PREA Training Curriculum,

PREA Allegation Log

Memorandum from CA Health Care Services to all Wardens, facilities on Mandatory Reporting of Patient Sexual

Abuse or Sexual Misconduct

Interviews: Random Staff, Warden and PREA Coordinator

# 115.62 Agency protection duties

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

In the PAQ, the facility indicated that they take immediate action to protect the inmate. In addition, the facility reported that there has not been an inmate that was subject to a substantial risk of imminent sexual abuse, during the reporting period.

## Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.7 (Detection, Notification and Reporting) states that "CDCR employees have a responsibility to protect the offenders 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."

Further, it stated that in addition to reporting, employees have a responsibility to assist the offender and refer him/her to medical/mental health for evaluation. Staff shall ensure the reporting of the information is done as soon as possible and in a confidential manner."

During interviews with random staff, staff could articulate that they would take immediate actions to keep the inmate safe from harm. This was confirmed with the Director of Adult Prisons and the Facility Warden.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.7 Detection, Notification and Reporting

CDCR 2304 Protection against Retaliation (PAR)-Inmate

CDCR 2305 Protection against Retaliation (PAR)-Staff

Samples of PAR Forms

Interviews: Director of Adult Prisons, Warden, Random Staff

# 115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

On the PAQ, the facility reported that the agency does have a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where the sexual abuse occurred. The facility reported that there have been no allegations received that an inmate was abused while confined at another facility. In addition, the facility reported that there have been no allegations received that was reported at another facility.

# Provision (a), (b), & (c):

CDCR DOM Chapter 5, Article 44, §54040.7.4 (Notification from/to other Confinement Facilities) states, "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 sexual violence or staff sexual misconduct occurred. The initial notification shall be made via telephone contact or electronic mail and will be followed up with a written summary of the alleged victim's statements. Such initial notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation."

CDCR DOM Chapter 5, Article 44, §54040.7.4 (Notification from/to other Confinement Facilities) states, "The hiring authority or agency office receiving notification that an incident occurred at their institution, shall assign and ensure that the allegation is investigated and reported in accordance with DOM section 54040.12. The hiring authority shall be responsible to conduct an Institutional PREA Review Committee. Upon completion, a copy of all documentation related to the allegation shall be returned to the institution where the alleged incident was reported for tracking and audit purposes."

During an interview with the Director of Adult Prisons, they were very knowledgeable regarding the procedures of Warden to Warden notifications. She confirmed that the hiring authority will notify the other hiring authority either by phone or email. The notification is required to be made within seventy-two (72) hours. Documentation of these notifications are maintained. In addition, the facility Warden, stated that the notification is made immediately by email to document the report. The report is sent to the ISU unit. Interviews with the investigators confirmed that if the allegation occurred in a CDCR facility, the ISU will assign the allegation a case number and enter it on the facility allegation log. Both the reporting facility and the receiving facility will utilize the assigned case number. The ISU investigator at the reporting facility will interview the victim and share the information with the investigators at receiving facility. The receiving facility will conduct the investigation and forward the final report and all evidence and documentation back to the reporting facility.

The auditor reviewed three (3) allegations that required Warden to Warden notification. Warden to Warden notification was completed electronically and documentation of the notification was maintained. All notifications were made within twenty-four (24 hours).

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire
CDCR DOM Chapter 5, Article 44, §54040.7.4 Notification from/to other Confinement Facilities
Samples of Warden-to-Warden Notification
Interviews: Warden, PCM, Agency Head

# 115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

In the PAQ, the facility indicated that the agency has a first responder policy that includes all elements required by this standard. In addition, the facility reported that there has been one (1) allegations of sexual abuse whereas a security staff member was notified in a time to collect physical evidence.

### Provision (a) & (b):

CDCR DOM Chapter 5, Article 44, §54040.8 (Response) states, "Upon initial contact with an employee, that employee will take the alleged victim to a private secure location. The Initial Contact Guide has been developed to assist employees in completing the tasks associated with the initial contact. The employee shall request the victim does not: shower; remove clothing without custody supervision; use the restroom facilities and/or consume any liquids."

The agency has developed an Initial Contact Guide for employees to use for the initial contact. The auditor reviewed the Initial Contact Guide which states, "If you are a non-custody staff member, notify the custody supervisor immediately of the area for assistance in responding to this situation and request the victim to the best of your ability does not shower, brush teeth, remove clothing without custody supervision, use the restroom facilities or consume any liquids."

The auditor reviewed the Custody Supervisor Checklist, which states, "Ensure the victim is secured (ensure no visual or physical contact occurs between the victim and the suspect(s)), ensure the crime scene has been secured, request the victim to the best of your ability does not shower, brush teeth, remove clothing without custody supervision, use the restroom facilities or consume any liquids."

Tthe Custody Supervisor Checklist states:

Ensure victim is secured (ensure no visual or physical contact occurs between victim and suspect(s)

Ensure the crime scene has been secured

Request the victim to the best of your ability does not shower, brush teeth, remove clothing without custody supervision, use the restroom facilities or consume any liquids

Ensure the suspect, to the best of ability does not shower, brush teeth, remove clothing without custody supervision, use the restroom facilities or consume any liquids

During annual in-service training, all staff and contractors are trained in their responsibilities if they are the first responder to an incident. Each staff member is instructed to follow the "Initial Contact Guide". During interviews with random staff and first responders, each staff member could articulate their responsibilities if they were to have initial contact with an alleged victim. When asked to confirm the steps that would be taken, a majority stated they would separate the victim and the perpetrator, call for back up, preserve the crime scene and take the victim for a medical evaluation. Many of the staff stated that they would not allow either the victim or the perpetrator to take any action that could destroy physical evidence.

Interviews with custody first responders and random staff confirmed they would follow the Initial Contact Guide and immediately notify supervisors. Without using the Initial Contact Guide they could articulate that they would separate the victim, call for backup, get medical attention and secure the scene. Non-custody staff, stated that they would immediate notify custody staff if an incident were to happen.

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

## The auditor reviewed, analyzed and retained the following evidence related to this standard:

- 1. CAC Pre-Audit Questionnaire
- 2. CDCR DOM Chapter 5, Article 44, §54040.8 Response
- 3. Custody Supervisor Checklist
- 4. Initial Contact Checklist
- 5. Training for Staff
- 6. Interviews:

# 115.65 Coordinated response

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

In the PAQ, the facility indicated that they have developed a written institution plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators and the facility leadership.

# Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.8 (Response) outlines the actions to be taken in response to a sexual abuse incident, which includes but is not limited to initial contact, custody supervisor responsibilities, crime scene preservation, evidence collection, victim advocates, medical and mental health staff responsibilities and forensic medical examination.

## Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire
CDCR DOM Chapter 5, Article 44, §54040.8 Response
CDCR DOM Chapter 5, Article 44, §54040.8.3 Medical Services Responsibilities
CMC Coordinated Response Plan

# 115.66 Preservation of ability to protect inmates from contact with abusers

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that the agency or facility has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012 or since the facility's last PREA audit.

# Provision (a) & (b):

CCPOA Agreement, 4.01 Management Rights states, "...to establish and change work schedules, assignments and facility locations; to hire, transfer, promote, demote employees; to lay off, terminate or otherwise relieve employees from duty for lack of work or other legitimate reasons; to suspend, discharge or discipline employees; to alter, discontinue or vary past practices and otherwise take such measures as the employer may determine necessary to be necessary for the orderly, efficient and economical operations of CDCR."

CDCR employees are represented by the California Correctional Peace Officers Association, Bargaining Unit 6, Corrections. The auditor reviewed the agreement and did not see any notations that would limit the agency's ability to remove alleged staff sexual abuser from having contact with any inmates, pending the outcome of an investigation. The disciplinary process outlined in the agreement is consistent with the provisions in §115.76. The Deputy Director of Adult Prisons confirmed that the agreement has been renewed and the agency can remove staff, to protect victims of staff sexual misconduct, sexual harassment, or retaliation.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

California Correctional Peace Officer Association Agreement (CCPOA)

Interview: Agency Head

# 115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

In the PAQ, the facility stated that the agency has a policy to protect all inmates and staff who report sexual abuse or sexual harassment or who cooperate with an investigation from retaliation. In addition, the facility reported that there have not been incidents of retaliation during the reporting period.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.1 (Policy) states, "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. Retaliatory measures include, but are not limited to, coercion, threats of punishment, or any other activities intended to discourage or prevent a staff or offender from reporting an incident(s) or cooperating with an investigation of an incident(s)".

The facility reported that the facility PREA Compliance Manager and the Local Designated Investigators have been charged with retaliation monitoring.

