

PREA Facility Audit Report: Final

Name of Facility: California Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 07/22/2022

Date Final Report Submitted: 11/19/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Robin M Bruck	Date of Signature: 11/19/2022

AUDITOR INFORMATION	
Auditor name:	Bruck, Robin
Email:	rmbconsultingservice@gmail.com
Start Date of On-Site Audit:	01/26/2022
End Date of On-Site Audit:	06/10/2022

FACILITY INFORMATION	
Facility name:	California Correctional Center
Facility physical address:	711-045 Center Road , Susanville, California - 96127-0790
Facility mailing address:	PO Box 790, Susanville, California - 96127

Primary Contact	
Name:	Jimmy Crandall
Email Address:	James.Crandall@cdcr.ca.gov
Telephone Number:	530-257-2181 x4126

Warden/Jail Administrator/Sheriff/Director	
Name:	Suzanne Peery
Email Address:	Suzanne.Peery@cdcr.ca.gov
Telephone Number:	530-257-2181 x 4104

Facility PREA Compliance Manager	
Name:	Jimmy Crandall
Email Address:	James.Crandall@cdcr.ca.gov
Telephone Number:	O: 530-257-2181 4126
Name:	Bailee Glenn
Email Address:	bailee.glenn@cdcr.ca.gov
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Name:	Amber Riley
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Facility Health Service Administrator On-site	
Name:	Bob Duncan
Email Address:	Robert.Duncan2@cdcr.ca.gov
Telephone Number:	530-257-2181 x 4101

Facility Characteristics	
Designed facility capacity:	0
Current population of facility:	1650
Average daily population for the past 12 months:	1876
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:	19-76
Facility security levels/inmate custody levels:	Level 1, 2 and 3
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	827
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	43
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	37

AGENCY INFORMATION	
Name of agency:	California Department of Corrections and Rehabilitation
Governing authority or parent agency (if applicable):	
Physical Address:	1515 S Street, 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

SUMMARY OF AUDIT FINDINGS

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

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

Number of standards exceeded:

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:	2022-01-26
2. End date of the onsite portion of the audit:	2022-06-10

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The auditor communicated with a member of Just Detention International (JDI), to obtain information regarding inmate trends and services provided to the facility. In addition, the auditor interviewed staff with the Lassen Family Services, regarding services that are provided to the facility.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2150
15. Average daily population for the past 12 months:	1876
16. Number of inmate/resident/detainee housing units:	55
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1334
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:	27
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:	0

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:	0
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:	43
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:	5
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:	2
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:	0
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):	CCC's mission is to train and house firefighters within the conservation camps around the State of California. All inmates housed at CCC and the conservation camps must be medically cleared for the facility. Inmates who are cognitive or disabled, and/or require special needs, are not housed at this facility, or in the fire conservation camps.
Staff, Volunteers, and Contractors Population Characteristics 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:	827
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:	0
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:	43
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 additional comments.
INTERVIEWS	

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:

84

54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)

- Age
- Race
- Ethnicity (e.g., Hispanic, Non-Hispanic)
- Length of time in the facility
- Housing assignment
- Gender
- Other
- None

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?

The auditor team interviewed inmates from each housing unit. Utilizing the inmate roster, inmates were randomly chosen based on age and ethnicity. In addition, at least two inmates were interviewed at each conservation camp.

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 additional comments

Targeted Inmate/Resident/Detainee Interviews

58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:

12

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

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:

2

<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. 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).</p>	<p>CCC's mission is to train and house firefighters within the conservation camps around the State of California. All inmates housed at CCC and the conservation camps must be medically cleared for the facility. Inmates who are cognitive or disabled (blind), and/or require special needs, are not housed at this facility, or in the fire conservation camps.</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. 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).</p>	<p>CCC's mission is to train and house firefighters within the conservation camps around the State of California. All inmates housed at CCC and the conservation camps must be medically cleared for the facility. Inmates who are cognitive or disabled (blind), and/or require special needs, are not housed at this facility, or in the fire conservation camps.</p>
<p>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:</p>	<p>1</p>
<p>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:</p>	<p>4</p>
<p>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:</p>	<p>3</p>
<p>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:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. 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).</p>	<p>CDCR has fourteen (14) facilities, that can provide services for the incarcerated transgender inmates. CCC is not one of them. On the 1st day of the site review CCC reported zero (0) transgender inmates were housed at the facility. This was confirmed during interviews with the facility PREA Compliance Manager and random staff.</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. 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).</p>	<p>During the site review, there were no inmates at the facility, who had reported sexual abuse. This was confirmed by the facility PREA Compliance Manager.</p>
<p>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:</p>	<p>1</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. 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).</p>	<p>The facility does not place inmates in segregation for risk of sexual victimization. The auditor confirmed this during an interview with a staff member who supervises the segregation unit and the facility PREA Compliance Manager.</p>

70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No additional comments.
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:	33
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72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
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73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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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):	Interviews with random staff include staff from Cal Fire. Cal Fire is neither CDCR staff or contractors. Cal Fire trains the firefighter inmates and is responsible for the inmates in the event of a fire within the State of California. The auditor felt important to interview several members of Cal Fire.
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Specialized Staff, Volunteers, and Contractor Interviews

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

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	28
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76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>
<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Agency contract administrator</p> <p><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Medical staff</p> <p><input checked="" type="checkbox"/> Mental health staff</p> <p><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input checked="" type="checkbox"/> Administrative (human resources) staff</p> <p><input type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input checked="" type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input checked="" type="checkbox"/> Other</p>
<p>If "Other," provide additional specialized staff roles interviewed:</p>	<p>Facility Mailroom staff Facility Grievance Officer</p>

81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	Due to Covid protocols, the facility had restricted volunteers from entering the facility.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Was the site review an active, inquiring process that included 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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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 additional comments.

Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

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?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	There were no barriers.

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	4	0	4	0
Staff-on-inmate sexual abuse	2	1	2	1
Total	6	1	6	1

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	1	0	1	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	2	0	2	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	3	0	1	0
Staff-on-inmate sexual abuse	2	0	0	1
Total	5	0	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	0	0	0
Staff-on-inmate sexual harassment	1	0	0	0
Total	2	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

7

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?

- Yes
 No
 NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:

4

101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?

- Yes
 No
 NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?

- Yes
 No
 NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files

103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
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?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1

<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>No additional comments</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

<p>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.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:</p>	<p>1</p>

Non-certified Support Staff

<p>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.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:</p>	<p>1</p>

AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<p><input checked="" type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

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

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, Statutes 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 Training
- 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

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.

The auditor reviewed the agency organizational chart; the PREA Captain position is not included in the organizational structure. However, during discussions with the Director of Adult Prisons, it is clear that this position does have direct access to the agency's most senior leadership and the influence necessary to create and implement agency-wide policies, procedures and practices without interference from other levels of bureaucracy and supervision.

During the site review, random staff were able to articulate what zero tolerance meant and repeated from memory the phrase "no means no and yes is not allowed."

Provision (c):

The auditor reviewed a Statewide PREA Compliance Manager list dated February 11, 2022, which indicates that there are thirty-five (35) 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 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.

CCC has a designated PREA Compliance Manager. The PREA Compliance Manager is an Associate Warden and reports directly to the Warden of the facility. During an interview with the facility PCM he appeared to be very knowledgeable regarding the PREA standards, despite being appointed as the PCM seven (7) months prior to this audit. He took pride in his facility and the firecamps. He has the time and authority to perform all of his duties.

During the site review of CCC and the associated conservation camps, staff and inmates knew who the PREA Compliance Manager was and were aware of ways he could be contacted if 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 required.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CCC PREA Final Audit Report dated November 25, 2019
3. Contracting with other entities for the Confinement of Inmates Memo
4. Agreements, Statewide
5. CDCR Shell Bid Agreement-Special Terms and Conditions
6. Interview: CDCR PREA Coordinator

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 CCC Final Audit Report dated November 25, 2019. 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.

The auditor reviewed the Contracting with other entities for the Confinement of Inmates dated February 1, 2022. CDCR has fourteen (14) contracts with Community Confinement Facilities. There are six (6) 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 six (6) contracts, listed below. Each contract does contain the requirement that each entity adopt and comply with the PREA Standards.

1. C5609175-CDCR/Butte County Probation Department, executed November 1, 2019
2. C5609226-CDCR/Turning Point of Central California, INC, executed November 1, 2019
3. C5609258-CDCR/Community Education Centers, INC, executed November 1, 2019
4. C5609223-CDCR/Healthright 360, executed November 1, 2019
5. C5609181-CDCR/Epidaurus DBA Amity Foundation, executed November 1, 2019
6. 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.

1. C5609005-CDCR/WestCare California, INC, executed July 1, 2020
2. C5607981-CDCR/WestCare California, INC, executed July 1, 2018
3. C5609916-CDCR/Saint John's Program for Real Change, executed July 1, 2021
4. 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
6. C5608846-CDCR/Epidaurus DBA Amity Foundation, executed September 24, 2019

Each facility has CDCR staff on-site. A Correctional Counselor III has been designated within the contracts to monitor the progress of the contractor through the activation phase, program implementation, services provided, participant's interaction with staff and each other, and the environment of the facility. CDCR is currently working on the development of a monitoring tool.

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. No corrective action is required.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM, Chapter 5, Article 44, §54040.4 Security Rounds
3. CDCR DOM, Chapter 5, Article 44, §54040.17.1 Annual Review of Staffing Plan
4. CDCR DOM, Chapter 5, Article 44, §54040.18 Institutional Staffing Plan
5. CDCR DOM, Chapter 5, Article 44, §54040.3 General Information
6. Staffing Plan Analysis Template
7. Staff Codes for Staff Vacancies
8. Ample of Notice of Unusual Occurrence
9. Sample Annual Data Collection Tool and Staff
10. CCC Annual Data Collection 2021
11. CCC Sample Supervisor Security Rounds
12. Staff In-service Training Curriculum
13. Auditor Observations
14. Interviews: Facility Warden, PREA Compliance Manager, Intermediate or Higher Level Staff

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 one thousand six hundred and seventy-nine (1679) authorized beds. The average daily number of inmates on which the staffing plan was predicated is one thousand six hundred and seventy-nine (1679).

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 plan 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, CCC 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. The tool includes any corrective action taken during the review process. CCC installed modesty screens on the ASU yard and continues to maintain inmate bathroom window frosting to minimize cross-gender viewing.

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."

During an interview with the facility Warden, she confirmed that all deviations to the staffing plan are documented on a Daily Activities Report and on the Notice of Unusual Occurrence (NOU). The facility utilizes overtime and will re-assign officers if needed to ensure that all posts are covered. The auditor reviewed samples of the Daily Activities Report and the NOU and confirmed that posts are maintained and covered through the use of voluntary overtime and involuntary overtime and by Coverage Relief Officers. All NOU's are forwarded to the facility PCM for retention.

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, review 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 Log Book 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 log book in red pen. The unit log book shall indicate the date, time and location the security check was conducted."

During interviews with intermediate or higher level staff from all shifts, the auditor confirmed the institutional policy and practice of conducting unannounced rounds and staff are prohibited from alerting other staff as the rounds are conducted. The rounds are documented in the control log books with red pen. Each staff member could articulate the intended purpose of conducting the rounds. The audit team reviewed control logs while on site and confirmed that supervisors are completing the log book, however the entry is being made to the side and not in the next order of the log. The auditor could not determine when the unannounced round was completed. Corrective Action is required. The auditor received additional samples of control logs and could determine a pattern emerging with the times of the unannounced rounds, therefore allowing staff and inmates also know when the rounds will be completed.

Corrective Action:

1. The facility shall establish a process, for unannounced rounds to occur on different shifts and at times that does not develop a pattern in which the rounds are being completed.
2. The facility shall train all intermediate and high level staff on documenting unannounced rounds in the control logs, with red pen, with date and time that the round was completed.

After the issuance of the Interim Audit Report, the auditor and the facility discussed the recommended corrective action for this standard and agreed upon a plan for completion.

During the corrective action period, the PREA Compliance Manager provided supervisor training, to include the proper way to document the unannounced rounds in the control log books. The facility provided the auditor with samples of the log books indicating the rounds are being completed on every shift and properly logged in the control log.

The facility has effectively demonstrated compliance during this period of corrective action and provided sufficient documentation to the auditor.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 1230 300">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="280 349 975 448" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. Inmate Roster, with DOB and age 3. Interview: PREA Compliance Manager, Warden and Random Staff <p data-bbox="244 472 1433 501">The facility indicated in their response to the Pre-Audit Questionnaire that the facility does not house youthful offenders.</p> <p data-bbox="244 530 448 560"><u>Provision (a)(b)(c):</u></p> <p data-bbox="244 589 1490 748">The auditor reviewed the agency website. CCC houses adult males only. Youthful inmates are held in the custody of the Division of Juvenile Justice (DJJ). CDCR does have an MOU with DJJ to house male and female youthful offenders who require inpatient care and mental health treatment that is beyond what DJJ can provide. CDCR has two designated facilities to house these youthful offenders, California Health Care Facility (male youthful offenders) and California Institute for Women (female youthful offender).</p> <p data-bbox="244 777 1433 840">The auditor review an inmate roster, which included the inmate's date of birth and determined that there are no inmates under the age of eighteen (18) housed at the facility.</p> <p data-bbox="244 869 1481 931">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.</p> <p data-bbox="244 960 376 990"><u>Conclusion:</u></p> <p data-bbox="244 1019 1469 1081">Based upon review and analysis of all available evidence, the auditor has determined that this standard is not applicable to CCC and is in full compliance with this standard.</p>

Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.5 Searches
3. CDCR DOM Chapter 5, Article 44, §52050.16.5 Unclothed Body Searches of Inmates
4. CDCR DOM Chapter 5, Article 44, §54040.4 Cross Gender Viewing-Preventative Measures
5. CDCR DOM Chapter 5, Article 44, §54050.16.7 Unclothed and Clothed Body Searches of Transgender and Intersex Inmates
6. CDCR DOM Chapter 5, Article 44, §54050.16.4 Clothed Body Search of Female Inmates
7. Memorandum-Adani Compass Low Dose Scanner
8. PREA Training Bet Codes
9. Transgender Inmate Training Bet Code 11058564 (Instructor Text)
10. Transgender Inmate Training Bet Code 11058564 (Participant Workbook)
11. Transgender Inmate Training Bet Code 11058564 (PowerPoint)
12. Transgender Intersex Pat-down Training Bet Code 11060835
13. Body Searches Bet Code 11059429
14. Senate Bill 132 BET 11062278
15. PREA Lesson Plan Bet Code 1054378
16. Office of Training and Professional Development (OPTD) Search Training Lesson Plan
17. Interviews: Random Staff, Random Inmates, and Transgender/Intersex Inmates

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 conducted zero (0) in the past twelve (12) months.

Provision (a)(c):

CDCR DOM Chapter 5, Article 44, §52050.16.5 Unclothed Body Searches of Inmates states "Correctional personal, other than qualified medical staff shall not conduct body inspections or searches of an inmate of the opposite sex, except in an emergency. "

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 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 Compass Low Dose scanners. The memo was issued to bring the agency into compliance with this provision by directing that only the operators viewing the image produced shall be the same gender as the inmate being scanned. If cross-gender staff use the Adani Compass Low Dose Scanner during exigent circumstances, the search must be documented in a Notice of Unusual Occurrence (NOU).

During an interview with the facility PCM, the auditor confirmed that cross gender visual body cavity searches are documented on a Notice of Unusual Occurrence. In addition the PCM and random staff confirmed that there have not been any cross gender visual body cavity searches of inmates at the facility.

Provision (b):

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

Provision (d):

CDCR DOM Chapter 5, Article 44, §54040.4 (Preventative Measures) states, "Each institution shall enable offenders to shower, perform bodily functions, and change clothing without non-medical staff of the opposite biological sex viewing their breasts, buttocks, or genitalia, except exigent circumstances or when viewing is incidental to routine cell checks. Except in circumstances where there would be an impact to safety and security modesty screens shall be placed strategically in areas that prevent incidental viewing." In addition, "In order to minimize cross gender exposure, staff of the opposite biological sex shall announce their presence when entering the housing unit....."

During the site review, the auditor observed the announcement "female on the floor" or "staff on floor" being made. Random

inmates were informally asked if the announcement is made and a majority of the random inmates interviewed reported that the announcement is made when female staff are coming into the dorm or housing unit. Many inmates reported they are only completely undressed while showering.

During the site review, the auditor observed the bathrooms and shower areas in each dorm. The showers have steel panels strategically placed to block view into the shower. Some of the installed blocks were too short or were missing the second panel, which did allow for viewing. Corrective action is needed.

Provision (e):

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 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 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 confirmed that no transgender inmates were housed at the facility. Random 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.

Provision (f):

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 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.

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.

Corrective Action:

1. The facility shall heighten and/or replace the missing steel panels in the dorms to ensure that inmates are able to shower without opposite gender viewing.

After the issuance of the Interim Audit Report, the auditor and the facility discussed the recommended corrective action for this standard and agreed upon a plan for completion.

During the corrective action period, the facility completed several of the shower issues determined during the site review. However, not all issues had been completed at the time of issuance of the final report. It has been determined that CCC facility will close in the next few months. As of October 25, 2022, the facility has stopped receiving any new inmates into the facility and preparations are being made to move the inmates currently housed in CCC to other facilities within CDCR. Requiring the facility to complete all of the physical plant corrective action would be burdensome on a facility, that is closing and will no longer house inmates. Similar compliance issues were not noted at the respective conservation camps, which will remain open.

Therefore the facility has demonstrated compliance during this period of corrective action and provided sufficient documentation to the auditor.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention
3. CDCR DOM Chapter 5, Article 44, §54040.12 Investigations
4. California Code Regulations, Title 15, §3000
5. Justification memo
6. CDCR Disability Code Definitions
7. CDCR I-Speak Poster
8. Rosters of LEP and disabled Inmates
9. Interpreters Unlimited call numbers
10. LEP Memo, Contract with Interpreters
11. Interviews: LEP inmates, inmates with disabilities, staff

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)(b):

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 communication as, 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 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 accommodations 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."

CDCR has a contract with Voiance Language Service for foreign language telephone interpreter services. The contract states, "The contractor shall provide interpreter services over the telephone, facsimile or internet, for any of the one hundred and forty (140) languages to assist CDCR with inmates/wards that have English as a second language."

The toll free number is included on the I-Speak posters, which was observed in all areas of the facility, by the auditor during the site review. A roster of LEP inmates was provided to the auditor. During targeted interviews, the auditor team attempted to utilize the service to conduct interviews. It was discovered that on July 1, 2021, the agency established a new contract with Interpreters Unlimited, Inc. An interview was ultimately conducted utilizing the interpreter services.

The agency has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to include having readily available an I Speak poster with numerous languages and options to aid in the education of PREA.

These methods could be used to understand the agency's and facility's efforts to prevent, detect and response to sexual abuse. Inmates can use these services independently or with the aid of staff.

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.

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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 3, Article 6, §31060.3 Appointments
3. CDCR DOM Chapter 3, Article 6, §31060.3 Background Checks
4. CDCR DOM Chapter 3, Article 6, §31060.16 Criminal Records Check
5. CDCR DOM Chapter 3, Article 22, §33030.19 Employee Disciplinary Matrix
6. California Code of Regulations, Title 15, §3411
7. ID Cards, DOM 31070.1
8. California Employment Application, STD 678
9. CDCR form 1951 Supplemental Application
10. CDCR Form 2164 Live Scan Response
11. CDCR Memo-Use of the CDCR Form 1951 Supplemental Application
12. CDCR Memo-Personnel Identification Card Issuance
13. CDCR 2025 Employment Reference Questionnaire
14. CDCR PREA Memo-Background Investigators
15. CDCR Justification Memo
16. Interviews: Human Resource Staff and PREA Coordinator

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, has not engaged, been convicted or civilly adjudicated, in sexual activity described in this standard. In addition, the facility reported sixty-nine (69) employees and zero (0) contractors have been hired in the past twelve (12) months.

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.

During interviews with Human Resource staff, the auditor confirmed that CCHCS is responsible for hiring all medical and mental health staff and CDCR is responsible for hiring all facility staff. It was reported that CDCR began utilizing the Supplemental Application in September 2016. All potential employees complete the Supplemental Application prior to being hired. The CEO for CCHCS, confirmed that medical/mental health staff also are required to complete the Supplemental Application.

The auditor reviewed thirty-four (34) randomly selected staff files and twelve (12) contractor files. Each file contained a Supplemental Application confirming compliance with this provision.

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 in 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.

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.

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 from 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):

During an interview with the agency PREA Coordinator, she confirmed that when she receives inquiries from another agency, she will contact the Office of Internal Affairs for verification and will respond back to the inquiring agency. Samples were provided to the 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.