## Provision (b):

CCR Title 15, §3401.5 (Staff Sexual Misconduct-Protective Measures) (g) states, "Multiple protection measures shall be considered to protect inmate victims who reported staff sexual misconduct or cooperated with staff sexual misconduct investigations including but not limited to housing changes or transfers for inmate victims, removal of alleged staff from contact with victims, and emotion support services for inmates or staff who fear retaliation for reporting staff sexual misconduct or staff sexual harassment or for cooperating with an investigation."

The auditor reviewed CDCR Form 2304 Protection against Retaliation (PAR)-Inmate, the form indicates that there must be a review of disciplinary reports, and housing changes beginning at fifteen (15) day monitoring period and increases at fifteen (15) day intervals. After the ninety (90) day monitoring period, the monitor does ask if there is a "continuing need", if there is, the user is instructed to complete an addition PAR form and attach to the original document.

The auditor reviewed CDCR Form 2305 Protection against Retaliation (PAR)-Staff, the form indicates that there is must be a review of post reassignments (job changes), removal of alleged staff abuser from contact, facility transfer, or other, and beginning at fifteen (15) day monitoring period, the monitor does ask if there is a "continuing need", if there is the user is instructed to complete an additional PAR form and attach to the original document.

CDCR DOM Chapter 5, Article 44, §54040.1 (Policy) states, "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. Retaliatory measures include, but are not limited to, coercion, threats of punishment, or any other activities intended to discourage or prevent a staff or offender from reporting the incident (s) or cooperating with investigation of an incident(s)."

## Provision (c), (d) & (e):

CDCR DOM Chapter 5, Article 44, §54040.13 (Allegation Follow-up) states, "For at least 90 days following a report of sexual violence or staff sexual misconduct, the institutional PCM shall monitor the conduct and treatment of inmates or employees who have reported the sexual violence or staff sexual misconduct and of the victim to ensure there are no changes that may suggest retaliation....The PCM shall act promptly (in accordance with DOM Article 14, Section 31140.22 to remedy any such retaliation and ensure a CDCR Form 2304 or 2305, Protection Against Retaliation, is initiated....The monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need."

The auditor reviewed CDCR Form 2304 Protection against Retaliation (PAR)-Inmate and the CDCR Form 2305 Protection against Retaliation (PAR)-Staff. Both forms, state, "The PREA Compliance Manager or designee shall monitor staff/inmate who have reported an allegation of sexual violence or sexual misconduct or who cooperated with a sexual violence/misconduct investigation for 90 days following an allegation. If the allegation is determined to be unfounded, the monitoring shall cease. The PREA Compliance Manager or designee shall interview the inmate bi-weekly (every other week) to review his/her perception of retaliation for the allegation or cooperation in the investigation and document below. If retaliation is detected ensure immediate corrective action is taken and documented."

The facility Warden confirmed that retaliation monitoring is the responsibility of the investigator or the PREA Compliance Manager. Retaliation monitoring is completed for ninety (90) days. The monitor will meet with the inmate at 15 days, 30

days, 45 days, 60 days, 75 days and 90 day intervals.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

# The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire
CDCR DOM Chapter 5, Article 44, §54040.1 Policy
CDCR DOM Chapter 5, Article 44, §54040.13 Allegation Follow up
Protection Against Retaliation- Form 2305, Staff
CCR Title 15, §3401.5 Staff Sexual Misconduct
CCR Title 15, §3335 Administrative Segregation, 30 day follow-up
CDCR Form-Institutional PREA Review Committee
Protection Against Retaliation (PAR) Form 2304, Inmate

Interviews: Warden, Investigative Staff

### 115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

In the PAQ, the facility stated that the agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregation housing unless an assessment of all available alternatives has been made. In addition, the facility reported that no inmates have been placed in segregation for protection of sexual abuse.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.6 (Offender Housing) states that "offenders at high risk for sexual victimization, as identified on the PREA Screening Form, 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."

CCR Title 15, Article 7, §3335 (D1) (Administrative Segregation) states that "if placement in NDS is related to being a victim of a PREA incident, the inmate will be afforded all programs, privileges, and education in accordance with section 3044 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 limitations."

CCR Title 15, Article 7, §3335 (D2) (Administrative Segregation) states that "the facility shall assign such inmates to NDS only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days."

CCR Title 15, Article 7, §3335 (D3) (Administrative Segregation) states, "Every 30 days, the facility shall afford each such inmate with a review by the assigned custody supervisor to determine whether there is a continuing need for segregation from the general population."

During the site review, the auditor confirmed with staff who supervisor inmates in segregated housing, that currently there are no inmates assigned to segregated housing that have been the victim of sexual abuse. It was reported that inmates would not be placed in segregated housing strictly for separation of the victim and the abuse. Staff reported that the abuser would be placed in segregated housing. This was also confirmed by the facility Warden. He stated that the facility does have alternative means to protect the inmate without the use of segregated housing.

### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.6 Offender Housing

CCR Title 15, Article 7, §3335 Administrative Segregation

Interviews: Warden, Segregation Staff, Inmates who reported abuse

### 115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that the agency has a policy related to criminal and administrative investigations.

#### Provision (a):

California Penal Code 830.5 states "The following persons are peace officers whose authority extends to any place in the state while engaging in the performance of the duties of their respective employment and for carrying out the primary function of their employment or as required under Sections 8597, 8598, and 8617, (b) correctional officer employed by the Department of Corrections and Rehabilitation..."

CDCR DOM Chapter 3, Article 14, §31140.6 (Authority to Conduct Investigations) states, "Pursuant to Government Code Section 11182, the Secretary of the Department delegates the authority to initiate and conduct investigations to the Assistant Secretary, OIA."

CDCR DOM Chapter 3, Article 14, §31140.1 (Internal Affairs Investigations) states, "Every allegation of employee misconduct with the California Department of Corrections and Rehabilitation (CDCR or Department) shall be promptly reported, objectively reviewed, and investigated when appropriate."

The Investigative Services Unit (ISU) investigates all allegations of inmate on inmate and staff on inmate sexual abuse and sexual harassment. The Local Designated Investigators (LDI) are sworn peace officers and conduct both criminal and administrative investigations. LDI's are required to attend general PREA training and specialized training in sexual abuse investigations.

The auditor reviewed the CDCR Basic Investigator Course, Specialized PREA Training for Locally Designated Investigator Curriculum. The instructional goal states "Investigators will understand their role and responsibilities in conducting an investigation within the correctional institution." The curriculum includes sections on interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, proper handling of sexual abuse evidence collection in a confinement setting and how to identify evidence required to substantiate a case for administrative action or prosecution referral. The auditor confirmed through file review and the facility PREA Compliance Manager, that each investigator is required to attend the specialized training.

# Provision (b):

CDCR DOM Chapter 5, Article 44, §54040.4 (Education and Prevention) states "All employees who are assigned to investigate sexual violence and/or staff sexual misconduct will receive specialized training per PC Section 13516 (c)."

The auditor reviewed the CDCR Basic Investigator Course, Specialized PREA Training for Locally Designated Investigator Curriculum. The instructional goal states "Investigators will understand their role and responsibilities in conducting an investigation within the correctional institution." The curriculum includes sections on interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, proper handling of sexual abuse evidence collection in a confinement setting and how to identify evidence required to substantiate a case for administrative action or prosecution referral.

The Investigative Services Unit (ISU) investigates all allegations of inmate on inmate and staff on inmate sexual abuse and sexual harassment. The Local Designated Investigators (LDI) are sworn peace officers and conduct both criminal and administrative investigations. LDI's are required to attend general PREA training and specialized training in sexual abuse investigations.

The auditor reviewed the CDCR Basic Investigator Course, Specialized PREA Training for Locally Designated Investigator Curriculum. The instructional goal states "Investigators will understand their role and responsibilities in conducting an investigation within the correctional institution." The curriculum includes sections on interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, proper handling of sexual abuse evidence collection in a confinement setting and how to identify evidence required to substantiate a case for administrative action or prosecution referral. The auditor confirmed through file review and the facility PREA Compliance Manager, that each investigator is required to attend the specialized training.

### Provision (c) (d) (e):

CCR Title 15, §3316 (Referral for Criminal Prosecution) (a) states, "Except as provided in subsection (b), all criminal misconduct by persons under the jurisdiction of the department or occurring on the 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 charged."

The auditor reviewed the CDCR OIG Investigator's Field Guide, May 2008, which states, "In investigator interviews involving suspected criminal misconduct the employee shall be read his specific warning of rights as delineated in the Miranda decision. If the employee waives that right, questioning can proceed. All statements made by the employee waiving the Miranda warning rights can be used in both criminal and administrative proceedings. Should the employee invoke his/her rights under the Miranda decision, the agency shall consult the senior, SAC and the local DA in the county that the case will be referred to regarding the decision to take a compelled statement." During interviews with investigators, the auditor confirmed that the process is being followed.

CDCR DOM Chapter 5, Article 44, §54040.12 (Investigations) states, "Credibility of an alleged victim, suspect, or witness must be determined based on sound facts and evidence rather than an individual's status."

CDCR DOM Chapter 1, Article 20, §14030.6 (Who may request a Polygraph Examination) states, "An employee, inmate, or parolee under investigation for an alleged violation of the law or a regulation my make a request for a polygraph examination."

No person shall be ordered to take a polygraph examination."

During interviews with investigators, it was confirmed that the agency does not require an victim to submit to polygraph as a condition for proceeding with an investigation. Investigators do try and determine if staff actions or failures to act contributed to the abuse. Investigators are required to complete a written report. The auditor reviewed five (5) investigations. Each investigation contained a written report. The written report included the circumstances of how the allegation was received and what was alleged, review of prior complaints, a description of evidence to include video evidence and interviews, reasoning behind credibility assessment and the investigative fact and findings. In addition, no investigations indicated a required elevation to the Office of Internal Affairs or a referral for prosecution.

The auditor reviewed a memorandum to all Wardens, dated December 29, 2021. The memorandum indicates that within the Office of Internal Affairs (OIA) the Allegation Inquiry Management Section (AIMS) was established to conduct independent and objective inquiries into specified allegations originating from grievances submitted by incarcerated persons and parolee.

Effective January 1, 2022, the scope of AIMS is expanded to include all allegations of unnecessary or excessive use of force (UOF) and all allegations of staff (on offender) sexual misconduct, to include allegations of sexual harassment and sexual assault by a staff member. All allegations of staff sexual harassment or staff sexual assault of an incarcerated person or parolee shall be accepted from any source.

The auditor reviewed the CDCR OIG Investigator's Field Guide, May 2008, which states, "In investigator interviews involving suspected criminal misconduct the employee shall be read his specific warning of rights as delineated in the Miranda decision. If the employee waives that right, questioning can proceed. Any and all statements made by the employee waiving the Miranda warning rights can be used in both criminal and administrative proceedings. Should the employee invoke his/her rights under the Miranda decision, the agency shall consult the senior, SAC and the local DA in the county that the case will be referred to regarding the decision to take a compelled statement." During interviews with investigators, the auditor confirmed that the process is being followed.

# Provision (f) & (g):

CDCR DOM Chapter 5, Article 44, §54040.12 (Investigations) states, "The inquiry and/or investigative information will be thoroughly documented on a Confidential Memorandum. The investigator will include an effort to determine whether staff actions or failures to act contributed to the abuse. The Confidential Memorandum will include 1) a description of the physical and testimonial evidence; 2) the reasoning behind credibility assessments; 3) the investigative fact and findings."

### Provision (h):

CCR Title 15, §3316 (Referral for Criminal Prosecution) (a) states, "Except as provided in subsection (b), all criminal misconduct by persons under the jurisdiction of the department or occurring on the 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 charged."

The facility Warden, confirmed all substantiated allegations that appear criminal will be forwarded to the District Attorney's Office for prosecution.

### Provision (i):

CDCR DOM Chapter 5, Article 44, §54040.17 (Records Retention) states, "All case records associated with such reports including incident reports, investigation reports, offender information, case dispositions, medical and counseling evaluation findings, recommendations for post-release treatment and/or counseling shall be retained in accordance with the CDCR Records Retention Schedule."

CDCR Records Retention Schedule Update states, "The investigatory File is to be retained in 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."

### Provision (j):

CDCR DOM Chapter 5, Article 44, §54040.12 (Investigations) states, "The departure of the alleged suspect or victim from the employment or control of CDCR shall not provide a basis for terminating an investigation."

### Provision (k):

CDCR custody staff are certified peace officers and are certified to conduct criminal and administrative investigations, therefore this provision is not applicable.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with all provisions of this standard and no corrective action is required.

### The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention

CDCR DOM Chapter 5, Article 44, §54040.12 Investigations

CDCR DOM Chapter 5, Article 44, §54040.17 Records Retention

CDCR DOM Chapter 1, Article 20, §14030.6 Who may request a Polygraph Examination

CDCR DOM Chapter 3, Article 14, §31140.1 Internal Affairs Investigations

CDCR DOM Chapter 3, Article 14, §31140.6 Authority to Conduct Investigations

CCR Title 15, §3316 Referral for Criminal Prosecution

California Penal Code 830.5

CDCR Records Retention Schedule Update

CDCR Basic Investigator Course, Specialized PREA Training for Locally Designated Investigator

CDCR OIG Investigator's Field Guide

Interviews: Investigative Staff, PREA Coordinator, PREA Compliance Manager, and Inmates who reported sexual abuse

### 115.72 Evidentiary standard for administrative investigations

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that the agency imposes a standard of a preponderance of evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.12 (Investigation) states, "All allegations of sexual violence, staff sexual misconduct, and sexual harassment shall be investigated and the findings documented in writing. No standard higher than the preponderance of evidence is to be used when determining whether allegations of sexual abuse or sexual harassment ware sustained."

CDCR DOM Chapter 3, Article 22, §33030.13.1 (Investigative Findings) defines "not sustained", the investigation failed to disclose a preponderance of evidence to prove or disprove the allegation made in the complaint and "sustained", the investigation disclosed a preponderance of evidence to prove the allegation(s) made in the complaint."

Interviews with the facility investigators confirmed that the agency imposes a standard of a preponderance of evidence when determining whether an allegation of sexual abuse or sexual harassment are substantiated. In addition, this was confirmed during the review of the investigation files.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with all provisions of this standard and no corrective action is required.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire
CDCR DOM Chapter 5, Article 44, §54040.12 (Investigation)
CDCR DOM Chapter 3, Article 22, §33030.13.1 (Investigative Findings)
Interviews: Investigative Staff

### 115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that the agency has a policy requiring that any inmate who allege that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, the results of the investigation. In addition, the facility reported that all victims were notified of the results of the investigation.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.12.5 (Reporting to Offenders) states, "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."

CDCR DOM Chapter 5, Article 44, §54040.12.5 (Reporting to Offenders-Staff on Offender) states, "The PCM or designee shall inform the offender (unless the allegation has been determined to be unfounded) whenever the alleged abuser has been; The staff member is no longer posted within the inmate's unit; The staff member is no longer employed at the facility; Indicted on the alleged sexual misconduct; Convicted of the alleged sexual misconduct."

### Provision (b):

CDCR custody staff are certified peace officers and are certified to conduct criminal and administrative investigations, therefore this provision is not applicable.

#### Provision (c):

CDCR DOM Chapter 5, Article 44, §54040.12.5 (Reporting to Offenders-Staff on Offender) states, "The PCM or designee shall inform the offender (unless the allegation has been determined to be unfounded) whenever the alleged abuser has been; The staff member is no longer posted within the inmate's unit;

The staff member is no longer employed at the facility; Indicted on the alleged sexual misconduct; Convicted of the alleged sexual misconduct."

### Provision (d):

CDCR DOM Chapter 5, Article 44, §54040.12.5 (Reporting to Offenders-Offender on Offender) states, "Following an investigation into an offender's allegation that he or she suffered from sexual violence by another offender, institution shall inform the alleged victim if the allegation has been substantiated, unsubstantiated, or unfounded. The institution shall also inform the alleged victim whenever the alleged abuser has been: Indicted on the alleged sexual violence; Convicted of the charge."

## Provision (e):

CDCR DOM Chapter 5, Article 44, §54040.8.1 (Custody Supervisor Responsibilities) states, "Upon conclusion of the investigation, the alleged victim will be provided written notification of the findings as described in DOM Section 54040.12.5."

The agency utilizes 128-B form to make notification to the victim. The form indicates the conclusion, to include substantiated, unsubstantiated and unfounded.

The form also includes a section that will notify the victim if the staff has been removed from the unit, been terminated from employment, has been indicted on the allegations or has been convicted of the allegations. In addition, there is a section, if the allegations involve another inmate that states if the perpetrator was moved to another housing unit or facility, if the inmate was indicted on the allegations or if the inmate was convicted of the allegations. Notification is made to the victim, in person and the victim is required to sign the form, to document that he/she was notify.

### Provision (f):

CDCR DOM Chapter 5, Article 44, §54040.12.5 (Reporting to Offenders-Staff on Offender) states, "The agency's obligation to report/inform the offender of changes shall terminate if the offender is released from the agency's custody."