115.18	Upgrades to facilities and technologies
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1230 300">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="279 349 815 577" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR Design and Construction Policy Guidelines 3. PREA Consideration Forms 4. Design Change Request 5. Facility Walk-through and Tour 6. Div 27 51 23 CSO CSC technology Project Manual 7. Interviews: Warden and Director of Adult Prisons <p data-bbox="242 607 1382 667">The facility indicated in their response to the Pre-Audit Questionnaire that there has been substantial expansion or modifications to the facility and has not installed or updated video technology since the last PREA Audit.</p> <p data-bbox="242 696 432 725"><u>Provisions (a)(b):</u></p> <p data-bbox="242 754 1321 784">CDCR Facility Planning, Construction and Management (Design and Construction Policy Guidelines) states:</p> <ol data-bbox="242 813 1481 999" style="list-style-type: none"> 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. <p data-bbox="242 1028 1481 1088">During the site review and discussions with the facility PREA Compliance Manager, the auditor observed the facility has had modifications and additions to the facility, since the last PREA audit which include:</p> <ul data-bbox="284 1140 711 1267" style="list-style-type: none"> • Arnold Unit • Kitchen • Clinic in facility C • Kitchen at Antelope Conservation Camp <p data-bbox="242 1296 1473 1391">During an interview with the facility Warden, she confirmed that there has been modifications made at the facility and a new kitchen was completed at the Antelope Conservation Camp. During the planning meetings PREA was discussed to ensure inmates are protected from sexual abuse.</p> <p data-bbox="242 1420 376 1449"><u>Conclusion:</u></p> <p data-bbox="242 1478 1481 1538">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.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.12 PREA Investigations
3. CDCR DOM Chapter 5, Article 44, §54040.9 Forensic Medical Examinations
4. CDCR DOM Chapter 5, Article 44, §54040.8 Initial Contact
5. CDCR DOM Chapter 5, Article 44, §54040.8.1 Evidence Protocol
6. CDCR DOM Chapter 5, Article 44, §54040.8.2 Victim Advocate Support Person and SANE/SART Examination
7. CDCR DOM §54040.3 Facility provides a qualified staff member, definition of victim advocate
8. CCHCS Chapter 10 1.10 Co-Payment Policy
9. CA Penal Code 830.5
10. Justification Memo
11. PREA – Working with Rape Crisis Centers ToolKit
12. Specialized Training LDI Lesson Plan and PowerPoint
13. Initial PREA Check-Off for Staff and Supervisors
14. National protocol for sexual assault
15. PREA Poster: English, Spanish and Hmong
16. LDI Evidence Training based on a National Protocol for Sexual Assault 2012
17. Sexual Assault Kit Processing Memo
18. CDCR Sexual Assault Interview Guidelines
19. Memorandum of Understanding CDCR/Lassen Family Services
20. Statewide Rape Crisis Center 24-hour Sexual Abuse List
21. CCC Allegation Log January 2021 to present
22. Interviews: Random Staff, SAFE/SANE Staff, PREA Compliance Manager, Inmates who reported sexual abuse

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 zero (0) 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). CCC 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.

Random staff interviewed were able to identify who conducts investigations at this facility, by name and title.

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 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 (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 Process states "Victims of alleged sexual violence or staff sexual misconduct, have the right to have a victim advocate 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, CCC and the Lassen Family Services. The MOU was executed on July 1, 2019. The MOU defines the roles and responsibilities of each entity, to ensure that emotional support services are provided to inmates housed within CCC. In addition, the MOU defines emotional support services to include: toll-free, non-recorded, non-monitored calls utilizing the inmate telephone system to Lassen Family Service's hotline number; confidential written correspondence with contractor personnel; in-person crisis counseling sessions between incarcerated victims and Contractor Personnel unitizing 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.

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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.12 Investigations for Allegations
3. CDCR DOM Chapter 3, Article 14, §31140.1 Policy
4. CCC PREA Allegation Log 2021
5. Justification Memorandum
6. Memorandum Referral of all unnecessary or Excessive use of force and specified Prison Rape Elimination Act Allegations to the Allegation
7. Inquiry Management Section
8. CDCR 2021 Annual Report
9. Interviews: Director of Adult Prisons and Investigative Staff

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) administrative 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. Staff in the Investigative Unit have also received specialized training in sexual abuse in confinement investigations as they lead PREA related investigations at the facility.

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 review of the facility PREA Allegation log, in the past twelve months the facility received eight (8) allegations of sexual abuse and sexual harassment. There were four (4) allegations that resulted in an administrative investigation and two (2) allegations were referred to AIMS for criminal investigations.

Provision (c)(d)(e):

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

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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC PRE-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.1 Zero Tolerance Policy
3. CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention
4. CDCR In-Service PREA Training Lesson Plan, 11054378
5. CDCR BCOA PREA Training Lesson Plan, 11055014
6. CDCR Workbook OTJ Bet Code 11053499
7. Inmate/Staff Relations Instructor Guide, version 1.2 for BCOA 11055030 and IST 11053211
8. Inmate Staff Interaction, BET Code
9. CDCR Training Memo for Transgender inmates
10. PREA Training Curriculum Knowledge Review
11. LMS PREA OJT BET Code
12. Staff IST 2020 Training Memo-Covid
13. Inmate Staff Relations
14. NEO Prea 11043846 Online Instructor Lead
15. PREA LDI Bet Code 11057915 as of 3-21-2022
16. PREA LDI Bet Code 11055853 as of 3-21-2022
17. Interviews: Random Staff

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 fulfil 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.

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.

During interviews with random staff, the auditor confirmed that all staff are required to attend PREA Training once a year during the in-service training. Staff were knowledgeable regarding the elements listed and above. In addition, the auditor reviewed thirty-four (34) randomly selected staff files and confirmed each one had attended training for 2021 and 2022.

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.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.4 Staff Training
3. CDCR DOM Chapter 10, Article 9, §101090.5 Community Resource Manager
4. CDCR DOM Chapter 3, Article 18, §32010.8.3 (Record Keeping Forms)
5. CDCR In-Service Training Curriculum 110554378
6. CDCR Form 2301 PREA Policy Information for Volunteers and Contractors Memo
7. CDCR Form 2301 PREA Policy Information for Volunteers and Contractors
8. CDCR Justification Memo - Volunteers and Contractor Training
9. Interviews: Volunteers and Contractors

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."

At the time of the site review, the facility had restricted volunteers from entering the facility due to the Covid pandemic. The audit was unable to interview volunteers for this audit. The auditor did interview one contractor, who confirmed that additional PREA training is received through the Learning Management System (LMS) once a year. The audit did review twelve (12) volunteer files and three (3) contractor files. All files contained the PREA Policy Information sheet with the volunteer signature documenting that the person understood the training that they had received.

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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.4 Offender Education
3. CCR Title 15, §3000
4. CDCR Prison Rape Elimination, Written Material Distribution Memo
5. CDCR Form 128-B
6. Shine the Light on Sexual Abuse Poster in both English and Spanish
7. Live in Fear Posters, English and Spanish
8. Office of the Inspector General PREA Poster
9. Senate Bill 132 Brochure, Transgender Inmates
10. CC Inmate Rosters
11. Interviews: Director of Adult Prisons, Random Inmates and Intake Staff

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 one thousand and eighty-six (1086) inmates have been admitted into the facility in the past twelve months and one thousand and eighty-six (1086) received this information at intake. In addition, the facility reported one thousand and fifty (1050) inmates 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)(c)(d)(e):

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."

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."

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"

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.

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?

CCC inmates also receive an orientation handbook upon arrival at the facility. In addition, the each inmate assigned to the conservation camps receive an additional orientation handbook which contains the camp rules. The auditor reviewed all of the orientation handbooks. Each handbook contained a PREA Information Sheet which has information regarding the agency's zero tolerance policy, retaliation for reporting or cooperating with an investigation is not tolerated, the meaning of "Staff on Floor", multiple ways of how to report an allegation, how to access a victim advocate and what the duties of the PREA Compliance Manager entails.

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.

During the site review, no inmates were in processing at the time. The auditor requested the staff walk the auditor through the intake process. Upon arrival inmates are shown the PREA video. Each inmate is given the PREA education and the inmate is required to sign form 128 B indicating the information was received. The auditor reviewed the 128 B form. The form includes acknowledgment of receipt of four (4) of the education material:

- Video "What you need to know" (English/Spanish/Hmong Version) and;
- Given Information Brochure on PREA with reporting information and;
- Given Inmate Orientation Handbook with PREA reporting information and;
- Opposite Gender Announcement was explained, "Staff on the Floor" means staff of the opposite gender are in the housing unit.

In addition, the 128B form includes the inmate's TABE score. If the inmates TABE score is lower than 4.0, it is documented what assistance is needed to ensure that the inmate understands the information given. The assistance provided can include but is not limited to use of a text magnifier, reading the documents to the inmate, foreign language interpreters or simple English spoken slowly and clearly. In review of the TABE scores provided to the auditor on the 128B Form and during an interview with the Director of Adult Prisons, the auditor confirmed that staff members are required to establish effective communication with the inmates and provide assistance where needed.

The audit team interviewed random inmates at the facility and the conservations camps a majority of the inmates indicated that they have received the PREA education. In addition they could articulate the facility's zero tolerance and multiple ways that are provided for reporting.

The auditor reviewed fifty-nine (59) inmate files. The auditor was provided very little documentation of the inmate education or was provided documentation indicating the inmate had received training at other CDCR facilities. In discussions with the facility, the auditor learned that during a self evaluation, the facility discovered an issue with the filing to the 128 B forms. During Covid, there were periods of time were there was a lack of staff to file and scan the forms into the inmate's electronic file. Therefore, creating misplacement of the forms. The facility immediately began corrective action. The facility provided the auditor with every inmate's 128 B form, who had arrived at the facility between March 2021 and May 2021. The auditor is satisfied that the facility is meeting this provision without further corrective action.

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.

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 of the facility and all of the attached conservation camps the poster were seen in all areas where inmates congregate, to include the housing units and programming areas.

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.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 1230 297">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="277 349 1374 544" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention 3. CDCR DOM Chapter 5, Article 44, §54040.3 Locally Designated Investigator (LDI) 4. CDCR DOM Chapter 3, Article 18, §32010.8.3 Record Keeping Forms 5. CDCR Specialized PREA Training for Locally Designated Investigators Course Curriculum and PowerPoint 6. Interviews: Investigative Staff <p data-bbox="240 573 1477 667">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.</p> <p data-bbox="240 696 392 723"><u>Provision (a):</u></p> <p data-bbox="240 752 1469 846">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."</p> <p data-bbox="240 875 1461 1075">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."</p> <p data-bbox="240 1104 1469 1234">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."</p> <p data-bbox="240 1263 1437 1323">Interviews with facility investigators, confirmed that they are required to attend annual PREA training and the a one time specialized training on conducting investigations in a correctional setting.</p> <p data-bbox="240 1352 392 1379"><u>Provision (b):</u></p> <p data-bbox="240 1408 1477 1608">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 facility reported there are nine (9) Locally Designated Investigators at the facility.</p> <p data-bbox="240 1637 1469 1731">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."</p> <p data-bbox="240 1760 392 1787"><u>Provision (c):</u></p> <p data-bbox="240 1816 1461 1877">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."</p> <p data-bbox="240 1906 1430 2036">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."</p> <p data-bbox="240 2065 392 2092"><u>Provision (d):</u></p> <p data-bbox="240 2121 1430 2148">CCC investigators are peace officers under the California Penal Code 830.5 and are authorized to conduct criminal and</p>

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.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 1230 297">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="279 349 1460 611" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention 3. CDCR DOM Chapter 3, Article 18, §32010.8.3 Record Keeping Forms 4. CCHCS Specialized Training Memo 5. Prison Rape Elimination Act (PREA) Policy Specialized Training for Medical and Mental Health Staff 11057450 6. CDCR On-the-Job Training Prison Rape Elimination Act (PREA) Policy Specialized Training for Medical and Mental Health Staff 11057450 7. Interviews: Medical and Mental Health Staff <p data-bbox="242 640 1485 734">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. In addition, the facility reported that there are seventy-four (74) medical and mental health staff who have received this training.</p> <p data-bbox="242 763 448 790"><u>Provision (a)(c)(d):</u></p> <p data-bbox="242 819 1485 949">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."</p> <p data-bbox="242 978 1469 1041">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."</p> <p data-bbox="242 1070 1430 1133">CDCR DOM Chapter 3, Article 18, §32010.8.3 Record Keeping Forms states, "For each training activity conducted, the following records shall be maintained:</p> <p data-bbox="242 1162 1481 1256">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."</p> <p data-bbox="242 1285 1473 1514">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.</p> <p data-bbox="242 1543 1497 1704">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.</p> <p data-bbox="242 1733 1490 1962">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.</p> <p data-bbox="242 1991 1474 2085">The auditor reviewed five (5) randomly selected medical/mental health staff files. All files reviewed had documentation that specialized training had been completed. In addition, the auditor confirmed they had also completed general PREA training each year during the in-service training.</p> <p data-bbox="242 2114 392 2141"><u>Provision (b):</u></p>

CCC does not conduct forensic examinations at the facility, 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 this standard. No corrective action is needed.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44 §54046.5, Initial Screening 3. CCR Title 15, §3269 Inmate Housing Assignments 4. PREA Risk Screening, Correctional Counselor Responsibilities 5. PREA 30 Reassessment Report (Tracker) 6. CDCR DOM Chapter 5, Article 44, Inmate Reassessment Review within 30 days 7. CDCR DOM Chapter 5, Article 44 §54040.6, Offender Non-Discipline for Refusal to Answer 8. CDCR DOM Chapter 6, Article 5 §62010.8.3, Initial Classification Committee 9. Memorandum, dated November 6, 2020 on the Transgender Respect, Agency and Dignity Act 10. CDCR DOM Chapter 5, Article 44 §54040.3, Definitions 11. CDCR 128 MH5 12. Interviews: Random Inmates, Intake Staff and Classification Counselors <p>The facility indicated in their response to the Pre-Audit Questionnaire that the agency has a policy that requires screening for risk of sexual abuse victimization or sexual abusiveness towards other inmates. The initial assessment is completed with seventy-two (72) hours of arrival at the facility. The facility reported one thousand seventy-nine (1079) inmates entered the facility whose length of stay was over 72 hours and one thousand and fifty (1050) inmates have entered into the facility whose length of stay was over thirty (30) days, within the past twelve (12) months.</p> <p><u>Provision (a)(b):</u></p> <p>CDCR DOM Chapter 5, Article 44, §54046.5 (Initial Screening) states “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.”</p> <p>CCR Title 15, §3269 (Inmate Housing Assignments) state “Upon arrival at an institution, facility, or program reception center, a designated custody supervisor shall screen an inmate for an appropriate housing assignment.”</p> <p>During interviews with intake staff it was reported that the initial screening is conducted immediately upon the inmate’s arrival at the facility. During the site review, the facility did not have incoming inmates to observe the intake process. However, the auditor had staff walk her through the intake process. Inmates entering the facility through the intake area, are given PREA Education and watch the PREA video. Each inmate is screened by the Intake staff in an area that does not allow for privacy. Corrective Action is needed to ensure that inmates are able to participate in the assessment without fear of being overheard by other inmates or staff.</p> <p>The auditor reviewed fifty-nine (59) inmate files, and determined that the facility did not provide documentation of the initial screening assessment for nineteen (19) inmates. Corrective Action is need to ensure that all inmates are screened for risk of sexual victimization or risk of sexually abusing other inmates with seventy-two (72) hours of their intake.</p> <p><u>Provision (c):</u></p> <p>CCC utilizes an objective screening instrument. This screening assessment 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.</p> <p>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.</p> <p><u>Provision (d)(e):</u></p> <p>The PREA Screening tool was reviewed and considers:</p> <ul style="list-style-type: none"> • Victim of a substantiated or unsubstantiated incident of sexual violence in a correctional setting? <ul style="list-style-type: none"> ◦ Have you experienced sexual victimization in a correction setting that you have not previously reported?

- Have you experienced sexual victimization in a non-correctional setting?
- Mental, physical, or development disability?
- Age? (21 and under or 65 and over)?
- Physical build (male: 5'2 or less in height and/or weighs less than 120 lbs, female: 5'0 or less height and/or weighs less than 90 lbs)
- Any prior or current convictions for sex offenses against an adult or child?
- Do you consider yourself or have you ever been perceived by others to be gay, lesbian, bisexual, transgender, intersex, or gender-non-conforming?
- First incarceration in state prison?
- Exclusively non-violent criminal history (convictions only)
- Inmate currently considers themselves vulnerable to sexual victimization?

CCC does not house inmates solely for civil immigration purposes.

The instruction page indicates that when five or more answers are "yes" to questions 2 through 10, or "yes" was answered on 1A and/or 1B the scoring routine would suggest that the inmate is "at risk as a victim."

In assessing inmates for risk of sexual abusiveness, the PREA Screening Form was reviewed and includes:

- History of sexual violence in a correctional setting?
- Prior convictions for sex offenses in a non-correctional setting?
- Conviction for non-violent offense in a non-correction setting:
- Guilty finding for non-sexual violent offense in a correctional setting; meeting the criteria defined as Division A-1, A2 or b offense.

When all (3) answers are "Yes" to questions 2, 3, and 4 or "Yes" was answered to question 1, the scoring routine will suggest the inmate is "At Risk as an Abuser."

California Penal Code Section 667.5 (c) defines the following sexual abuse related terms in the following manner and is 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

During an interview with staff who complete the thirty (30) day reassessment, it was reported that Intake staff who complete the seventy-two (72) hour assessment are not completing the risk assessment appropriately and utilizing the risk assessments for housing, programming and work assignments. Documentation in support of this statement was provided to the auditor. During preparation for an inmate's thirty (30) day assessment, the staff member realized that the inmate had recently committed sexual violence of another inmate at the local detention center, prior to being incarcerated at CCC. The initial risk assessment did not include the history of sexual violence in a correctional setting, although the paperwork was part of the initial intake packet. As per the CDCR instructions, the inmate should have been classified as "at risk as an abuser" and should have been housed appropriately. The inmate was placed in a dorm setting, endangering potential "at risk of victimization inmates" of sexual violence, as well as potential risk to the general population. A risk assessment was immediately completed with the information, and the inmate was properly designated "at risk as an abuser" and determined he could not be housed in a dorm setting and ultimately was transferred to another facility more properly suited to house an inmate that does not include a dorm setting.

This issue was discussed by the auditor with facility leadership during the out brief. Prior to the issuance of the interim report, the facility immediately implemented risk assessment training for all intake staff and Classification Counselors. The auditor was provided documentation of the training received, and staff understanding of the training, which had been documented by the staff signature. Shortly after the training, the facility had a similar situation occur and the intake staff, immediately notified the supervisor of an "at risk as an abuser" inmate. The inmate was immediately housed appropriately until arrangements could be made to transfer the inmate to a facility that is not a dorm setting. Once the facility had knowledge of a potential risk of inmate sexual safety, they immediately acted and implemented corrective action.

Provision (f)(g):

CDCR DOM Chapter 5, Article 44, §54040.7, Inmate Reassessment Review within 30 days states, "An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information

that bears on the inmate's risk of sexual victimization or abusiveness."

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 Screening 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.

CDCR DOM Chapter 6, Article 5 §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.

During inmate interviews, a majority of the inmates reported that they were given the risk assessment upon arrival at the facility. However many of the inmates interviewed at the conservation camps reported that they had not been given a risk assessment. Upon further review, it is the auditor's belief that many of the inmates were speaking about receiving an assessment when arriving at the conservation camp. The risk assessments are completed at CCC prior to being housed at the conservation camp.

The auditor reviewed fifty-nine (59) inmate files. The auditor determined that the thirty (30) day reassessment was completed late in ten (10) of the inmates files and two (2) inmates files did not have documentation of the thirty (30) day assessment. Corrective action is needed to ensure that all inmates are reassessed for risk of victimization or abusiveness based upon additional relevant information received by the facility since the intake screening. Corrective Action is needed.

Provision (h):

CDCR DOM Chapter 5, Article 44, §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." This was confirmed during interviews with intake staff, Classification Counselor and random inmates.

Provision (i):

CDCR DOM Chapter 5, Article 44, §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.

During interviews with intake staff, random staff and Classification Counselors, the auditor confirmed that the answers on the risk assessments are available only to those that "need know" basis.

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

Corrective Action:

1. The facility shall assess the intake area and determine the best course of action to allow inmates to participate in the assessment process without fear of being overheard by other inmates or staff.
2. The facility shall establish a process to ensure that all inmates are assessed within seventy-two (72) hours of arrival and that such documentation is maintained.
3. The facility shall establish a process to ensure that all inmates are reassessed within thirty (30) days from the inmate's arrival at the facility and shall ensure that documentation is maintained.

After the issuance of the Interim Audit Report, the auditor and the facility discussed the recommended corrective action for this standard and agreed upon a plan for completion.