The agency utilizes 128-B form to make notification to the victim. The form indicates the conclusion, to include substantiated, unsubstantiated and unfounded. The form also includes a section that will notify the victim if the staff has been removed from the unit, been terminated from employment, has been indicted on the allegations or has been convicted of the allegations. In addition, there is a section, if the allegations involve another inmate that states if the perpetrator was moved to another housing unit or facility, if the inmate was indicted on the allegations or if the inmate was convicted of the allegations. Notification is made to the victim, in person and the victim is required to sign the form, to document that he/she was notify.

The facility Warden, PREA Compliance Manager and Investigators confirmed the process.

he auditor confirmed through file reviews and interviews with investigators, that if an allegation is received at CAC, and the allegation occurred at another CDCR facility, the facility Warden will complete the Warden to Warden notification as required in standard §115.63. The CAC ISU will open an investigation, assign a case number and will keep in communication with the investigating facility. All documentation of the investigation will be shared with the ISU at CAC. CAC is responsible to complete the SSV-IA form and forward to the agency PREA Coordinator.

# **Conclusion:**

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with all provisions of this standard and no corrective action is required.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire
CDCR DOM Chapter 5, Article 44, §54040.12 (Investigation)
CDCR DOM Chapter 3, Article 22, §33030.13.1 (Investigative Findings)

Interviews: Investigative Staff

### 115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that staff is subject to disciplinary sanctions up to and including termination for violating the agency sexual abuse or sexual harassment policies. In addition, the facility reported that there has one staff member that has been disciplined for violations of the policies during the reporting period.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.3 Definitions defines staff sexual misconduct as any threatened, coerced, attempted, or completed sexual contact, assault or battery between staff and offenders. Any sexual misconduct by staff directed toward an offender, as defined in California Code of Regulations (CCR), Title 15, Section 3401.5 and Penal Code (PC) Section 289.6. The legal concept of "consent" does not exist between staff and offenders; any sexual behavior between them constitutes sexual misconduct and shall subject the staff member to disciplinary action and/or prosecution under the law.

CCR Title 15, §3401.5 (Staff Sexual Misconduct) (b) Penalties states, "All allegations of staff sexual misconduct shall be subject to investigation, which may lead to disciplinary action and/or criminal prosecution."

### Provision (b), (c) & (d):

CDCR DOM Chapter 3, Article 22, § 33030.19 (Employee Disciplinary Matrix) indicate the penalty for sexual misconduct with an inmate(s)/parolees is dismissal.

CDCR DOM Chapter 5, Article 44, §54040.12.4 (Reporting to Outside Agencies for Contractors) states, "Any contractor or volunteer who engages in staff sexual misconduct shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies by the hiring authority or designee."

During an interview with the facility Warden, she confirmed that staff would be disciplined up to and including termination for violations of the agency policy. Any contractor who violates the policy would be removed from the facility with no further contact with inmates. The facility has not had an allegation that required staff or contractor discipline, during the reporting period. The auditor confirmed this during the investigation file review.

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with all provisions of this standard and no corrective action is required.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.3 Definitions

CDCR DOM Chapter 3, Article 22, § 33030.19 Employee Disciplinary Matrix

CDCR DOM Chapter 5, Article 44, §54040.12.4 Reporting to Outside Agencies for Contractors

CCR Title 15, §3401.5 Staff Sexual Misconduct

### 115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that agency policies requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies and to relevant licensing bodies. In addition, the facility reported that there have been zero contractors/ volunteers that have been reported to licensing bodies for engaging in sexual abuse.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.12.4 (Reporting to Outside Agencies for Contractors) states, "Any contractor or volunteer who engages in staff sexual misconduct shall be prohibited from contact with offenders and shall be reported to relevant licensing bodies by the hiring authority or designee."

### Provision (b):

CDCR DOM Chapter 10, Article 9, §101090.9 (Termination) states, "The hiring authority may limit or discontinue activities of any volunteer or volunteer group which may impede the security and/or orderly operations of the institution/region. A report explaining the occurrences and outcome shall be routed to the hiring authority with a copy to the CRM or designated manager."

CDCR custody staff are sworn peace officers within the State of California. Locally designated investigators (LDI) can conduct criminal investigations, and therefore there is no need for the facility to involve outside law enforcement. The facility Warden stated that if a contractor or volunteer violated the agency policy, they would be removed from the facility and their access card would be revoked. All licensing bodies would be notified of the substantiated investigation and the case would be referred to the local District Attorney's Office. There have not been any substantiated cases that would require the notification or referral.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with all provisions of this standard and no corrective action is required.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.12.4 Reporting to Outside Agencies for Contractors

CDCR DOM Chapter 10, Article 9, §101090.9 Termination

Interviews: Warden

### 115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that inmates are subject to disciplinary sanction only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse. In addition, the facility reported that there have zero been any administrative findings of inmate on inmate sexual abuse that have occurred at the facility.

#### Provision (a):

CCR Title 15, §3007 (Sexual Behavior) states, "Inmates may not participate in illegal sexual acts. Inmates are specifically excluded in laws, which remove legal restraints from acts between consenting adults. Inmates must avoid deliberately placing themselves in situations and behaving in a manner, which is designed to encourage illegal sexual acts."

CDCR DOM Chapter 5, Article 44, §54040.15 (Disciplinary Process) states, "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 the CCR Section 3320 regarding hearing procedures and time limitations and CCR Section 3316, Referral for Criminal Prosecution"

#### Provision (b):

CCR Title 15, §3323 (Disciplinary Credit Forfeiture Schedule) (b) (5) classifies rape, attempted rape, sodomy, attempted sodomy, oral copulation and attempted oral copulation against the victim's will as a Division A-1 offense which can result in forfeiture of credit from 181 days to 360 days.

Sanctions for serious rule violations are determined by a disciplinary matrix and are commensurate with the nature and circumstances of the abuse that was committed.

Sanctions for serious rule violations are determined by a disciplinary matrix and are commensurate with the nature and circumstances of the abuse that was committed.

The facility Warden confirmed that inmates are subject to disciplinary sanctions after an administrative finding that the inmate engaged in sexual abuse or after a criminal finding of guilt.

### Provision (c):

CDCR DOM Chapter 5, Article 44, §52080.8.5 (Special Considerations of Rules Violations Related to Mental Illness or Participation in the Developmental Disability Program) states, "Inmates who are alleged to have committed a Rules Violation shall receive a Mental Health Assessment, via completion of the CDCR Form 115-MH-A Rules Violation Report."

CCR Title 15, §3317 (Mental Health Evaluations for Disciplinary Hearings) states, "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. All inmates at the EOP, MHCB, and DMH level of care, who receive a CDC 115, Rules Violation Report shall be referred for a Mental Health Assessment."

# Provision (e) & (f):

CDCR DOM Chapter 5, Article 44, § 54040.15.1 (Alleged Victim-False Allegations) states, "Following the investigation into sexual violence, or staff sexual misconduct, if it is determined that the allegations made were not in good faith or based upon a reasonable belief that the alleged conduct occurred, the offender making the allegations may be subject to disciplinary action. A charge of "making a false report of a crime" a Division E offense, is appropriate only if evidence received indicates the offender knowingly make a false report."

The facility reported that there have been no inmates that have been disciplined for making a false allegation of sexual abuse. This was confirmed with the facility investigators.

## Provision (g):

CCR Title 15, §3007 (Sexual Behavior) states, "Inmates may not participate in illegal sexual acts. Inmates are specifically excluded in laws, which remove legal restraints from acts between consenting adults. Inmates must avoid deliberately placing themselves in situations and behaving in a manner, which is designed to encourage illegal sexual acts."

CDCR prohibits sexual activity between inmates. During discussions with investigators, the auditor confirmed that all acts of sexual activity are reviewed to ensure that inmates have not been coerced into participating in the act.

### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with all provisions of this standard and no corrective action is required.

### The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.15 Disciplinary Process

CDCR DOM Chapter 5, Article 44, 54040.7 Referral for Mental Health Screening

CDCR DOM Chapter 5, Article 44, §52080.8.5 Special Considerations of Rules Violations Related to Mental Illness or Participation in the Developmental Disability Program

CDCR DOM Chapter 5, Article 44, § 54040.15.1 Alleged Victim-False Allegations

CCR Title 15, §3007 Sexual Behavior

CCR Title 15, §3323 Disciplinary Credit Forfeiture Schedule

CCR Title 15, §3317 Mental Health Evaluations for Disciplinary Hearings

Interviews: Warden and Medical and Mental Health Staff

### 115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that all inmates who disclosed any prior sexual victimization during a screening or inmates who have previously perpetrated sexual abuse are offered a follow-up meeting with a medical or mental health practitioner. In addition, the facility reported that there have been twelve (12) inmates who disclosed prior victimization during screening who were offered a follow up meeting with mental health and one hundred (100) inmates who previously perpetrated sexual abuse, were offered a follow up meeting with mental health.