During the corrective action period, the auditor randomly reviewed inmate assessments monthly. Due to the upcoming closure of the facility, as of October 25, 2022, all inmate movement into the facility has stopped. Inmates are only being transferred out of the facility. Therefore the auditor could not continue to ensure that the risk screened and the thirty day

assessments are being completed timely. Inmates being assigned to the respective conservation camps are currently being screened at Sierra Conservation Camp (SCC) and transferred to the camps. The auditor recently audited SCC and has determined that the screenings and the reassessments are being completed timely and appropriately.

The facility has demonstrated compliance during this period of corrective action and provided sufficient documentation to the auditor.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.4 Preventative Measures
3. CDCR DOM Chapter 5, Article 44, §54040.6 Single Cell Status
4. CDCR DOM Chapter 5, Article 44, §54040.7 Screening for Appropriate Placement
5. CDCR DOM Chapter 5, Article 44, §62080.14 Transgender or Intersex Inmates
6. CCR Title 15, §3377 Security Levels
7. How to run a Transgender Inquiry, handout instructions
8. Use of Screening Information Memo
9. CDCR Compliance Letter
10. PREA Screening Instructions- Job Aid
11. Changes to PREA Screening Form-Mental Health Referral Process
12. Counselor Responsibilities-Memo
13. 128-B Transgender Biannual Assessment Chrono
14. Statewide list of Transgender Inmate tracking
15. Transgender Bi-annual Reassessment for Safety in Placement and Programming
16. Brochure for Transgender Inmates, English and Spanish
17. Memorandum to all Directors, Re: PREA Risk Screening
18. Interviews: Facility PREA Compliance Manager, Staff responsible for Risk Screenings, Random Staff and Random Inmates

The facility indicated in their responses to the Pre-Audit Questionnaire 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 or 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 cellmates' 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 appropriate.

During an interview with staff who complete the thirty (30) day reassessment, it was reported that Intake staff who complete the seventy-two (72) hour assessment are not completing the risk assessment appropriately and utilizing the risk assessments for housing, programming and work assignments. Documentation in support of this statement was provided to the auditor. During preparation for an inmate's thirty (30) day assessment, the staff member realized that the inmate had recently committed a rape of another inmate at the local detention center, prior to being incarcerated at CCC. The initial risk assessment did not include the history of sexual violence in a correctional setting, although the paperwork was part of the initial intake packet. As per the CDCR instructions, the inmate should have been classified as "at risk as an abuser" and should have been housed appropriately. The inmate was placed in a dorm setting, endangering potential "at risk of

victimization inmates" of sexual violence, as well as potential risk to the general population. A risk assessment was immediately completed with the information, and the inmate was properly designated "at risk as an abuser" and determined he could not be housed in a dorm setting and ultimately was transferred to another facility more properly suited to house an inmate that does not include a dorm setting.

This issue was discussed by the auditor with facility leadership during the out brief. Prior to the issuance of the interim report, the facility immediately implemented risk assessment training for all intake staff and Classification Counselors. The auditor was provided documentation of the training received, and staff understanding of the training, which had been documented by the staff signature. Shortly after the training, the facility had a similar situation occur and the intake staff, immediately notified the supervisor of an "at risk as an abuser" inmate. The inmate was immediately housed appropriately until arrangements could be made to transfer the inmate to a facility that is not a dorm setting. Once the facility had knowledge of a potential risk of inmate sexual safety, they immediately acted and implemented corrective action.

The auditor reviewed fifty-nine (59) inmate files, and determined that the facility did not provide documentation of the initial screening assessment for nineteen (19) inmates. Corrective Action is needed to ensure that all inmates are screened for risk of sexual victimization or risk of sexually abusing other inmates within seventy-two (72) hours of their intake and the facility shall use the information to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

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 and 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."

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 institution's 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. The interview is documented in the Classification Committee Chrono.

The auditor reviewed the Statewide list of Transgender Inmate tracking. CCC is not one of the fourteen (14) facilities designated to house the transgender population. The auditor reviewed six (6) committee chronos, which suggests that inmates identified as transgender inmates are not prohibited from participating in programming, such as the programming provided at the conservation camps. Transgender inmates can and are designated firefighters and placed at the conservation camps. In review of the Statewide list of Transgender Inmates, there were no transgender inmates housed at CCC during the site review. In addition, this was confirmed through interviews with staff and 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.

Corrective Action:

1. The facility shall establish a process to ensure that all inmates are assessed within seventy-two (72) hours of arrival and shall use the information to inform housing, bed, work, education and program assignments with the goal of

keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

After the issuance of the Interim Audit Report, the auditor and the facility discussed the recommended corrective action for this standard and agreed upon a plan for completion.

During the corrective action period, the auditor randomly reviewed the screening from incoming inmates. Due to the upcoming closure of the facility, all inmate movement into the facility has stopped. Inmates are only being transferred out of the facility. Therefore the auditor could not continue to ensure that the facility utilizes the information from the assessment to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized. Inmates being assigned to the conservation camps have the initial assessment completed at SCC and subsequently housed accordingly.

The facility has demonstrated compliance during this period of corrective action and provided sufficient documentation to the auditor.

115.43	Protective Custody
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1158 300">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="279 349 1398 479" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CCR Title 15, Article 7, §3335 Segregated Housing 30-day Review 3. CDCR DOM Chapter 5, Article 44, §54040.6 Offender Housing 4. Interviews: Warden, Staff who supervise inmates in Segregated Housing and Inmates in Segregated Housing <p data-bbox="242 508 1461 669">The facility indicated on their response to the Pre-Audit Questionnaire 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.</p> <p data-bbox="242 698 504 728"><u>Provision (a)(b)(c)(d)(e):</u></p> <p data-bbox="242 757 1489 918">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."</p> <p data-bbox="242 947 1477 1243">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."</p> <p data-bbox="242 1272 1473 1433">During the site review, the auditor confirmed with staff who supervise inmates in segregation, that no inmates are placed in involuntary segregation, because they are high risk for victimization. The facility Warden confirmed that inmates at high risk would normally not be placed into segregation. The facility has other means to keep an inmate safe. However, she did confirm that if an inmate had to be placed into segregation, for instance, pending transfer to another facility, it would be for less than twenty-four (24) hours.</p> <p data-bbox="242 1462 1469 1525">During the site review, no inmates were located in the segregated housing that were high risk for victimization, therefore no interview was conducted.</p> <p data-bbox="242 1554 376 1583"><u>Conclusion:</u></p> <p data-bbox="242 1612 1481 1675">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.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.4 Offender Education
3. CDCR DOM Chapter 5, Article 44, §54040.7 Third Party and Mandated Reporting
4. CCR Title 15, §3401.5 Reporting Mandates
5. PREA Handbook (English and Spanish)
6. Sexual Abuse/Assault prevention & Intervention Brochure, English and Spanish
7. Mailroom Correspondence Instructions
8. Sexual Violence Awareness Brochure
9. Contractor, Volunteer and Staff Reporting Training
10. Interviews: Random Staff and Random Inmates

The facility indicated in their response to the Pre-Audit Questionnaire 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, "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, "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, "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 "Shine the Light" poster. The poster is printed in both English and Spanish. The poster informs inmates of at least three (3) ways to privately report sexual abuse, sexual harassment or retaliation, which includes:

1. Tell any staff member
2. Use the confidential telephone numbers to CDCR Office of Internal Affairs
3. Call the Inspector General PREA Ombudsperson

During the site review of CCC and all the associated conservation camps, the auditor observed the "Shine the Light" posters, in all places where inmates congregate, to include the housing units, programming and the inmate telephones.

The auditor reviewed the Sexual abuse/Assault Prevention and Intervention Brochure. The brochures are 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

Both brochures are given to inmates upon intake and are available in areas around the facility and the conservation camps.

The auditor observed posters for the Inspector General Offices, to report staff misconduct. Utilizing the number on the

posters and brochures the auditor called the Inspector General Office. The Inspector General's Office is an external agency and not part of CDCR although the OIG does have oversight of CDCR and reports directly to the Governor's Office. In addition, the auditor utilized the Inspector General's Office website. The website included a reporting feature in which to file a report on behalf of an inmate. The website also included a function to report any staff misconduct. The auditor utilize both reporting features and received a response fairly quickly for the OIG's Office. It was confirmed that if the office received a report of an allegation of sexual abuse, sexual harassment, retaliation or staff misconduct, it would be forwarded to the facility PREA Compliance Manager for investigation. The Inspector General's Office would follow up to ensure that an investigation has been completed.

During random inmate interviews, the inmates could provide at least three (3) ways in which they could report an allegation if it was needed. Random staff indicated that there would not be a need to privately report, however they could also utilize the reporting mechanisms that are afforded to the inmates. In addition, staff were aware of the requirement that they must accept an allegation, no matter if it verbal, in writing or anonymous, all would be reported and handled in the same way.

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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.7 Notification via Inmate Appeals
3. CDCR DOM Chapter 5, Article 44, §54040.15.1 Alleged Victim, False Allegations
4. CCR Title 15, §3084.2 Appeal Preparation and Submittal
5. CCR Title 15, §3084.9 Filing of Emergency Appeals
6. CCR Title 15, §3084.9 Grievance with no Time Constraint
7. CDR Title 15, §3084.7 Not required to Submit appeal to subject of complaint
8. CDR DOM §54040.7.2 Notification via 3rd Party Reporting and Procedures
9. Interviews: Appeal Officer, Random Inmates and Investigation Staff

The facility indicated in the Pre-Audit Questionnaire 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.

Provisions (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, (5) states, "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 (1) (A) Staff Sexual Misconduct Appeals) states, "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 "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 that "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 allegation may be subject to disciplinary action."

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 Appeal, 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. Appeals filed at the conservation camps are all transported weekly to Acton Conservation Camp and are picked by CCC staff. During interviews with random Inmates, the auditor confirmed that inmates housed at the conservation camps are aware that appeals are only picked up once a week. 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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.8.1 Victim Advocate Communications
3. CDCR DOM Chapter 5, Article 44, §54040.8.2 Access to outside Victim Advocate
4. PREA Sexual Violence Awareness Brochure-English and Spanish
5. Inmate Handbook Information for Victim Advocate-English and Spanish
6. Victim Restricted Information Deletion Form
7. Victims of Sex Crimes Confidential
8. California Advancing PREA: A Guide to Working with Rape Crisis Centers Toolkit for PCM's
9. Mailroom Correspondence Instructions
10. Interviews: Random Inmates, Mailroom Staff, Inmates who Reported Sexual Abuse, Just Detention International Staff and Lassen Family Services Staff

The facility indicated in their response to the Pre-Audit Questionnaire 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.

The auditor reviewed the Sexual Abuse/Assault Prevention and Intervention brochure. This brochure is also printed in 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 CCC 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: Lassen Family Services

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 Statewide with whom CDCR contracts including the Woman's Center High Desert and the address provided in the inmate handbook.

During interviews with several staff members from the mailroom, it appeared that they had been newly hired and were not aware of the confidentiality imposed by this standard. Corrective Action is needed.

During the intake process, all inmates are given an CCC Inmate Handbook. The handbook is in both English and Spanish. Contained within the handbook 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: Lassen Family Services" and provides the mailing address.

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.

During an interview with the staff at the Lassen Family Services, the auditor confirmed that the facility and Lassen Family Services have entered into an MOU. Services provided were discussed. The Lassen Family Services staff reported that both agencies have a good working relationship. They attend training with each other. Services are provided to inmates at CCC and at all of the associated Conservation Camps. In person visits at the camps, have not been needed up to this point. In discussions with Just Detention International they indicated that they have not received letters of concern from inmates housed at CCC or in the conservation camps.

Corrective Action:

1. The facility shall train all mailroom staff on handling any mail addressed to the Lassen Family Services and provide the auditor with documentation of such training.

After the issuance of the Interim Audit Report, the auditor and the facility discussed the recommended corrective action for this standard and agreed upon a plan for completion.

During the corrective action period, the facility provided training for all mailroom staff to ensure confidentiality if the inmates choose to access services with the Lassen Family Services, utilizing the mail services

The facility has effectively demonstrated compliance during this period of corrective action and provided sufficient documentation to the auditor.

115.54	Third-party reporting
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1230 300">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="277 349 991 544" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.7.2 Third Party Reporting 3. CDCR DOM Chapter 5, Article 44, §54040.7 Third Party Notification 4. PREA Orientation in Inmate Handbook- English and Spanish 5. Agency PREA Web Page 6. Interviews: Office of Inspector General and Random Inmates <p data-bbox="242 573 1485 633">The facility indicated in their response to the Pre-Audit Questionnaire that the facility provides a method to receive third party reports of inmate sexual abuse and sexual harassment.</p> <p data-bbox="242 663 392 692"><u>Provision (a):</u></p> <p data-bbox="242 721 1493 880">CDCR DOM Chapter 5, Article 44, §54040.7.2 (Notification via Third Party Reporting of Misconduct against an Employee, Contractor or Volunteer) states, "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.</p> <p data-bbox="242 909 1485 1039">"When a third-party files such a complaint 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."</p> <p data-bbox="242 1068 1477 1263">The PREA Information Sheet for the Orientation Handbook, informs the inmates that a family member or friend, can make a report on their behalf. In addition, the agency PREA web page provides the public with information on how to report an allegation of sexual abuse. The page provides addresses to write, as well as provides links to report an allegation. The auditor tested the links found on the agency website and received responses to all inquiries. The receiving party was able to articulate the steps that are taken if a report of sexual abuse, sexual harassment or retaliation for reporting such abuse, is received.</p> <p data-bbox="242 1292 1493 1352">Random inmates interviewed were aware that family members could report sexual abuse, sexual harassment or retaliation on their behalf, utilizing the agency website or by calling the facility or the conservation camp.</p> <p data-bbox="242 1382 376 1411"><u>Conclusion:</u></p> <p data-bbox="242 1440 1477 1500">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.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention
3. CDCR DOM Chapter 5, Article 44, §54040.7 Detection, Notification and Reporting
4. CDCR DOM Chapter 5, Article 44, §54040.13 Allegation Follow up
5. CDCR DOM Chapter 5, Article 44, §54040.8 Response
6. CCHCS Chapter 4, 4.1.6 Prison Rape Elimination Act Procedure
7. Division of Juvenile Justice Policy 1435 Reporting Suspected Child Abuse or Neglect
8. PREA Training Curriculum
9. PREA Allegation Log
10. Memorandum from CA Health Care Services to all Wardens, facilities on Mandatory Reporting of Patient Sexual Abuse or Sexual Misconduct
11. Interviews: Random Staff, Warden, PREA Compliance Manager, Medical/Mental Health

The facility indicated in the Pre-Audit Questionnaire, 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 they disclose the limits of confidentiality immediately upon services for 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.

CCC 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 specialized 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 was a minor at the time the abuse occurred. The facility Warden was aware of this requirement, however she reiterated that CCC does not house persons under the age of 18, however the process is the same for any victims considered to be a vulnerable adult.

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."

The process was confirmed during interviews with the facility investigators 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.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.7 Detection, Notification and Reporting 3. CDCR 2304 Protection against Retaliation (PAR)-Inmate 4. CDCR 2305 Protection against Retaliation (PAR)-Staff 5. Samples of PAR Forms 6. Interviews: Director of Adult Prisons and Random Staff <p>In the Pre-Audit Questionnaire, 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.</p> <p><u>Provision (a):</u></p> <p>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."</p> <p>During an interview with the Director of Adult Prisons, she stated that inmate's safety is the number one priority, and the inmate would be protected in whatever means are necessary. All random staff reported that their responsibility is to ensure that the inmate is safe. They would immediately notify the supervisor and isolate the inmate to keep him safe.</p> <p><u>Conclusion:</u></p> <p>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.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 206 451 235">Auditor Discussion</p> <p data-bbox="242 271 1230 300">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="277 349 1249 477" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.7.4 Notification from/to other Confinement Facilities 3. Samples of Warden-to-Warden Notification 4. Interviews: Director of Adult Prisons and the Facility Warden <p data-bbox="242 508 1469 636">On the Pre-Audit Questionnaire, 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 has been one (1) allegation received that an inmate was abused while confined at another facility.</p> <p data-bbox="242 667 448 696"><u>Provision (a)(b)(c):</u></p> <p data-bbox="242 723 1485 949">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."</p> <p data-bbox="242 981 1481 1142">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."</p> <p data-bbox="242 1173 1481 1335">The Director of Adult Prisons was 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. The auditor was provide samples of the notifications.</p> <p data-bbox="242 1366 1485 1527">During interviews with the facility investigators they confirmed the procedure, that if an 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.</p> <p data-bbox="242 1559 376 1588"><u>Conclusion:</u></p> <p data-bbox="242 1619 1481 1682">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.</p>

115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol style="list-style-type: none"> 1. CCC 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: Custody First Responders and Non-custody First Responders <p>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 zero (0) allegations of sexual abuse whereas a security staff member was notified in a time to collect physical evidence.</p> <p><u>Provision (a)(b):</u></p> <p>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."</p> <p>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."</p> <p>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."</p> <p>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.</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this standard. No corrective action is needed.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.8 Response 3. CDCR DOM Chapter 5, Article 44, §54040.8.3 Medical Services Responsibilities 4. CCC Coordinated Response Plan 5. Interviews: CCC Facility Warden <p>The facility indicated in their response to the Pre-Audit Questionnaire 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.</p> <p><u>Provision (a):</u></p> <p>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.</p> <p>During an interview with the Facility Warden, the auditor confirmed that the facility does have a coordinated response plan in place. The auditor reviewed the California Correctional Center Supplement. The plan addresses the actions taken in response to an incident of sexual abuse among staff first responders, medical/mental health practitioners, investigators and facility leadership. In addition, the plan includes telephone numbers to call to reach the SART at each hospital in the area of the facility and for each conservation camp.</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this standard. No corrective action is needed.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. California Correctional Peace Officer Association Agreement (CCPOA) 3. Interview: Agency Head <p>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.</p> <p><u>Provision (a)(b):</u></p> <p>CCPOA Agreement, 4.01 Management Rights state, "...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."</p> <p>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.</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the facility is fully compliant with this standard. No corrective action is needed.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.1 Policy
3. CDCR DOM Chapter 5, Article 44, §54040.13 Allegation Follow up
4. Protection Against Retaliation- Form 2305, Staff
5. CCR Title 15, §3401.5 Staff Sexual Misconduct
6. CCR Title 15, §3335 Administrative Segregation, 30 day follow-up
7. CDCR Form-Institutional PREA Review Committee
8. Protection Against Retaliation (PAR) Form 2304, Inmate
9. Interviews: Director of Adult Prisons, Warden, Designated Member Charged with Retaliation Monitoring, Inmates who Reported Abuse

In the Pre-Audit Questionnaire, 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):

CDCR 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.

The Director of Adult Prisons, state that the facility PCM monitors retaliation for ninety (90) days. They will re-direct staff, speak with the victim to make sure they feel safe. The facility Warden confirmed that the while monitoring for retaliation, they look at housing, programming, disciplinary reports and will investigate any claims of retaliation. Inmates who reported sexual abuse, stated the facility PCM would periodically check in with them to ensure that there were no issues.

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 designated staff monitor the conduct and treatment of the victims, to see if there are any changes that may suggest possible retaliation by other inmates or staff. Those responsible for conducting the retaliation monitoring reported that they will continue to monitor the victim, until the conclusion of the investigation. It was reported that there has not been an incident in the past twelve months that required retaliation monitoring beyond the ninety (90) days, however they would continue to monitor the victim, if needed. In addition, the staff will monitor all witnesses or staff that have expressed a fear of possible 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.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 1230 297">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="277 349 1481 477" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.6 Offender Housing 3. CCR Title 15, Article 7, §3335 Administrative Segregation 4. Interviews: Facility Warden, Staff who Supervise Inmates in Segregated Housing and Inmates in Segregated Housing <p data-bbox="240 508 1461 633">In the Pre-Audit Questionnaire, 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.</p> <p data-bbox="240 665 389 692"><u>Provision (a):</u></p> <p data-bbox="240 723 1461 848">CDCR DOM Chapter 5, Article 44, §54040.6 (Offender Housing) states, "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."</p> <p data-bbox="240 880 1485 1008">CCR Title 15, Article 7, §3335 (D1) (Administrative Segregation) states, "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."</p> <p data-bbox="240 1039 1469 1131">CCR Title 15, Article 7, §3335 (D2) (Administrative Segregation) states, "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."</p> <p data-bbox="240 1162 1453 1254">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."</p> <p data-bbox="240 1285 1493 1447">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 abuser. Staff reported that the abuser would be placed in segregated housing. This was also confirmed by the facility Warden. She stated that the facility does have alternative means to protect the inmate without the use of segregated housing.</p> <p data-bbox="240 1478 376 1505"><u>Conclusion:</u></p> <p data-bbox="240 1536 1481 1594">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.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.4 Education and Prevention
3. CDCR DOM Chapter 5, Article 44, §54040.12 Investigations
4. CDCR DOM Chapter 5, Article 44, §54040.17 Records Retention
5. CDCR DOM Chapter 1, Article 20, §14030.6 Who may request a Polygraph Examination
6. CDCR DOM Chapter 3, Article 14, §31140.1 Internal Affairs Investigations
7. CDCR DOM Chapter 3, Article 14, §31140.6 Authority to Conduct Investigations
8. CCR Title 15, §3316 Referral for Criminal Prosecution
9. California Penal Code 830.5
10. CDCR Records Retention Schedule Update
11. CDCR Basic Investigator Course, Specialized PREA Training for Locally Designated Investigator
12. CDCR OIG Investigator's Field Guide
13. Interviews: Investigative Staff, PREA Coordinator, PREA Compliance Manager, and Inmates who reported sexual abuse

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 auditor reviewed six (6) investigations that were randomly selected, four (4) of the investigations were completed and demonstrated that they were completed timely and thoroughly.