#### Provision (a) & (b)& (c):

CDCR DOM Chapter 5, Article 44, 54040.7 (Referral for Mental Health Screening) states, "If it is reported by an offender during the initial intake screening or at any other time during his/her confinement within CDCR 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- MH-5, Mental Health Referral Chrono."

Program Guide Overview-Mental Health Delivery System states, "Any inmate can be referred for mental health services at any time" The document also provides a list of scenarios, when a referral shall be made. The list includes an inmate has been identified as a possible victim per the Prison Rape Elimination Act and an inmate demonstrates sexually inappropriate behavior as per the Exhibitionism policy.

The auditor reviewed the PREA intake screening that the facility utilizes to assess for risk of sexual victimization which considers considers all criteria required by this provision, which include: 1A) Victim of a substantiated or unsubstantiated incident of sexual violence in a correctional setting (not including sexual harassment); 1B) Have you ever experienced sexual victimization in a correctional setting that you have not previously reported; 2) Have you ever experienced sexual victimization in a non-correctional setting 3) Mental, physical, or developmental disability, 4) Age? (21 and under or 65 and over); 5) Physical Build 6) any prior or current convictions for sex offenses against an adult or a child; 7) whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; 8) first incarceration in state prison; 9) exclusively non-violent criminal history (convictions only) 10) inmate currently consider themselves vulnerable to sexual victimization. The facility does not detain inmates solely for civil immigration.

When five (5) or more answers are "Yes" to questions 2 through 10, or a "Yes" was answered to question 1A and/or 1B the scoring routine will suggest the inmate is "at risk as a victim".

In addition, the PREA intake screening reviews the inmate for risk of being sexually abusive and considers 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 five years; 4) guilty finding for non-sexual violent offense in a correctional setting.

When all (3) answers are "Yes" to questions 2, 3, and 4 and a "Yes" was answered on question 1, the scoring routine will suggest the inmate is "at risk as an abuser."

If questions 1A, 1B, 2 or 6 in section A or questions 1 or 2 in Section B are "Yes", staff is required to ask the inmate if he/she would like a Mental Health referral and must check if the inmate declined a mental health referral or if the inmate accepted mental health, and completes a CDCR 128-MH5, Mental Heath Referral Chrono and submit it to mental health.

Referrals are made utilizing the 128 MH5 form and forwarded to the mental health office. When received the referral is logged and entered into the data tracking system, and scheduled for a follow-up with the appropriate clinician. The auditor reviewed screenshots of the data tracking system.

In the Pre-Audit questionnaire, the facility reported twelve (12) inmates had reported that they experienced sexual abuse in a non-correctional setting during the past twelve months. During the site review, the facility provided the auditor with a list of inmates who indicated based on their intake screening that they had experienced prior sexual abuse in a non-correctional setting. The audit team randomly selected four (4) inmates for interviews, all reported they were offered mental health.

## Provision (d):

CDCR DOM Chapter 5, Article 44, §54040.7 (Detection, Notification and Reporting) states, "Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, and program assignments, or as otherwise required by Federal, Sate, or local law.

CDCR DOM Chapter 5, Article 44, §54040.3 Definitions define "need to know" basis, when the information is relevant and necessary in the ordinary performance of that employee or contractor's official duties."

#### Provision (e):

CCHCS DOM Chapter 4, Article 1, §4.1.6 Prison Rape Elimination Act states, "When a patient who is over 18 years or over reports to health care staff that they were a victim of sexual abuse that occurred outside of an institutional setting, for the purpose of reporting the incident to the appropriate law enforcement agency, health care staff shall: 1) provide the patient with the CDCR 7552 Prison Rape Elimination Act Authorization for Release of Information to complete for their authorization to release information.

The auditor reviewed CDCR Form 7552 Prison Rape Elimination Act Authorization for Release of Information. The form states, "This form shall be completed if a patient over the age of 18 alleged to California Correctional Health Care Services staff to be a victim of sexual violence or misconduct that occurred outside of an institutional setting for the purposes of reporting the incident to the appropriate law enforcement agency, prosecutor's office and any other appropriate agency."

The auditor reviewed CDCR Form 7448 Informed Consent for Mental Health Care, which states, "Information shared in treatment is confidential and will be discussed only with the treatment team except under the following situations: I pose a threat to the safety of myself and/or others or I am unable to care for myself, and/or I engage in acts of sexual misconduct, or I have been sexually assaulted or harassed by other inmates or staff."

Interviews with Mental Health staff, indicated that they are aware of obtaining informed consent from inmates before reporting information that occurred outside of an institutional setting.

While onsite, the audit team asked for a list of inmates who indicated based on their intake screenings that they had previously perpetrated or been a victim of of sexual abuse. The list provided included twelve (12) inmates.

### The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, 54040.7 Referral for Mental Health Screening

CDCR DOM Chapter 5, Article 44, §54040.7 Detection, Notification and Reporting

CCHCS DOM Chapter 4, Article 1, §4.1.6 Prison Rape Elimination Act

CDCR DOM Chapter 5, Article 44, §54040.3 Definitions

Program Guide Overview-Mental Health Delivery System

CDCR Mental Health Referral Chrono 128 MH5

CDCR Form 7552 Prison Rape Elimination Act Authorization for Release of Information

CDCR Form 7448 Informed Consent for Mental Health Care

Interviews: Inmates who Disclose Sexual Victimization, Staff Responsible for Risk Screening and Medical and Mental Health Staff

### 115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of these services is according to the medical/mental health staff's professional judgment.

#### Provision (a):

CDCR DOM Chapter 5, Article 44, §54040.8.3 (Medical Services Responsibilities) states, "Licensed health care staff shall determine and identify any injuries sustained by the alleged victim and suspect, assess and identify if the are urgent/emergent, and provide emergency medical care to the alleged victim and suspects."

CCHCS Chapter 16 §1.16.2 (Prison Rape Elimination Act Procedures) states, "The objective of this procedure is to establish the process for the California Correctional Health Care Services to provide medically necessary emergency treatment, follow-up services, treatment plans, and when necessary, referrals to patients who are alleged victims of sexual violence, staff sexual misconduct, and sexual harassment consistent with its duties under the California Department of Corrections and Rehabilitation (CDCR) Prison Rape Elimination Act policy, and CDCR Department Operations Manual."

CDCR DOM Chapter 5, Article 44, §54040.8.3 (Mental Health Responsibilities) states, "All victims of sexual violence or staff sexual misconduct shall be referred for an emergent SRE (Suicide Risk Evaluation).......In addition, "All victims of sexual violence or staff sexual misconduct shall be referred for a routine Mental Health Evaluation regardless of the outcome of the SRE."

The auditor reviewed four (4) investigations, each investigation provided documentation that all who reported an allegation, were seen by medical/mental health staff at the time of the report. This practice was also confirmed during interviews with medical and mental health staff.

#### Provision (b):

This provision would not be applicable to the facility.

### Provision (c):

CDCR DOM Chapter 5, Article 44, §54040.9 (Forensic Medical Examination) states, "As required by Penal Code Section 2638 (part of AB550), immediate HIV/AIDS prophylactic measures will be provided. In addition, information regarding sexually transmitted infections, HIV and pregnancy options, will be discussed with the victim and/or suspect."

CDCR CCHCS policy 4.1.6 Prison Rape Elimination Act, Procedure (a) states, Health care staff shall inform the victim and/or suspect that custody staff will transport them to an outside contracted SART facility for an examination if deemed appropriate as indicated in the DOM Section 54040.12.1. The outside contracted count SART team is responsible to offer the following:

Test for STIs/STDs and HIV as medically appropriate for patients who are the victims or suspects of sexual abuse. Pregnancy test for patients who are victims of sexually abusive vaginal penetration.

A Forensic Medical examination for patients who are alleged victims and suspects of sexual violence.

Interviews with medical and mental health confirmed that secondary information is shared with victims regarding sexually transmitted infections, HIV and pregnancy options, if needed.

### Provision (d):

CDCR CCHCS Policy- Grievance and Administration Chapter 10, 1.10 Copayment Program Policy states "The copayment shall not be charged if the health care service(s) is considered to be...treatment services relating to sexual abuse or assault."

The Director of Adult Prisons and medical/mental health confirmed that inmates are not charged for treatment services related to sexual abuse or assault.

### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.8.3 Medical Services Responsibilities

CDCR DOM Chapter 5, Article 44, §54040.8.3 Mental Health Responsibilities

CDCR DOM Chapter 5, Article 44, §54040.9 Forensic Medical Examination

CCHCS Chapter 16 §1.16.2 (Prison Rape Elimination Act Procedures)

CCHCS Policy- Grievance and Administration Chapter 10, 1.10 Copayment Program Policy

CDCR CDCR CCHCS policy 4.1.6 Prison Rape Elimination Act, Procedure

Interviews: Director of Adult Prisons and Medical/Mental Health Staff

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

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that the facility offers medical and mental health evaluations, and treatment all inmates who have been victimized by sexual abuse in any prison, jail, and lockup or juvenile facility. In addition, inmate victims are offered tests for sexually transmitted infections as medically appropriate and attempts to conduct mental health evaluations on all inmate abusers within sixty (60) days of learning of such abuse history.

#### Provision (a) & (b) & (c):

CDCR DOM Chapter 5, Article 44, 54040.7 (Referral for Mental Health Screening) states, "If it is reported by an offender during the initial intake screening or at any other time during his/her confinement within CDCR 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- MH-5, Mental Health Referral Chrono."

Program Guide Overview-Mental Health Delivery System states, "Any inmate can be referred for mental health services at any time" The document also provides a list of scenarios, when a referral shall be made. The list includes an inmate has been identified as a possible victim per the Prison Rape Elimination Act and an inmate demonstrates sexually inappropriate behavior as per the Exhibitionism policy.

CCHCS Chapter 16 §1.16.2 (Prison Rape Elimination Act Procedures) states, "The objective of this procedure is to establish the process for the California Correctional Health Care Services to provide medically necessary emergency treatment, follow-up services, treatment plans, and when necessary, referrals to patients who are alleged victims of sexual violence, staff sexual misconduct, and sexual harassment consistent with its duties under the California Department of Corrections and Rehabilitation (CDCR) Prison Rape Elimination Act policy, and CDCR Department Operations Manual."

The auditor reviewed twelve (12) investigations, each investigation provided documentation that all who reported an allegation, were seen by medical/mental health staff at the time of the report. During interviews with medical/mental health staff, it was reported that services are offered to all victims of sexual abuse at no charge. They will also complete further testing for diseases, follow ups on medical care. All services are immediately available. In addition, medical and mental health staff believed that inmates receive better care inside the facility, than out in the community.

## Provision (d) & (e):

Both provisions require that pregnancy tests and the results be made available to the victim of sexual abuse. The facility does not house female inmates. Therefore both provisions are not applicable to this facility.

# Provision (f):

CDCR DOM Chapter 5, Article 44, §54040.9 (Forensic Medical Examination) states, "As required by Penal Code Section 2638 (part of AB550), immediate HIV/AIDS prophylactic measures will be provided. In addition, information regarding sexually transmitted infections, HIV and pregnancy options, will be discussed with the victim and/or suspect".

CDCR CCHCS Policy 4.1.6 Prison Rape Elimination Act, Procedure (a) states, Health care staff shall inform the victim and/or suspect that custody staff will transport them to an outside contracted count SART facility for an examination if deemed appropriate as indicated in the DOM Section 54040.12.1. The outside contracted SART team is responsible to offer the following:

Test for STIs/STDs and HIV as medically appropriate for patients who are the victims or suspects of sexual abuse. Pregnancy test for patients who are victims of sexually abusive vaginal penetration.

A Forensic Medical examination for patients who are alleged victims and suspects of sexual violence.

Interviews with medical/mental health staff confirmed this is the practice of the facility.

### Provision (g):

CDCR CCHCS Policy- Grievance and Administration Chapter 10, 1.10 Copayment Program Policy states "The copayment shall not be charged if the health care service(s) is considered to be...treatment services relating to sexual abuse or assault."

### Provision (h):

CDCR DOM Chapter 5, Article 44, §54040.11 Suspect Processing states "ISU staff or the LDI will provide a Miranda warning

and interview the suspect to obtain his/her account of the incident. The custody supervisor will complete a referral to mental health for a mental health evaluation and assessment of treatment needs."

The auditor reviewed five (5) investigations, each investigation provided documentation that all who reported an allegation, were offered mental health at the time of the report.

# The auditor reviewed, analyzed and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.10 Mental Health Responsibilities

CDCR DOM Chapter 5, Article 44, §54040.7 Referral to Mental Health Screening

CDCR DOM Chapter 5, Article 44, §54040.9 Forensic Medical Examination

CDCR DOM Chapter 5, Article 44, §54040.11 Suspect Processing

CCHCS Chapter 16 §1.16.2 Prison Rape Elimination Act Procedures

CDCR CCHCS Policy 4.1.6 Prison Rape Elimination Act

CDCR CCHCS Policy- Grievance and Administration Chapter 10, 1.Copayment Program Policy 9. Program Guide Overview-Mental Health Delivery System

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

#### 115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their response to the Pre-Audit Questionnaire that the facility conducts a sexual incident review at the conclusion of every criminal or administrative sexual abuse allegation. The facility reported that during the documentation period there have not been any conducted.

### Provision (a)& (b)& (c):

CDCR DOM Chapter 5, Article 44, §54040.17 (Institutional PREA Review Committee) states, "Per 28 CFR, Standard §115.86, each hiring authority is required to 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." In addition, the policy states, "The IPRC shall normally be comprised of the following staff:

- 1. Hiring Authority or designee
- 2. PREA Compliance Manager
- 3. At least one manager
- 4. In-Service Training Manager
- 5. Health Care Clinician
- 6. Mental Health Care Clinician
- 7. Incident Commander or Investigative Services Unit Supervisor

The facility utilizes a form called Institutional PREA Review Committee (IPRC) to document the incident review. All investigative files did contain the IPRC and they were completed within thirty (30) days of the investigation. Each staff member on the committee is required to sign the IPRC indicating their presence. The facility Warden indicated that he attends the IPRC committee as the chairperson. This was confirmed as all positions noted above were documented as present during the committee.

### Provision (d):

CDCR DOM Chapter 5, Article 44, §54040.17 (Institutional PREA Review Committee) identifies each of the elements of this provision and requires that the team determines a plan to correct findings and document in the report. The team should document implementation of the action plan or reasons for not doing so and submit the final report to the Hiring Authority for final review. In review of the facility IPRC the committee considers:

If there is a need for a policy change

Whether the incident was motivated by race, ethnicity; gender identity; gay; bisexual, transgender or intersex or otherwise caused by other group dynamics

Examines areas in the facility where the incident allegedly occurred to assess where physical barriers in the area may enable abuse

Assess the adequacy of staffing levels in that area during the different shifts

Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff

This was confirmed during interviews with the facility Warden, facility PREA Compliance Manager and a member of the IPRC committee. In addition, the auditor reviewed the IPRC for each investigation that required a review, all elements of this standard were included on the form.

### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

## The auditor reviewed, analyzed and retained the following evidence related to this standard:

- 1. CAC Pre-Audit Questionnaire
- 2. CDCR DOM Chapter 5, Article 44, §54040.17 Institutional PREA Review Committee
- 3. Interviews: facility Warden, Incident Review Team Member and the facility PREA Compliance Manager

### 115.87 Data collection

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control. In addition, the instrument utilized contains all necessary data necessary to answer all of the questions from the most recent version of the Survey of Sexual Violence issued by the Department of Justice.

### Provision (a) & (c):

CDCR DOM Chapter 5, Article 44, §54040.20 (Tracking-Data Collections and Monitoring) states, "The 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 Survey of Sexual Violence 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 its 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."

CDCR DOM Chapter 5, Article 44, §54040.21 (PREA Data Storage and Destruction) states, "CDCR shall ensure that all PREA data collected are securely retained. All aggregated PREA data, form facilities under the CDCRs 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 DOM, Chapter 5, Article 44, §54040.3 (Definitions), includes general definitions or prohibited behaviors regarding sexual abuse and sexual harassment, as illustrated in PREA Standard §115.6.

During an interview with the Director of Adult Prisons, she confirmed that the agency does complete and publish an annual report on the agency website. The report is completed by the Agency PREA Coordinator and approved and signed by the Agency Head. The agency has an Internal PREA Review Committee that elevates policy, training, blind spots etc. and will issue corrective action if needed. During an interview with the Agency PREA Coordinator, she stated that each PCM at the facilities must complete a Survey of Sexual Victimization Substantiated Incident Form on all substantiated allegations. These forms are sent to the Agency PREA Coordinator and are used to discover any trends or if one facility is having issues, where additional resources may be needed. The annual report is sent to the Secretary for signature and is posted on the agency website. The agency does not include personal identifying information and therefore no redactions are needed.

### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed, and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, \$54040.20 Tracking-Data Collections and Monitoring

CDCR DOM Chapter 5, Article 44, §54040.3 Definitions

CDCR DOM Chapter 5, Article 44, §54040.21 PREA Data Storage and Destruction

CDCR PREA Incident Log Sample

SSV-IA Sample Form

CDCR 2019 Annual Report

CDCR 2020 Annual Report

Interviews: Director of Adult Prisons, PREA Coordinator, and PREA Compliance Manager

### 115.88 Data review for corrective action

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that the agency reviews data collected and aggregated in order to assess and improve the effectiveness of it efforts in prevention, detection and responses to sexual assault. In addition, the facility reported that it is readily available on the agency website.

CDCR DOM Chapter 5, Article 44, §54040.17 (Departmental PREA Coordinator) states, "On an annual basis:

The Departmental PREA Coordinator will forward to each institution, a data collection took which will be utilized by the institutional PCM to summarize information gathered through the Institutional PREA Committee.

The institution will complete the data collection tool and return it to the Departmental PREA Coordinator.

The Departmental PREA Coordinator will review the information contained on the data collection tool.

The Departmental PREA Coordinator will prepare an annual report of the findings and corrective action for each facility, as well as the agency as a whole.

The report will be routed through the chain of command to the Agency Secretary for review and approval. Once approved by the Secretary, the annual report will be forwarded to the Office or Public and Employee Communications for placement on the CDCR Website."

CDCR DOM Chapter 5, Article 44, §54040.20 (Tracking-Data Collections and Monitoring) states, "The 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 Survey of Sexual Violence 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 its 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."

During an interview with the Director of Adult Prisons, she confirmed that the agency does complete and publish an annual report on the agency website. The report is completed by the Agency PREA Coordinator and approved and signed by the Agency Head. The agency has an Internal PREA Review Committee that elevates policy, training, blind spots etc. and will issue corrective action if needed.

During an interview with the Agency PREA Coordinator, she stated that each PCM at the facilities must complete a Survey of Sexual Victimization Substantiated Incident Form on all substantiated allegations. These forms are sent to the Agency PREA Coordinator and are used to discover any trends or if one facility is having issues, where additional resources may be needed. The annual report is sent to the Secretary for signature and is posted on the agency website. The agency does not include personal identifying information and therefore no redactions are needed. The PREA Compliance Manager confirmed that information from each reported allegation is reviewed for trends and corrective action if needed.

The auditor reviewed the agency website and all annual reports were located. The report contains corrective action that was taken by the facilities and the agency. The report provides a comparison of previous year data and assess the agency's progress in address sexual abuse in all facilities. The report is approved and signed by the Agency Head.

### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

The auditor reviewed, analyzed, and retained the following evidence related to this standard:

CAC Pre-Audit Questionnaire

CDCR DOM Chapter 5, Article 44, §54040.17 Departmental PREA Coordinator

CDCR DOM Chapter 5, Article 44, §54040.20 Tracking-Data Collections and Monitoring

Link to agency website-annual reports

Interviews: Director of Adult Prisons, PREA Coordinator, and PREA Compliance Manager

### 115.89 Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility indicated in their responses to the Pre-Audit Questionnaire that it ensures that incident based and aggregate data are securely retained. In addition, agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be readily available to the public at least annually through its website.

#### Provision (a) & (b) & (c):

CDCR DOM Chapter 5, Article 44, §54040.20 (Records Retention) states, "All case records associated with such reports including incident reports, investigation reports, offender information, case disposition, medical and counseling evaluation findings, recommendations for post-release treatment and/or counseling shall be retained in accordance with the CDCR Records Retention Schedule."

CDCR DOM Chapter 5, Article 44, §54040.20 (Tracking-Data Collections and Monitoring) states, "The 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 Survey of Sexual Violence 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 its 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."

During an interview with the Agency PREA Coordinator, she stated that the annual report is sent to the Secretary for signature and is posted on the agency website. The agency does not include personal identifying information and therefore no redactions are needed. The auditor reviewed the agency website and all annual reports were located. The reports do not contain personal identifiers. In addition, the auditor reviewed the agency records retention.

#### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

## The auditor reviewed, analyzed, and retained the following evidence related to this standard:

- 1. CAC Pre-Audit Questionnaire
- 2. CDCR DOM Chapter 5, Article 44, §54040.20 Records Retention
- 3. CDCR DOM Chapter 5, Article 44, §54040.20 Tracking-Data Collections and Monitoring 4. 2021 Annual Report
- 5. Interviews: Agency PREA Coordinator

# 115.401 Frequency and scope of audits

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

The auditor reviewed, analyzed and retained the following evidence related to this standard:

- 1. CAC Pre-Audit Questionnaire
- 2. Previous Audit report for CAC
- 3. Other Audit Reports for CDCR
- 4. CDCR Website
- 5. Facility Diagram
- 6. Tour and observation of all areas of the facility
- 7. All documentation for all audit standards listed in this report
- 8. Private interviews with the inmate population as requested
- 9. Posting for inmates for confidential correspondence with auditor

### Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

# 115.403 Audit contents and findings

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

The auditor reviewed, analyzed and retained the following evidence related to this standard:

- 1. CAC Pre-Audit Questionnaire
- 2. CDCR Website

# Conclusion:

Based on the review and analysis of all the available evidence, the auditor has determined the agency is fully compliant with this standard. No corrective action is needed.

## **Appendix: Provision Findings**

inmates.)

# 115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator Does the agency have a written policy mandating zero tolerance toward all forms of sexual yes abuse and sexual harassment? Does the written policy outline the agency's approach to preventing, detecting, and responding yes to sexual abuse and sexual harassment? 115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator Has the agency employed or designated an agency-wide PREA Coordinator? yes Is the PREA Coordinator position in the upper-level of the agency hierarchy? yes Does the PREA Coordinator have sufficient time and authority to develop, implement, and yes oversee agency efforts to comply with the PREA standards in all of its facilities? 115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator If this agency operates more than one facility, has each facility designated a PREA compliance yes manager? (N/A if agency operates only one facility.) Does the PREA compliance manager have sufficient time and authority to coordinate the yes facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) 115.12 (a) Contracting with other entities for the confinement of inmates If this agency is public and it contracts for the confinement of its inmates with private agencies or yes 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.) 115.12 (b) Contracting with other entities for the confinement of inmates Does any new contract or contract renewal signed on or after August 20, 2012 provide for yes 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

	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
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (a)

Supervision and monitoring

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

### 115.15 (d) Limits to cross-gender viewing and searches

Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?

yes

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?

Does the facility require staff of the opposite gender to announce their presence when entering yes an inmate housing unit?

# 115.15 (e) Limits to cross-gender viewing and searches

Does the facility always refrain from searching or physically examining transgender or intersex yes inmates for the sole purpose of determining the inmate's genital status?

If an inmate's genital status is unknown, does the facility determine genital status during yes conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?

# 115.15 (f) Limits to cross-gender viewing and searches

Does the facility/agency train security staff in how to conduct cross-gender pat down searches in yes a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?

Does the facility/agency train security staff in how to conduct searches of transgender and yes intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?

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

impartially, both receptively and expressively, using any necessary specialized vocabulary?

# 115.16 (c) Inmates with disabilities and inmates who are limited English proficient

Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?

yes

ves

# 115.17 (a) Hiring and promotion decisions

or was unable to consent or refuse?

Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates yes 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)?

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

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?

Does the agency prohibit the enlistment of services of any contractor who may have contact with ye 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)?

Does the agency prohibit the enlistment of services of any contractor who may have contact with yes 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?

Does the agency prohibit the enlistment of services of any contractor who may have contact with ye inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?

## 115.17 (b) Hiring and promotion decisions

Does the agency consider any incidents of sexual harassment in determining whether to hire or yes promote anyone who may have contact with inmates?

Does the agency consider any incidents of sexual harassment in determining whether to enlist yes the services of any contractor who may have contact with inmates?

## 115.17 (c) Hiring and promotion decisions

Before hiring new employees who may have contact with inmates, does the agency perform a yes criminal background records check?

Before hiring new employees who may have contact with inmates, does the agency, consistent yes with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?

# 115.17 (d) Hiring and promotion decisions

Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?

# 115.17 (e) Hiring and promotion decisions

Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?

### 115.17 (f) Hiring and promotion decisions

Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?

yes

Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?

yca

Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?

yes

# 115.17 (g) Hiring and promotion decisions

Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?

ves

## 115.17 (h) Hiring and promotion decisions

Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)

yes

# 115.18 (a) Upgrades to facilities and technologies

If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)

yes

# 115.18 (b) Upgrades to facilities and technologies

If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)

yes

## 115.21 (a) Evidence protocol and forensic medical examinations

If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)

yes

## 115.21 (b) Evidence protocol and forensic medical examinations

Is this protocol developmentally appropriate for youth where applicable? (N/A if the yes agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)

ves

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.)

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

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

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

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

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

Specialized training: Medical and mental health care

115.35 (a)

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	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
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

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

### 115.42 (d) Use of screening information

Are placement and programming assignments for each transgender or intersex inmate yes reassessed at least twice each year to review any threats to safety experienced by the inmate?

# 115.42 (e) Use of screening information

Are each transgender or intersex inmate's own views with respect to his or her own safety given yes serious consideration when making facility and housing placement decisions and programming assignments?

# 115.42 (f) Use of screening information

Are transgender and intersex inmates given the opportunity to shower separately from other yes inmates?

# 115.42 (g) Use of screening information

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent yes 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 degree, legal settlement, or legal judgement.)

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent yes 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 degree, legal settlement, or legal judgement.)

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent yes 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 degree, legal settlement, or legal judgement.)

## 115.43 (a) Protective Custody

Does the facility always refrain from placing inmates at high risk for sexual victimization in yes involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?

If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in yes involuntary segregated housing for less than 24 hours while completing the assessment?

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

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard?  NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	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
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	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

## 115.52 (d) Exhaustion of administrative remedies

Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)

yes

yes

ves

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.)

At any level of the administrative process, including the final level, if the inmate does not receive yes 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.)

## 115.52 (e) Exhaustion of administrative remedies

Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)

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.)

If the inmate declines to have the request processed on his or her behalf, does the agency yes document the inmate's decision? (N/A if agency is exempt from this standard.)

## 115.52 (f) Exhaustion of administrative remedies

Has the agency established procedures for the filing of an emergency grievance alleging that an yes inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)

After receiving an emergency grievance alleging an inmate is subject to a substantial risk of yes 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.).

After receiving an emergency grievance described above, does the agency provide an initial yes response within 48 hours? (N/A if agency is exempt from this standard.)

After receiving an emergency grievance described above, does the agency issue a final agency yes decision within 5 calendar days? (N/A if agency is exempt from this standard.)

Does the initial response and final agency decision document the agency's determination yes whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)

Does the initial response document the agency's action(s) taken in response to the emergency yes grievance? (N/A if agency is exempt from this standard.)

Does the agency's final decision document the agency's action(s) taken in response to the yes emergency grievance? (N/A if agency is exempt from this standard.)

#### 115.52 (g) Exhaustion of administrative remedies

If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it yes 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.)

# Inmate access to outside confidential support services 115.53 (a) Does the facility provide inmates with access to outside victim advocates for emotional support yes 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? Does the facility provide persons detained solely for civil immigration purposes mailing yes 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.) Does the facility enable reasonable communication between inmates and these organizations ves and agencies, in as confidential a manner as possible? 115.53 (b) Inmate access to outside confidential support services Does the facility inform inmates, prior to giving them access, of the extent to which such yes communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? 115.53 (c) Inmate access to outside confidential support services Does the agency maintain or attempt to enter into memoranda of understanding or other yes agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? Does the agency maintain copies of agreements or documentation showing attempts to enter ves into such agreements? 115.54 (a) Third-party reporting Has the agency established a method to receive third-party reports of sexual abuse and sexual ves harassment? Has the agency distributed publicly information on how to report sexual abuse and sexual yes harassment on behalf of an inmate? 115.61 (a) Staff and agency reporting duties Does the agency require all staff to report immediately and according to agency policy any yes 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? Does the agency require all staff to report immediately and according to agency policy any yes knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? Does the agency require all staff to report immediately and according to agency policy any yes 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? 115.61 (b) Staff and agency reporting duties Apart from reporting to designated supervisors or officials, does staff always refrain from yes 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?

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

### 115.64 (b) Staff first responder duties

If the first staff responder is not a security staff member, is the responder required to request that yes the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?

#### 115.65 (a) Coordinated response

Has the facility developed a written institutional plan to coordinate actions among staff first yes responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?

### 115.66 (a) Preservation of ability to protect inmates from contact with abusers

Are both the agency and any other governmental entities responsible for collective bargaining on yes the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?

# 115.67 (a) Agency protection against retaliation

Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?

Has the agency designated which staff members or departments are charged with monitoring yes retaliation?

## 115.67 (b) Agency protection against retaliation

Does the agency employ multiple protection measures, such as housing changes or transfers for yes 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?

# 115.67 (c) Agency protection against retaliation Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Except in instances where the agency determines that a report of sexual abuse is unfounded, for yes 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? 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? 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? Except in instances where the agency determines that a report of sexual abuse is unfounded, for ves at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? Except in instances where the agency determines that a report of sexual abuse is unfounded, for yes at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? Except in instances where the agency determines that a report of sexual abuse is unfounded, for ves at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? Except in instances where the agency determines that a report of sexual abuse is unfounded, for yes at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a ves continuing need? 115.67 (d) Agency protection against retaliation In the case of inmates, does such monitoring also include periodic status checks? yes 115.67 (e) Agency protection against retaliation If any other individual who cooperates with an investigation expresses a fear of retaliation, does ves the agency take appropriate measures to protect that individual against retaliation? 115.68 (a) Post-allegation protective custody Is any and all use of segregated housing to protect an inmate who is alleged to have suffered ves sexual abuse subject to the requirements of § 115.43? 115.71 (a) Criminal and administrative agency investigations When the agency conducts its own investigations into allegations of sexual abuse and sexual ves 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).)

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Does the agency conduct such investigations for all allegations, including third party and

criminal OR administrative sexual abuse investigations. See 115.21(a).)

anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of

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

# 115.72 (a) Evidentiary standard for administrative investigations Is it true that the agency does not impose a standard higher than a preponderance of the yes evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? 115.73 (a) Reporting to inmates Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an yes agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? 115.73 (b) Reporting to inmates If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an yes 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.) 115.73 (c) Reporting to inmates Following an inmate's allegation that a staff member has committed sexual abuse against the yes 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? Following an inmate's allegation that a staff member has committed sexual abuse against the ves 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? Following an inmate's allegation that a staff member has committed sexual abuse against the yes 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? Following an inmate's allegation that a staff member has committed sexual abuse against the yes 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? 115.73 (d) Reporting to inmates Following an inmate's allegation that he or she has been sexually abused by another inmate, ves 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? Following an inmate's allegation that he or she has been sexually abused by another inmate, yes 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? 115.73 (e) Reporting to inmates Does the agency document all such notifications or attempted notifications? yes 115.76 (a) Disciplinary sanctions for staff Are staff subject to disciplinary sanctions up to and including termination for violating agency yes

# Is termination the presumptive discipling

Disciplinary sanctions for staff

115.76 (b)

sexual abuse or sexual harassment policies?

Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ye

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

# 115.78 (f) Disciplinary sanctions for inmates For the purpose of disciplinary action does a report of sexual abuse made in good faith based yes 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? 115.78 (g) Disciplinary sanctions for inmates If the agency prohibits all sexual activity between inmates, does the agency always refrain from ves considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) 115.81 (a) Medical and mental health screenings; history of sexual abuse If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison). 115.81 (b) Medical and mental health screenings; history of sexual abuse If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated yes 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.) 115.81 (c) Medical and mental health screenings; history of sexual abuse If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual yes 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). 115.81 (d) Medical and mental health screenings; history of sexual abuse Is any information related to sexual victimization or abusiveness that occurred in an institutional ves 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? 115.81 (e) Medical and mental health screenings; history of sexual abuse Do medical and mental health practitioners obtain informed consent from inmates before ves reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? 115.82 (a) Access to emergency medical and mental health services Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical yes treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? 115.82 (b) Access to emergency medical and mental health services If no qualified medical or mental health practitioners are on duty at the time a report of recent ves sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Do security staff first responders immediately notify the appropriate medical and mental health ves practitioners?

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

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	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
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

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

### 115.401 (b) Frequency and scope of audits

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

yes

yes

yes

If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)

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.)

# 115.401 (h) Frequency and scope of audits

Did the auditor have access to, and the ability to observe, all areas of the audited facility?

yes

#### 115.401 (i) Frequency and scope of audits

Was the auditor permitted to request and receive copies of any relevant documents (including yes electronically stored information)?

## 115.401 (m) Frequency and scope of audits

Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? yes

## 115.401 (n) Frequency and scope of audits

Were inmates permitted to send confidential information or correspondence to the auditor in the yes same manner as if they were communicating with legal counsel?

## 115.403 (f) Audit contents and findings

The agency has published on its agency website, if it has one, or has otherwise made publicly yes 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.)