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.

Of the six (6) investigations randomly selected and reviewed by the auditor, in each the investigator who completed the report was trained in both the specialized investigator training, required as per the PREA standards, as well as the general training that is received by all staff.

Provision (c):

During interviews with two (2) investigators at the facility level, they each independently stated and described methods to gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; discussed interviewing alleged victims, suspected perpetrators, and witnesses; and indicated that

they will review prior complaints and reports of sexual abuse involving the suspected perpetrator for all investigations.

Provision (d):

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.

Provision (e):

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 may make a request for a polygraph examination. No person shall be ordered to take a polygraph examination."

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."

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.

The two (2) investigators interviewed were able to clearly articulate not only each provision required by the standard, but also additional details from the training and received, and, further, were able to provide samples from their experience in the facility. In addition, the detailed and thorough reports written exceeded the requirements of the standards in that each was extremely detailed, thorough and written.

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.

115.72	<p>Evidentiary standard for administrative investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.12 (Investigation) 3. CDCR DOM Chapter 3, Article 22, §33030.13.1 (Investigative Findings) 4. Interviews: Investigative Staff <p>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.</p> <p><u>Provision (a):</u></p> <p>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 were sustained."</p> <p>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."</p> <p>The two (2) investigators interviewed were each able to define and describe preponderance of evidence and, in addition, provide samples from cases in the facility to demonstrate their understanding in the application of this burden of proof.</p> <p><u>Conclusion:</u></p> <p>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.</p>
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Auditor Overall Determination: Meets Standard

Auditor Discussion

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

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

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 there were two (2) investigations into sexual abuse, and both 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."

The investigations randomly selected and reviewed by the auditor demonstrated that this is occurring in practice. In addition, the Warden and investigative staff were able to describe the process. The auditor reviewed samples of the notifications to the alleged victims in both cases.

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."

The investigations randomly selected and reviewed by the auditor demonstrated that this is occurring in practice. In addition, the Warden and investigative staff were able to describe the process.

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."

The investigations randomly selected and reviewed by the auditor demonstrated that this is occurring in practice. In addition, the Warden and investigative staff were able to describe the process.

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 notified.

The investigations randomly selected and reviewed by the auditor demonstrated that this is occurring in practice. The Facility Warden and investigative staff were able to describe the process. In addition, the auditor reviewed several samples of the notifications.

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."

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.

115.76	Disciplinary sanctions for staff
	<p data-bbox="240 143 738 172">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 232">Auditor Discussion</p> <p data-bbox="240 268 1230 295">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="277 347 1302 542" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.3 Definitions 3. CDCR DOM Chapter 3, Article 22, § 33030.19 Employee Disciplinary Matrix 4. CDCR DOM Chapter 5, Article 44, §54040.12.4 Reporting to Outside Agencies for Contractors 5. CCR Title 15, §3401.5 Staff Sexual Misconduct 6. Interviews: Director of Adult Prisons, Facility Warden, Agency PREA Coordinator and Random Staff <p data-bbox="240 571 1497 665">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 been one (1) staff member that has been disciplined for violations of the policies during the reporting period.</p> <p data-bbox="240 696 419 723"><u>Provision (a)(b):</u></p> <p data-bbox="240 754 1458 947">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.</p> <p data-bbox="240 978 1481 1039">CDCR DOM Chapter 3, Article 22, §33030.19 (Employee Disciplinary Matrix) indicate the penalty for sexual misconduct with an inmate(s)/parolees is dismissal.</p> <p data-bbox="240 1070 1437 1131">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."</p> <p data-bbox="240 1162 1477 1391">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 contractor discipline, during the reporting period. The auditor reviewed six (6) investigations, which included a substantiated investigation of staff on inmate sexual misconduct. The staff member was allowed to resign and was walked off the facility grounds and has been permanently excluded from entering institutional grounds.</p> <p data-bbox="240 1422 1485 1482">During interviews with Random staff, it was confirmed that staff are aware that violation of the zero tolerance policy would be grounds for termination.</p> <p data-bbox="240 1514 419 1541"><u>Provision (c)(d):</u></p> <p data-bbox="240 1572 1458 1666">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."</p> <p data-bbox="240 1697 1422 1758">During an interview with the Director of Adult Prisons and the agency PREA Coordinator, the auditor confirmed that all licensing bodies would be notified of any violations of the agency policies.</p> <p data-bbox="240 1789 376 1816"><u>Conclusion:</u></p> <p data-bbox="240 1848 1477 1908">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.</p>

115.77	Corrective action for contractors and volunteers
	<p data-bbox="240 143 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 453 239">Auditor Discussion</p> <p data-bbox="240 271 1230 302">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="277 349 1251 479" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.12.4 Reporting to Outside Agencies for Contractors 3. CDCR DOM Chapter 10, Article 9, §101090.9 Termination 4. Interviews: Facility Warden <p data-bbox="240 508 1497 636">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.</p> <p data-bbox="240 665 392 696"><u>Provision (a):</u></p> <p data-bbox="240 723 1458 817">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.”</p> <p data-bbox="240 846 392 878"><u>Provision (b):</u></p> <p data-bbox="240 904 1481 1032">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.”</p> <p data-bbox="240 1061 1497 1256">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 has involved a contractor or volunteer that would require the notification or referral.</p> <p data-bbox="240 1285 376 1317"><u>Conclusion:</u></p> <p data-bbox="240 1344 1481 1406">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.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.15 Disciplinary Process
3. CDCR DOM Chapter 5, Article 44, 54040.7 Referral for Mental Health Screening
4. 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
5. CDCR DOM Chapter 5, Article 44, § 54040.15.1 Alleged Victim-False Allegations
6. CCR Title 15, §3007 Sexual Behavior
7. CCR Title 15, §3323 Disciplinary Credit Forfeiture Schedule
8. CCR Title 15, §3317 Mental Health Evaluations for Disciplinary Hearings
9. Interviews: Facility Warden, Classification Counselors and the facility PREA Compliance Manager

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 has been zero (0) administrative findings of inmate on inmate sexual abuse that have occurred at the facility within the past twelve months.

Provision (a)(b):

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".

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.

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."

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)(d):

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):

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.

Discussions with the facility Classification Counselors, confirmed that inmate victims are not disciplined for sexual conduct if a staff member consented to the behavior. However an inmate can be disciplined for sexual misconduct, if staff did not consent to such conduct.

Provision (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 PREA Compliance Manager indicated that there have not been any inmates disciplined for making a false report of a crime.

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 all sexual activity between inmates. The facility investigators confirmed that all acts of sexual activity are investigated to determine if the inmates have 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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.7 Referral for Mental Health Screening
3. CDCR DOM Chapter 5, Article 44, §54040.3 Definitions
4. CDCR MH-7448 Informed Consent for Mental Health
5. CDCR 7552 Prison Rape Elimination Act Authorization for Release of Information
6. California Prison Health Care Services, Chapter 3 Health Care Transfers
7. Program Guide Overview-Mental Health Delivery System
8. PREA Screening Form
9. Mental Health Emergent/Urgent Consult Log
10. Samples of CDCR 128-MH5 Mental Health Chrono
11. Memo
12. Interviews: Inmates who disclosed sexual victimization at risk screening, Staff responsible of Risk Screenings, Medical/Mental Health

The facility indicated in their response 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.

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 an 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-MH5, Mental Health Referral Chrono."

Program Guide Overview-Mental Health Delivery System states, "Any inmate can be referred for mental health services at any time..... A referral to mental health should be made whenever:

- An inmate demonstrates possible symptoms of mental illness or a worsening of symptoms.
- An inmate verbalizes thoughts of suicide or self-harm behavior.
- Upon return from court when an inmate has received bad news such as a new sentence that may extend their time;
- An inmate has been identified as possible victim per the Prison Rape Elimination Act.
- 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 all criteria required by this provision, which include:

1. Victim of a substantiated or unsubstantiated incident of sexual violence in a correctional setting (not including sexual harassment);
2. 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 assesses 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 Health Referral Chrono and submit it to mental health.

The auditor reviewed samples of the CDCR 128 MH5, Mental Health Referral Chrono, which indicates that if the referral is "routine" the inmate will be seen within five (5) days, if "urgent" the inmate will be seen within twenty-four (24) hours.

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 a 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 Health Referral Chrono and submit it to mental health.

The auditor reviewed the CDCR Mental Health Referral Chrono 128 MH5. Section I. Identifying Information and Referral TimeLine which allows the user to choose the referral timeline, has the following options:

- PREA Routine (within 14 calendar days)
- Initial Intake Screening
- New Allegations/Post 72 hours
- PREA Perpetrator Routine (within 60 calendar days: New Allegation)
- Investigation on-going
- Investigation completed
- PREA Emergency (within 4 hours of return from or refusal of a SART/SANE examination)

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.

The auditor reviewed fifty-nine (59) inmate files, and determined that the facility did not provide documentation of the initial screening assessment for nineteen (19) inmates. Corrective Action is need to ensure that all inmates are screened for risk of sexual victimization or risk of sexually abusing other inmates with seventy-two (72) hours of their intake and the facility shall offer a follow up meeting with a medical or mental health practitioner if they disclose any prior sexual victimization during a screening pursuant to §115.41.

Provision (d)(e):

The auditor reviewed a memorandum issued December 5, 2017 which states, "Medical or Mental Health information related to sexual victimization or abusiveness that occurred in an institutional setting, is strictly limited to medical and mental health practitioners via the Electronic Unit Health Record (eUHR). The only staff allowed access to the eUHR are specific medical and mental health staff."

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

CDCR MH-7448 (Informed Consent for Medical Health Care) states, "Information shared in treatment is confidential and will be discussed only with the treatment team except under the following situations:

1. I pose a threat to the safety of myself and/or others or I am unable to care for myself, and/or engage in acts of sexual misconduct
2. If an assessment and report is required by legal proceedings such as, but not limited to, Board of Parole Hearings, Mentally Disorder Evaluation, sexually Violent Predator Evaluations, or Keyhea Hearings or
3. If my clinician suspects child, elder or dependent adult abuse (sexual, physical and/or financial."

Corrective Action:

1. The facility shall establish a process to ensure that all inmates are assessed for sexual victimization and/or abusiveness and shall offer a follow up meeting with medical or mental health practitioner if they disclose any prior sexual victimization during a screening pursuant to §115.41.

After the issuance of the Interim Audit Report, the auditor and the facility discussed the recommended corrective action for this standard and agreed upon a plan for completion.

During the corrective action period, the auditor randomly reviewed the screening from incoming inmates, there were no inmates who disclosed prior sexual victimization. Due to the upcoming closure of the facility, all inmate movement into the facility has stopped. Inmates are only being transferred out of the facility. Therefore the auditor could not continue to ensure that inmates who disclose prior victimization during screenings are timely offered mental health. Currently the initial assessments are being conducted at SCC, for inmates being assigned to the conservation camps under CCC.

The facility has effectively demonstrated compliance during this period of corrective action and provided sufficient documentation to the auditor.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.8.3 Medical Services Responsibilities
3. CDCR DOM Chapter 5, Article 44, §54040.8.3 Mental Health Responsibilities
4. CDCR DOM Chapter 5, Article 44, §54040.9 Forensic Medical Examination
5. CDCR CCHCS Chapter 16 §1.16.2 (Prison Rape Elimination Act Procedures)
6. CCHCS Policy- Grievance and Administration Chapter 10, 1.10 Copayment Program Policy
7. CDCR CCHCS policy 4.1.6 Prison Rape Elimination Act, Procedure
8. Interviews: Medical and Mental Health Staff, Facility Warden and Facility PCM

The facility indicated in their response 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 they 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."

Interviews with medical and mental health staff indicated that that inmates who are victims of sexual abuse received timely, unimpeded access to emergency medical treatment and crisis intervention. This was confirmed as the auditor reviewed eight (8) investigations and was provided with documentation that all who reported an allegation were seen by medical/mental health staff at the time the incident was reported.

Provision (b):

The facility has twenty-four hour qualified medical and mental health staff on duty. 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.

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 policy was confirmed during interviews with medical staff. In addition the facility Warden and PREA Compliance Manager confirmed that the victim is not subject to copayments 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.

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

1. CCC Pre-Audit Questionnaire
2. CDCR DOM Chapter 5, Article 44, §54040.10 Mental Health Responsibilities
3. CDCR DOM Chapter 5, Article 44, §54040.7 Referral to Mental Health Screening
4. CDCR DOM Chapter 5, Article 44, §54040.9 Forensic Medical Examination
5. CDCR DOM Chapter 5, Article 44, §54040.11 Suspect Processing
6. CCHCS Chapter 16 §1.16.2 Prison Rape Elimination Act Procedures
7. CDCR CCHCS Policy 4.1.6 Prison Rape Elimination Act
8. CDCR CCHCS Policy- Grievance and Administration Chapter 10, 1.10 Copayment Program Policy
9. Program Guide Overview-Mental Health Delivery System
10. PREA Intake Screening Form
11. Interviews: Medical and Mental Health Staff

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, §54040.10 (Medical Health Responsibilities) states, "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 SRE must be completed by a qualified and trained staff member. The SRE shall be conducted as soon as possible, but no more than four hours after the referral and shall include a face-to-face evaluation of the victim in a confidential setting."

CDCR DOM Chapter 5, Article 44, §54040.8.3 (Medical Services Responsibilities) states, " California Correctional Health Care Services (CCHCS) medical staff will provide indicated emergency response." In addition, "Licensed Health Care staff shall determine and identify any injuries sustained by the alleged victim and suspect, assess and identify if they are urgent/emergent, and provide immediate emergency medical care to the alleged victim and suspects."

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."

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."

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.

Medical and mental health staff confirmed that services are offered to all victims of sexual abuse at no charge. In addition, the staff reported that care that inmates receive inside the facility is often more timely and better than what is received 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.

Provision (g):

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 the CDCR Mental Health Referral Chrono 128 MH5. Section I. Identifying Information and Referral Timeline which allows the user to choose the referral timeline, has the following options:

- PREA Routine (within 14 calendar days)
- Initial Intake Screening
- New Allegations/Post 72 hours
- PREA Perpetrator Routine (within 60 calendar days: New Allegation)
- Investigation on-going
- Investigation completed
- PREA Emergency (within 4 hours of return from or refusal of a SART/SANE examination)

During interviews with mental health staff, it was confirmed that the facility attempts to conduct a mental health evaluation of all known inmate on inmate abusers within sixty (60) days of learning of such abuse history and will offer treatment.

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
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1230 300">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="242 329 1294 423" style="list-style-type: none"> 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 <p data-bbox="242 452 1485 546">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.</p> <p data-bbox="242 575 448 604"><u>Provision (a)(b)(c):</u></p> <p data-bbox="242 633 1465 761">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:</p> <ol data-bbox="277 813 927 1041" style="list-style-type: none"> 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 <p data-bbox="242 1070 1469 1232">The facility utilizes a form called Institutional PREA Review Committee (IPRC) to document the incident review. All investigative files reviewed that were closed, did contain the IPRC and they were completed within thirty (30) days of the conclusion of the investigation. Each staff member on the committee is required to sign the IPRC indicating their presence. The facility Warden indicated that she attends the IPRC committee as the chairperson. This was confirmed as all positions noted above were documented as present during the committee.</p> <p data-bbox="242 1261 392 1290"><u>Provision (d):</u></p> <p data-bbox="242 1319 1477 1447">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:</p> <ul data-bbox="284 1498 1477 1727" style="list-style-type: none"> • 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. <p data-bbox="242 1756 1485 1850">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.</p> <p data-bbox="242 1879 376 1908"><u>Conclusion:</u></p> <p data-bbox="242 1937 1477 2000">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.</p>

115.87	Data collection
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1230 300">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="277 349 1203 645" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR DOM Chapter 5, Article 44, §54040.20 Tracking-Data Collections and Monitoring 3. CDCR DOM Chapter 5, Article 44, §54040.3 Definitions 4. CDCR DOM Chapter 5, Article 44, §54040.21 PREA Data Storage and Destruction 5. CDCR PREA Incident Log Sample 6. SSV-IA Sample Form 7. CDCR 2019 Annual Report 8. CDCR 2020 Annual Report 9. Interviews: Director of Adult Prisons, PREA Coordinator, and PREA Compliance Manager <p data-bbox="242 674 1473 801">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.</p> <p data-bbox="242 831 504 860"><u>Provision (a)(b)(c)(d)(e):</u></p> <p data-bbox="242 889 1485 1120">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."</p> <p data-bbox="242 1149 1453 1310">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, from 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."</p> <p data-bbox="242 1339 1493 1433">The auditor reviewed CDCR's 2019 and 2020 Annual Reports. Both reports are posted on the agency website and can be accessed by the public. The data includes all data from all facilities, to include the data collected from the contracted facilities. The standardized instrument and definitions are consistent with the definitions required by the Survey of Sexual Victimization.</p> <p data-bbox="242 1462 1469 1624">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.</p> <p data-bbox="242 1653 1485 1747">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.</p> <p data-bbox="242 1776 376 1805"><u>Conclusion:</u></p> <p data-bbox="242 1834 1481 1897">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.</p>

115.88	Data review for corrective action
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1230 300">The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol data-bbox="279 349 1401 477" style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire CDCR DOM Chapter 5, Article 44, §54040.17 Departmental PREA Coordinator 2. CDCR DOM Chapter 5, Article 44, §54040.20 Tracking-Data Collections and Monitoring 3. Link to agency website-annual reports 4. Interviews: Director of Adult Prisons, PREA Coordinator, and PREA Compliance Manager <p data-bbox="242 506 1452 600">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 its efforts in prevention, detection and responses to sexual assault. In addition, the facility reported that it is readily available on the agency website.</p> <p data-bbox="242 629 1335 658">CDCR DOM Chapter 5, Article 44, §54040.17 (Departmental PREA Coordinator) states, "On an annual basis:</p> <ul data-bbox="284 710 1484 938" style="list-style-type: none"> • The Departmental PREA Coordinator will forward to each institution, a data collection tool 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. <p data-bbox="242 967 1476 1028">Once approved by the Secretary, the annual report will be forwarded to the Office of Public and Employee Communications for placement on the CDCR Website."</p> <p data-bbox="242 1057 1484 1285">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."</p> <p data-bbox="242 1314 1466 1442">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.</p> <p data-bbox="242 1471 1490 1668">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.</p> <p data-bbox="242 1697 1481 1792">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.</p> <p data-bbox="242 1821 376 1850">Conclusion:</p> <p data-bbox="242 1879 1481 1939">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.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol style="list-style-type: none"> 1. CCC 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 <p>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.</p> <p><u>Provision (a)(b)(c)(d):</u></p> <p>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.”</p> <p>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.”</p> <p>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.</p> <p><u>Conclusion:</u></p> <p>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.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 271 1233 297">The auditor reviewed, analyzed, and retained the following evidence related to this standard.</p> <ol data-bbox="277 349 555 412" style="list-style-type: none"> <li data-bbox="277 349 555 376">1. Agency Website Agency <li data-bbox="277 383 512 412">2. PREA Audit Reports <p data-bbox="244 441 1449 504">CDCR operates thirty-five (35) facilities within its department. As of August 2013, all facilities have had at least one (1) or more audits. All audit reports have been posted on the agency website.</p> <p data-bbox="244 533 1430 624">During this audit, the facility was cooperative with the auditor. The audit team was provided access to the facility and documentation requested. All interviews with staff and inmates were conducted in areas that provided confidentiality. In addition, inmates were permitted to confidentially correspond with the auditor.</p> <p data-bbox="244 654 376 680"><u>Conclusion:</u></p> <p data-bbox="244 710 1481 772">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.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, analyzed and retained the following evidence related to this standard:</p> <ol style="list-style-type: none"> 1. CCC Pre-Audit Questionnaire 2. CDCR Website 3. Previous Audit report for CCC 4. Other Audit Reports for CDCR 5. Facility Diagram 6. Tour and observation of all areas of the facility 7. 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 <p>CDCR operates thirty-five (35) facilities within its Department. As of August 2013, all facilities have had at least one (1) or more audits. All audit reports have been posted on the agency website.</p> <p><u>Conclusion:</u></p> <p>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.</p>

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

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into 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 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

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

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

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

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

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	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

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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	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 reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
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 serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

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

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
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.	no
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
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
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.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

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

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

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

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

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

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

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

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

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation 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
	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.)	no
	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.)	no
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes