

PREA Facility Audit Report: Final

Name of Facility: Folsom State Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: 08/01/2022

Date Final Report Submitted: 02/27/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input 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 type="checkbox"/>
Auditor Full Name as Signed: Nicole Fernandez	Date of Signature: 02/27/2023

AUDITOR INFORMATION	
Auditor name:	Fernandez, Nicole
Email:	nicole.c.fernandez@hawaii.gov
Start Date of On-Site Audit:	06/12/2022
End Date of On-Site Audit:	06/17/2022

FACILITY INFORMATION	
Facility name:	Folsom State Prison
Facility physical address:	300 Prison Road , Represa , California - 95671
Facility mailing address:	

Primary Contact	
Name:	Elton Soriano
Email Address:	elton.soriano@cdcr.ca.gov
Telephone Number:	9168170819

Warden/Jail Administrator/Sheriff/Director	
Name:	Rick M. Hill
Email Address:	rick.hill2@cdcr.ca.gov
Telephone Number:	9169852561 ext. 4321

Facility PREA Compliance Manager	
Name:	Elton Soriano
Email Address:	elton.soriano@cdcr.ca.gov
Telephone Number:	O: 916-985-2561 3053
Name:	Mariah Thompson
Email Address:	mariah.thompson@cdcr.ca.gov
Telephone Number:	O: 916-985-2561 4834
Name:	Jason Pagan
Email Address:	jason.pagan@cdcr.ca.gov
Telephone Number:	O: 916-985-2561 4242

Facility Health Service Administrator On-site	
Name:	Brittany Brizendine
Email Address:	Brittany.brizendine@cdcr.ca.gov
Telephone Number:	916-985-2561 3034

Facility Characteristics	
Designed facility capacity:	3604
Current population of facility:	2974
Average daily population for the past 12 months:	2652
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	18-84
Facility security levels/inmate custody levels:	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:	1184
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	30
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	133

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	
<p>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.</p> <p>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.</p>	
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:	2022-06-12
2. End date of the onsite portion of the audit:	2022-06-17

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 contacted Just Detention International (JDI) and the local rape crisis center, Women Escaping a Violent Environment, Inc. (WEAVE), as it related to PREA-related services at FSP. The auditor received email correspondence from JDI and conducted a telephone interview with the Chief Program Officer for WEAVE to discuss the current Memorandum of Understanding (MOU) with FSP and the PREA-related services that are being provided at FSP. WEAVE staff reported that as a result of the COVID-19 pandemic they have not been able to provide services in person at FSP, however, they are able to maintain written correspondence and receive phone calls from inmates at FSP needing their services.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	3604
15. Average daily population for the past 12 months:	2652

16. Number of inmate/resident/detainee housing units:	9
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:	3032
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:	48
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:	3

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:	25
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:	132
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:	0
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:	37
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:	14
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:	6
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

<p>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):</p>	<p>There were no identified youthful inmates or inmates who were in segregated housing for high risk of sexual victimization as FSP on the first day of the onsite phase of the audit. Additionally, CDCR/FSP does not track inmates who identify as lesbian, gay, or bisexual, outside of the PREA screening process. This was corroborated through the facility tour, interviews with the FSP PREA Compliance Manager, Intake Staff, and listing of inmates. The auditor utilized the FSP admission list in the 12 months preceding the audit to randomly select inmates that reported that they "identified as lesbian, gay, or bisexual" during their initial PREA intake screening.</p> <p>Inmates identified with physical, vision, and hearing impairments may overlap as many inmates have more than one disability and/or impairment. FSP provided the auditor with the inmate listing of inmates identified as having a disability (physical, vision, or hearing impairment) which consisted of a total of 76 inmates on the first day of the onsite phase of the audit.</p>
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Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

<p>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:</p>	<p>1093</p>
<p>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:</p>	<p>152</p>
<p>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:</p>	<p>16</p>

<p>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:</p>	<p>FSP has approximately 1,093 staff, 16 contractors and 152 volunteers assigned to the facility on the first day of the onsite phase of the audit. It should be noted that due to the COVID-19 pandemic, contractor and volunteer programs were limited during the 12 months preceding the audit and during the onsite phase of the audit.</p>
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INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>51</p>
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<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
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<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The auditor requested and received a current inmate listing broken down by housing unit on the first day of the audit. These listings contained detailed information about the inmates including age, ethnicity/race, custody levels, current program, and a photo.</p> <p>Inmates were randomly selected by the audit team based on a list provided by the facility and ensured a diversity of inmates based on gender, age, ethnicity, housing, and lengths of stay at the facility. FSP houses male and female offenders with female offenders housed in the Folsom Women's Facility (FWF) complex of the facility. However, it should be noted that effective January 10, 2023, the Folsom Women's Facility was deactivated by CDCR and there are no longer female inmates housed at FSP.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<p>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):</p>	<p>FSP consists of 3 main complexes: Facility A, which houses medium security general population Level II and Level III male inmates; Facility B, also known as the Folsom Women's Facility (FWF), which houses minimum and medium security female inmates; and the Minimum Support Facility which houses minimum security Level I male inmates. On the first day of the onsite phase of the audit, the total inmate population of each facility was as follows: Facility A - 2,596; Facility B (Folsom Women's Facility) - 266; and Minimum Support Facility - 170. It should be noted that effective January 10, 2023, the Folsom Women's Facility was deactivated by CDCR and there are no longer female inmates housed at FSP.</p> <p>Oversampling of random inmate interviews was done to ensure a sufficient and effective understanding of the procedures, process, and overall culture and environment of Folsom State Prison as it relates to PREA. The audit team did not experience any barriers to the interviewing process for random and specialized groups of inmates. The audit team was able to conduct one on one interviews with selected inmates in available rooms or office space within the housing units and throughout the facility to ensure privacy.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>36</p>

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".

<p>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:</p>	<p>4</p>
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<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>
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<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>
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<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>There were no identified inmates with cognitive or functional disabilities at FSP during the onsite phase. This was corroborated through the facility tour, interviews with FSP PREA Compliance Manager, and listing of inmates identified with disabilities.</p>
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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:	1
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:	1
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:	11
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:	2
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:	6
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:	8
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	3

<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>There were no identified inmates who were placed in segregated housing for risk of sexual victimization at FSP during the onsite phase. This was corroborated through the facility tour, interviews with the FSP PREA Compliance Manager, and a listing of inmates identified to be at risk for sexual victimization.</p>

70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):

FSP consists of 3 main complexes: Facility A, which houses medium security general population Level II and Level III male inmates; Facility B, also known as the Folsom Women's Facility (FWF), which houses minimum and medium security female inmates; and the Minimum Support Facility which houses minimum security Level I male inmates. On the first day of the onsite phase of the audit, the total inmate population of each facility was as follows: Facility A - 2,596; Facility B (Folsom Women's Facility) - 266; and Minimum Support Facility - 170. It should be noted that effective January 10, 2023, the Folsom Women's Facility was deactivated by CDCR and there are no longer female inmates housed at FSP.

Though the PREA audit team was unable to reach some minimum requirements for specialized inmate interviews, there were significantly enough interviews in other specialized categories and random interviews to compensate for the shortfall. There were no identified youthful inmates, inmates with a cognitive disability, or inmates who were in segregated housing for high risk of sexual victimization. This was corroborated through the facility tour, interview with the FSP PREA Compliance Manager, and review of the specialized listing of inmates. All other inmate interviews were randomly selected by the audit team based on inmate housing lists provided by the facility and ensured a diversity of inmates interviewed based on gender, age, race/ethnicity, and lengths of stay at the facility. Random and Specialized interviews were conducted on a one-on-one basis and in available rooms or office spaces within the housing units throughout the facility and ensured for privacy. The audit team did not encounter any barriers to completing inmate interviews during the onsite phase.

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:	20
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 checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
If "Other," describe:	The selection of random staff included the "other" category as it relates to gender. The characteristic of gender when interviewing random staff allowed for a diverse assessment of the implementation and maintenance of the PREA Standards.
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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):	The audit team randomly chose a diverse sample of staff by interviewing staff on three (8) hour-rotating shifts throughout the facility in the housing units and various other post locations throughout the facility. The sample also included a diversity of staff based on gender, length of time employed by FSP, and job titles. Throughout the on-site review, the audit team was able to also conduct informal interviews with staff. The audit team did not experience any barriers to the interviewing process for random staff and was able to conduct interviews in a private setting.

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):	47
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <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)

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

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

	<input checked="" type="checkbox"/> Intake staff <input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	<p>The selection of random staff included the "other" category as the auditor interviewed other key staff with impacts on the implementation and maintenance of the PREA Standards. The "other specialized staff" interviewed was the Grievance Officer and Mailroom staff. The Grievance Officer was able to verify how the grievance system works for the inmates, specifically how FSP processes PREA-related grievances.</p> <p>Additionally, the mailroom staff was able to demonstrate to the auditor the mail process of outgoing letters, which complied with the requirements of the PREA Standards.</p>
81. Did you interview VOLUNTEERS 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 VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input checked="" type="checkbox"/> Other
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:	3

b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)

Security/detention

Education/programming

Medical/dental

Food service

Maintenance/construction

Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.

The audit team conducted interviews with 50 staff members. It should be noted that every staff member and volunteer/contractor serves in more than one role. All employees are mandated reporters, and most are first responders. Specialized staff interviewed may serve in more than one role and were responsible for more than one of the Specialized staff duties and as a result, some interviews conducted with Specialized staff included multiple interview questionnaires. Due to the COVID-19 pandemic, the auditor conducted interviews via telephone prior to the onsite phase with identified supervisory, specialized staff, and administrative staff, because of their positions of authority and access to private locations such as secure offices. These steps were taken to keep the PREA Audit team, FSP inmates, and staff safe by limiting the person to person contact while onsite to assist in controlling and minimizing the spread of the COVID-19 virus.

These telephone interviews were scheduled from June 6, 2022, through June 9, 2022. These telephone interviews included the following:

- CDCR Agency Head or Designee
- CDCR Agency Contract Administrator
- FSP Administrative Staff
- FSP Grievance Staff
- FSP Staff who are involved in screening for risk of victimization and abusiveness
- FSP Investigative Staff
- FSP Designated Staff charged with Monitoring Retaliation
- Sexual Assault Forensic Examiner (SAFE) and Sexual Assault Nurse Examiner (SANE) Staff

The interim CDCR PREA Coordinator was unavailable for a telephone interview prior to the onsite phase, however, a telephone interview was conducted with the newly appointed CDCR PREA Coordinator on June 29, 2022, as he officially began his position on June 20, 2022. Further, telephone interviews

with volunteers and contractors were completed post-onsite as COVID-19 response protocols were in place during the onsite phase and did not allow for volunteers and contractors to be in 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?

Yes

No

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)?

Yes

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)?

Yes

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).

Folsom State Prison (FSP) is California's second oldest prison, located in Represa, California. FSP was opened on July 26, 1880, as one of the nation's first maximum-security prisons and is surrounded by a solid granite wall that serves as the facility's perimeter with multiple gun towers along the wall.

Today, FSP houses medium-custody male inmates as well as minimum-custody male inmates in the Minimum Support Facility (MSF) and Firehouse located outside the secured perimeter. Additionally, under the administration of FSP, Folsom Women's Facility (FWF) opened in January 2013 as a 523-bed stand-alone facility that provides housing, rehabilitative and reentry programming, substance abuse treatment, and job training to medium and minimum-security female inmates. FWF was the northernmost female facility in the State. However, it should be noted that as of January 10, 2023, CDCR has deactivated FWF, and female offenders are no longer housed at FSP. FSP's main facility, also known as Facility A, consists of five (5) housing units, a library, an education building and annex, academic areas, two dining halls, a chapel, a gym, a central recreation yard, vocational areas, plant operations and maintenance, facility, and CALPIA warehouses, visiting room for contact non-contact visits, medical building, treatment and triage (TTA) clinics, intake (R&R) and the main administration building for FSP.

Unit 1 can house 1,244 inmates and is considered the largest cell block in the United States. There are five (4), double-sided tiers, containing a total of 632 cells. There are double and single cells throughout the unit and each cell has a toilet for inmates to use. The inmate showers are located on the ground floor and are open showers (gym type). Inmate phones are located on each tier within the unit.

Unit 2 can house up to 618 inmates. Unit 2 consists of two (2) blocks with five (5) tiers

each, containing a total of 399 cells. Each cell can house two (2) inmates and has a toilet for inmates to use. The inmate showers are located on the ground floor and are open showers (gym type). The Unit 2 Mini Yard is located outside of Unit 2 in a secured perimeter. There are two shower areas in the yard that have a pony wall to ensure privacy and inmates are now required to shower with their shorts on to further ensure privacy. There are also inmate phones and a dining area located in Unit 2.

Unit 3 can house up to 798 inmates. Unit 3 consists of two (2) blocks with five (5) tiers each, containing a total of 309 cells. Each cell can house two (2) inmates and has a toilet for inmates to use. The inmate showers are located on the ground floor. There are inmate phones, custody staff and counselor offices located in the unit.

Unit 4 is the Administrative Segregation unit that functions as administrative segregation as well as a quarantine for initial intake and transfers, COVID-19 positive inmates, and overflow inmates from California State Prison, Sacramento (SAC) which is located across the street from FSP. Unit 4 can house up to 186 inmates. Unit 4 consists of two (2) blocks with three (3) tiers. Each tier has 15 single cells and 8 double cells. Currently, Unit 4 houses only one (1) inmate per cell. Each cell has a toilet for inmates to use and single showers are located at the beginning of each tier. There are custody staff and counselor offices and a property room also in the unit. Outside of Unit 4 is the recreation area with 28 recreation cells that are used to provide recreation time to those housed in Unit 4.

Unit 5 is the oldest unit in the prison and was built in 1878. Unit 5 can house up to 642 inmates. Unit 5 consists of two (2) blocks with two (2) tiers with four (4) sides each, containing a total of 321 cells. Each cell can house 2 inmates and has a toilet for inmates

to use. The inmate showers are located on the ground floor and are open showers (gym type) with a pony wall to ensure privacy. There are inmate phones, an inmate barber shop, custody staff and counselor offices also in the unit. Unit 5 also serves as the “pass-through” for staff and inmates to enter into Units 2 and 3, Unit 5 dining, TTA (treatment and triage), visit room, and the Inmate Advisory Council (IAC) office.

The Minimum Support Facility (MSF) is comprised of 11 housing units and utilizes an open dorm setting. Each dorm has a restroom with multiple toilets and single shower stalls that provide enough privacy to prevent opposite-gender viewing. There is open movement throughout the facility and recreation area. The MSF also has an administrative office for security staff and counselor’s offices, a main dining hall, a bike shop, a library, a programming area, and a health care unit. The MSF can house up to 410 inmates.

The FSP Firehouse is located adjacent to the MSF, outside the secured perimeter of the FSP main facility. The Firehouse is operated in conjunction with CAL Fire and is staffed by a Fire Chief and 5 Fire Captains, who alternate in 48-96 hour shifts. The main building of the firehouse houses the inmates and staff. The inmates sleep in a dorm setting with bunkbeds and have their own restroom and shower area. The staff has living quarters that are separate from the inmates and that the inmates do not have access to. The Firehouse can house up to 15 inmates.

Folsom Women’s Facility (FWF), also known as Facility B, is also located outside the secured perimeter of the FSP main facility. FWF consists of 2 dorm-like setting housing units, Building A and Building B. Building A is separated into 4 two-tiered pods and Building B is separated into 3 two-tiered pods. Each tier of the pods has its own individual showers

and restrooms located in the middle of each tier. Each pod also contains its own dayroom, inmate phone area, and washer and dryer. Building A and Building B each have their own outdoor recreation yard area in front of the building's entrance. The facility's administrative and programming building separates the two living units. This building includes two dining rooms, a serving kitchen, a visitation area, staff offices, receiving and release (R&R), property storage, treatment and triage (TTA), pharmacy, and education and program classrooms. The canteen for FWF is located in the yard of Building B and the medical and mental health clinic is located on the outskirts of Building B. The substance abuse programming classrooms, computer lab, and the library is located on the outskirts of Building A. The FWF can house up to 530 inmates.

While on-site at FSP, the audit team was provided with access to, and the ability to observe, all areas of the facility. The audit team was able to have formal and informal interviews with inmates and staff during the on-site phase of the audit. The audit team tested the inmate phone system in several areas to connect to the local rape crisis center (WEAVE), and the Office of the Inspector General. Throughout the on-site review, PREA audit notices and posters were posted throughout the facility in English and Spanish.

The audit team also observed posters with information for interpreter services, victim advocate information, and phone numbers and addresses for reporting sexual abuse and sexual harassment. The audit team observed opposite-gender announcements when entering housing or living units. The unannounced rounds by intermediate and higher-level supervisors were also verified by reviewing logbooks and interviews with staff. Additionally, the auditor was able to observe the intake process which included providing new admissions with a PREA screening and PREA education.

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?

Yes

No

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

A pre-audit correspondence was facilitated on April 8, 2022, and May 23, 2022, between the auditor, FSP PREA Compliance Manager, and CDCR PREA Audit Team to discuss the review of the PAQ, documents, and files/records for review while on site and the schedule for the on-site phase. The auditor requested the following from FSP's PREA Compliance Manager and CDCR PREA Audit Team: a list of All FSP Staff; a list of all Custody and Non-Custody with Job/Position Title; a list of all staff (custody and non-custody) hired, promoted and transferred to FSP in the last 12 months; a list of All FSP Contractors and Volunteers; a list of all contractors and volunteers granted admission to FSP in the last 12 months; updated PREA at Risk Screening inmate list; list of all PREA investigations at FSP in the last 12 months; and Facility Map/Schematics. Additionally, a request for the following lists was requested to be provided on the first day of the audit, if not sooner: a complete list of inmates, inmates with disabilities, inmates who are limited English proficient, inmates who identify as LGBTI, inmates in segregated housing, inmates reported sexual abuse and inmates who reported sexual victimization during risk screening.

During the audit process, the auditor selected and reviewed FSP human resource (employee and volunteer/contractors) files, inmate records, medical/mental health referral records, and PREA investigation files. The investigation files contained reports of the allegation, investigation, monitoring, and referrals for medical and mental health follow-up, applicable sexual assault incident review, and notification to the inmates. FSP ISU PREA investigative files were thorough, well-documented, and organized. Additionally, inmate PREA-related grievances were reviewed and found to be complete and answered in a timely manner.

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	3	0	3	0
Staff-on-inmate sexual abuse	19	0	19	0
Total	22	0	22	0

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	0	0	0	0
Staff-on-inmate sexual harassment	10	0	10	0
Total	10	0	10	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	0	0	0	0
Total	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	3	0	0
Staff-on-inmate sexual abuse	8	4	7	0
Total	8	7	7	0

Sexual Harassment Investigation Outcomes

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

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	0	0	0	0
Staff-on-inmate sexual harassment	5	1	4	0
Total	5	1	4	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:

19

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</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 sexual abuse investigation files)</p>
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Inmate-on-inmate sexual abuse investigation files

<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
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<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal 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 inmate-on-inmate sexual abuse investigation files)</p>
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<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE 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 inmate-on-inmate sexual abuse investigation files)</p>
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Staff-on-inmate sexual abuse investigation files

<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>9</p>
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<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal 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 abuse investigation files)</p>
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<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE 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 abuse investigation files)</p>
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Sexual Harassment Investigation Files Selected for Review

<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>7</p>
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<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</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 sexual harassment investigation files)</p>
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Inmate-on-inmate sexual harassment investigation files

<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
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<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal 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 inmate-on-inmate sexual harassment investigation files)</p>
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<p>110. Did your sample of INMATE-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 inmate-on-inmate sexual harassment investigation files)</p>
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Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	11
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)
113. Did your sample of STAFF-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 staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The FSP PREA investigation files are maintained by the Investigation Services Unit (ISU). The PREA investigations files were well organized and includes the initial reports, the chain of command notifications, the use of contracted services (if applicable), medical and mental health referrals, retaliation monitoring reports, the final investigation, notification referrals for criminal action or other facilities and the Institutional PREA Review Committee (IPRC) report. The auditor randomly selected investigation files to review and FSP provided those selected files to review pre-onsite and onsite. The auditor did not experience any barriers to obtaining and reviewing the PREA investigation files or with any follow-up needed.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

Yes

No

a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:

1

Non-certified Support Staff

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

Yes

No

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

2

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input checked="" 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>
Identify your state/territory or county government employer by name:	State of Hawaii
Was this audit conducted as part of a consortium or circular auditing arrangement?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	<p>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Article 44, Section 54040 - Prison Rape Elimination Act 3. CDCR Agency Organizational Chart 4. CDCR PREA Coordinator Duty Statement 5. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR PREA Coordinator 2. FSP PREA Compliance Manager <p>115.11(a) - CDCR's Department of Operations Manual (DOM), Section 54040.1, Policy (Pg. 469) states that 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. All sexual violence, staff sexual misconduct, and sexual harassment is strictly prohibited. This policy applies to all offenders and persons employed by the CDCR, including volunteers and independent contractors assigned to an institution, community correctional facility, conservation camp, or parole. CDCR DOM Section 54040.2, Purpose (Pg.469) identifies the purpose of the policy and provides guidelines for prevention, detection, responses, investigation, and tracking of sexual violence, staff sexual misconduct and sexual harassment against CDCR offenders. The policy also informs staff of their responsibility and liability as specified in the law. CDCR DOM Section 54040.3 includes general PREA-related definitions as well as definitions specific to prohibited behaviors regarding sexual abuse and sexual harassment. CDCR DOM Section 54040.15 identifies the disciplinary process (sanctions) for those found to have participated in prohibited behaviors related to sexual abuse and sexual harassment.</p> <p>115.11(b) - Review of CDCR's Agency Organizational Chart and CDCR PREA Coordinator Duty Statement confirm that CDCR employs an upper-level, agency-wide PREA Coordinator, whose position functions as a Captain under the direct supervision of the Mission Correctional Administrator. The CDCR PREA Coordinator acts as the lead within the Female Offender Programs and Services/Special Housing Mission in ensuring compliance with the federal PREA standards and the Departmental policies and procedures. The CDCR PREA Coordinator reports that she has sufficient time and authority to develop, implement, and oversee the agency's efforts to comply with PREA in all of its facilities. As the CDCR PREA Coordinator, he directly oversees 35 facility PREA Compliance Managers.</p> <p>115.11(c) -Interview with the FSP PREA Compliance Manager confirmed that FSP has</p>
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designated an Associate Warden as the facility PREA Compliance Manager (PCM) who is under the direct supervision of the FSP Chief Deputy Warden. The FSP PREA Compliance Manager reports that he has sufficient time and authority to coordinate the facility's efforts to comply with the PREA.

CDCR and FSP have shown that there is a zero-tolerance policy for sexual abuse and sexual harassment, and has a designated PREA Coordinator and PREA Compliance Manager with sufficient time and authority to coordinate the facility's efforts to comply with PREA standards. Interviews with staff and inmates while on-site confirmed their knowledge and practice of CDCR's zero-tolerance policy therefore the agency and facility has complied with all sections of this standard.

115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <hr/> <p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department of Operations Manual <ol style="list-style-type: none"> 1. Article 13 - Contracts, Section 22040.1-22040.4 3. CDCR Current Contracts for Confinement of Inmates 4. CDCR Contract Agreement - Special Terms and Conditions (Exhibit D) 5. CDCR 2301 -PREA Policy Information for Volunteers and Contractors 6. CDCR Contract Agreement - PREA Policy - Volunteer/Contract Information Sheet (Exhibit M) 7. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Agency Contract Administrator <p>The Contract Beds Unit (CBU) of CDCR oversees all contracts for California Inmates that are placed in contracted beds. CBU maintains, provides oversight, and monitors all contract beds. CDCR currently contracts with twelve (12) community confinement facilities for the placement of CDCR inmates. There are six (6) Male Community Reentry Programs (MCRP) and six (6) Female Community Transitional Reentry Programs. The contracted community confinement facilities are located throughout California and are operated by Butte County Probation Department, Turning Point of Central California, Inc., GEO Reentry, Inc. HealthRIGHT 360, Amity Foundation, CoreCivic, Inc., West Care California Inc., Saint John's Program for Real Change, Los Angeles Centers for Alcohol and Drug Abuse, and Mental Health Systems Inc.</p> <p>115.12(a) - CDCR, DOM Article 13- Section 22040.1-22040.4, Contracts (Pg. 105-106), requires that the Contracts Management Branch (CMB) shall administer all contracts through execution by the Department in a manner that ensures compliance with all applicable laws, rules, and regulations of the department. All contracts for the confinement of inmates entered into (or renewed) after August 20, 2012, contains language in CDCR Contract Agreement Exhibit D that requires that all Contractors and their employees are expected to ensure compliance with CDCR's zero-tolerance policy for sexual abuse and sexual harassment as described in the CDCR DOM, Chapter 5, Article 44. Further, it requires that the Contractor and their staff adopt and comply with the PREA standards, 28 Code of Federal Regulations (CFR) Part 115, and with CDCR's DOM, Chapter 5, Article 44, including any updates to this policy.</p> <p>Contract agreements for the contracted facilities were reviewed by the auditor and confirmed that contractors are required to adopt and comply with PREA standards.</p> <p>115.12(b) - The CDCR Agency Contract Monitor confirmed during the interview that contracted facilities will be completing a PREA audit in the first year of the next cycle. The contract language also contains provisions for contract monitoring to</p>

monitor the Contractor's performance under each agreement or contract. CDCR's Agency Contract Monitor further reported that each contracted agency has an identified PREA Compliance Manager at each facility to assist in ensuring each contracted facility is complying with PREA standards.

Based on contract documentation submitted for review and interview with the CDCR Agency Contract Monitor, CDCR has demonstrated compliance with all sections of this standard.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion**Policy, Materials, Interviews, and Other Evidence Reviewed:**

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations Manual (DOM)
 1. Article 26, American Correctional Association Standards
 2. Chapter 5, Article 44, Section 54040 - Prison Rape Elimination Policy
3. FSP Staffing Plan Analysis
4. FSP Standardized Staffing Plan Fiscal Years 2021-2022 and 2022-2023
5. FSP Inmate Population Reports
6. CDCR PREA Annual Data Collection Tool and Staffing Plan Review for FSP 2021
7. Interview with the following:
 1. CDCR PREA Coordinator
 2. FSP Warden
 3. FSP PREA Compliance Manager
 4. FSP Random Intermediation or Higher-Level Facility Staff
8. On-Site review of housing areas and programs areas
9. On-Site review of security log books

115.13(a) - CDCR has developed, documented, and made its best efforts to comply regularly with a staffing plan that provides for adequate staffing levels, and video monitoring, and considers factors identified in Section a. 1-11. The average daily population for FSP since the last PREA audit has been 2,683 and the average daily population on which the staffing plan was predicated for is 2,683. The facility provided the auditor with the most recent staffing plan analysis. Interviews with the CDCR PREA Coordinator and the FSP Warden confirmed that FSP regularly develops a staffing plan and adequate staffing levels to protect inmates against sexual abuse are considered in the development of the plan.

115.13(b) - FSP had no deviations from the staffing plan in the last twelve (12) months prior to the audit. During the interview with the FSP Warden, he reported that FSP is able to ensure adequate staffing for all watches and provide overtime to staff if needed to do so. Additionally, programs may be closed for the shift/day if there is not adequate staffing to provide coverage. Further, FSP Warden indicated that if the staffing plan is deviated from it is noted on the daily activity report and reported to CDCR Headquarters.

115.13(c) - CDCR DOM, Section 54040.17.1, Annual Review of Staffing Plan (pg. 447) states that, whenever necessary, but no less 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. Review of the FSP annual data collection and staffing plan along with interviews with the CDCR PREA Coordinator, FSP Warden and FSP PREA Compliance Manager demonstrate and confirm that FSP assess the staffing plan, at least once a year, facilities use of monitoring technologies and resources to ensure adherence to the staffing plan.

115.13(d) - CDCR DOM, Section 54040.4 requires that a custody supervisor shall conduct weekly unscheduled security checks to identify and deter sexual violence, staff sexual misconduct and sexual harassment of any kind. During the site review of FSP, supervisors (intermediate and higher-level staff) were consistent with their unannounced rounds as indicated by interviews with staff and reviews of unit log books that provided documentation of unannounced rounds being conducted. Intermediate-or high-level facility staff reported that they prevent staff from alerting other staff member of their unannounced rounds by making their rounds throughout the shift to different buildings and at different times and never in a pattern. This was confirmed through the auditor's review of unit logs books.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	FSP is an adult prison that does not house youthful inmates or inmates under the age of 18 years. This standard does not apply to FSP.

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 5, Section 52050.16.4- Clothed Body Searches of Female Inmates
 2. Chapter 5, Section 52050.16.5 - Unclothed Body Search of Inmates
 3. Chapter 5, Section 52050.16.7 - Unclothed and Clothed Body Searches of Transgender Inmates
 4. Chapter 5, Section 54040.5 - Searches
 5. Chapter 5, Section 54040.4 - Education and Prevention
3. CDCR Memorandum Re: Changes in the Use of the ADANI COMPASS Low-Dose Scanner
4. CDCR Office of Training and Development - Searches and Inmate Property Curriculum
5. CDCR Office of Training and Development - Transgender Inmates Curriculum
6. CDCR Office of Training and Development - Overview of Senate Bill 132 (11/2020)
7. CDCR Memorandum Re: Overview of Senate Bill 132 - Training (11/06/2020)
8. FSP Memorandum Re: DOM Supplement Addendum - DOM #54040 - PREA (09/27/2022)
9. Interviews with the following:
 1. FSP Intake staff
 2. FSP Random staff
 3. FSP Random inmates

115.15(a) - CDCR DOM, Chapter 5, Section 52050.16.5, Unclothed Body Search of Inmates (pg.388) states that, Correctional personnel, other than qualified medical staff, shall not conduct unclothed body inspections or searches of an inmate of the opposite sex, except in an emergency. Additionally, per the CDCR Memorandum Re: Changes to the Use of the ADANI COMPASS scanner, operators viewing the image from the scanner system shall be the same gender as the inmates being scanned. If the scanner is used by cross-gender staff during exigent circumstances, the search must be documented in a Notice of Unusual Occurrence (NOU). There were no cross-gender strip searches or cross-gender visual body cavity searches at FSP in the past 12 months as reported in the PAQ. Staff that were interviewed were aware of the policy and inmates had no reports of cross-gender strip searches occurring. A review of training curriculum, written policy, and interviews with random staff and inmates confirm that FSP does not conduct cross-gender strip or cross-gender visual body cavity searches of inmates. Additionally, FSP had no incidents of cross-gender strip searches or visual body cavity searches during the audit period.

115.15(b) -CDCR DOM, Chapter 5, Section 52050.16.4, Clothed Body Search of Female Inmates (pg. 386), states that clothed body searches of female inmates shall be conducted by female corrections staff only, except in emergency situations and under no circumstances shall male correctional staff perform non-emergency clothed body searches of female inmates. In the twelve months prior to the audit, FSP reported no instances of cross-gender pat down searches of female inmates. Interviews with random inmates confirmed that clothed body searches (pat down searches) are conducted only by female correctional staff at FSP.

115.15(c) - CDCR DOM, Chapter 5, Section 54040.5, Searches (pg.471) requires that institutions shall document all cross-gender strip searches and cross-gender visual body cavity searches in accordance with DOM Section 52050.16.5. If the search is incidental to an emergency situation or crime that constitutes a CDECR Form 837 (Crime Incident Report), the search shall also be documented within the incident report. FSP did not have any incidents of cross-gender strip searches or visual body cavity searches within the last 12 months. This was corroborated through interviews with inmates who confirmed that strip searches are performed by female staff.

115.15(d) - CDCR DOM, Chapter 5, Section 54040.4, Education and Prevention (pg.471) requires that institutions enable offenders to shower, perform bodily functions, and change clothing without non-medical staff of the opposite biological sex viewing their breast, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Further, to minimize cross-gender exposure, staff of the opposite biological sex shall announce their presence when entering the housing unit. This announcement is required at the beginning of each shift and/or when the status quo within the housing unit changes.

This substandard required corrective action as during the on-site phase the auditor observed inconsistent announcements of the opposite gender notification when entering housing or living units. Interviews with random inmates confirmed that opposite-gender announcements are inconsistently occurring at FSP. It was observed on-site that FSP staff conduct "PREA Announcements" at the beginning of each shift indicating to the inmates that they may be subject to cross-gender supervision during that shift. The PREA Resource Center FAQ guidance on this standard notes that making a single announcement at the beginning of each shift indicating that inmates may be subject to cross-gender supervision at any time or that an opposite-gender staff is assigned to the unit for that particular shift is not sufficient to comply with the standard. This standard requires that when the status quo of the gender supervision on a housing unit changes from exclusively same-gender, to mixed-or cross-gender supervision, the opposite-gender staff is required to verbally announce their arrival on the unit. The announcement is required for both custody and non-custody staff and may include, for example, a clinician or case worker who spends time on the unit, or senior staff making supervisory rounds.

FSP updated their Department Operations Manual (DOM) Supplemental Addendum - DOM #54040 - Prison Rape Elimination Act (PREA) effective September 27, 2022, to ensure that when the status quo of the gender supervision on a housing unit changes from being exclusively same-gender, to mixed-or cross-gender supervision, the

opposite gender staff is required to verbally announce their arrival on the unit. The announcement is required for both custody and non-custody staff. Additionally, FSP provided refresher training to housing unit staff on the update regarding opposite-gender announcements and provided verification to the auditor.

Additionally, the following areas were identified during the on-site phase for corrective action due to opposite-gender viewing concerns:

- Housing Unit #1 ground-level showers were visible from upper-level ties and required further mitigation;
- Housing Unit #2 ground-level showers were visible from upper-level ties and required further mitigation;
- Housing Unit #2 had an open urinal at the beginning of tier 3 (B side) with no modesty screens/wall and required further mitigation;
- Housing Unit #2 had a holder area where new admissions wait to be housed and contains a toilet in the center that is covered on all sides but not on the top making it viewable for opposite-gender staff walking up the stairs to the upper tiers able to view anyone using the toilet;
- Housing Unit #2 Mini Yard had showers that staff assigned to Tower #22 maybe be able to observe inmates showering fully naked. Although it was reported that it is a normal practice for an inmate to shower with boxers in the yard, further mitigation was required;
- Housing Unit #3 had a toilet in the middle of the 1st tier (A side) that is used by the inmate ADA worker that is viewable from above to opposite gender staff when they are walking on the upper tiers and required further mitigation;
- Housing Unit #4 had twenty-eight (28) single-person recreation units that each contain a toilet and had metal across the front to prevent opposite-gender view. However, the toilets were still very viewable from the side and required further mitigation;
- Minimum Support Facility (MSF) Dorms 0900, 1000, and 1100 have a urinal in the bathroom that did not have a modesty screen/wall and required further mitigation.

FSP was able to address and mitigate all areas identified as having opposite-gender viewing concerns and submitted verification through photo verification. FSP has demonstrated compliance with this substandard.

115.15(e) - CDCR DOM, Chapter 5, Section 52050.16.7, states if an individual is going through Receiving and Release (Intake), who self-identifies as transgender or with a gender that seems not to match their biological sex, the search will be conducted by staff of the same biological sex as the inmate to be searched. If an individual's genital status is ambiguous, the search shall be conducted by a staff member that is the same biological sex as indicated in the inmate's records. If staff are unable to determine the genital status through medical records or an interview with the inmate, it will be determined during the standard intake medical evaluation that all inmates received upon admission to the facility. Interviews with inmates and staff confirmed

that staff is knowledgeable on the policy and process of cross-gender searches. Additionally, the auditor confirmed this process during the observation of the inmate process through intake.

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

Additionally, the CDCR Office of Training and Professional Development has step-by-step training on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, Training and Professional Development, Searches of Inmates and Property, Instructors Guide 6/2018. DOM section 54040.4 states, Employees shall also be trained in how to conduct cross-gender pat-down searches, transgender pat-down searches, and unclothed body cavity searches. When conducting these types of searches, employees shall ensure that these searches are conducted in a professional, respectful manner, and in the least intrusive manner possible consistent with security needs. Searches shall be conducted in accordance with policy, procedure, and training as per CCR, Title 15, and Section 3287(b). Interviews with staff and a review of training logs and lesson plans confirm that staff have been trained to ensure pat-down searches are conducted professionally and respectfully.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Pre-Audit Questionnaire (PAQ) 2. California Code of Regulations - Title 15 3. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Section 5, 54040.4 - Education and Prevention 2. Section 5, 54040.12 - Investigations 4. CDCR Memorandum Re: Standard 115.16(a) 1 - Dated October 6, 2017 5. CDCR "I Speak" Language Identification Guide Poster 6. CDCR Executed Contract with Voiance Language Services (07/01/21 - 06/30/24) 7. CDCR Executed Contract with Interpreters Unlimited, Inc. (10/01/19 - 06/30/22) 8. CDCR Executed Contract with Sign Language Interpreting Services, Inc. (10/01/19 - 06/30/22) 9. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Director of Adult Institution 2. FSP Random Staff 3. FSP Random Inmates with Disabilities/Limited English Proficient <p>115.16(a) - (b) - California Code of Regulations Title 15 defines effective communication as; providing the inmate, to the extent possible, the means to understand and participate in disciplinary process to the best of their ability. This may be accomplished through reasonable accommodation or the assignment of a staff assistant. If the inmate's Test of Adult Basic Education (TABE) score is 4.0 or lower, employees are required to query the inmate to determine whether or not assistance is needed to achieve effective communication. The employee is required to document on appropriate CDCR forms his/her determination of whether the inmate appeared to understand, the basis for that determination, and how it was made. For contacts involving due process, employees shall give priority to the inmate's primary means of communication, which may include but is not limited to; auxiliary communication aids, sign language interpreters, and bilingual interpreters. CDCR Memorandum dated October 6, 2017, states that CDCR provides reasonable modification or accommodation to inmates with physical or communicational disabilities pursuant to the Americans with Disabilities Act.</p> <p>Appropriate provisions are made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and persons with disabilities. Institutions may consider the use of offender peer educators to enhance the offender population's knowledge and understanding of PREA and sexually transmitted</p>

diseases. CDCR has current contracts in place for communication assistance: Sign Language Interpreting Services, Inc. (contract period from October 1, 2019, to June 30, 2022) and Interpreters Unlimited (contract period from October 1, 2019, to June 30, 2022), to provide American Sign Language Interpreter Services at state prisons and Voiance Language Services (contract period from July 1, 2021, to June 30, 2024) to provide interpreter services over the telephone, facsimile or internet, for 140 languages to assist CDCR with inmates that are limited English proficient. Interpreter services are available twenty-four (24) hours a day, seven (7) days a week. Additionally, the facility has designated staff who are bilingual certified to provide translation services. During the on-site review, several interviews with inmates who identified as limited English proficient were conducted with the use of certified bilingual staff that confirmed that FSP has a process in place to accommodate inmates.

During the onsite audit, random inmates that identified with physical disabilities as being partially blind or deaf and limited English proficiency were interviewed and confirmed that tools and aids are present at FSP to assist them with PREA information, education, and any investigation process. Inmates were aware of PREA standards, what their rights were, and what to do in the event of a PREA incident. PREA posters and information were observed throughout the facility in English and Spanish. An interview with the CDCR Director of Adult Institutions confirmed that PREA educational materials are available, written and verbally as well as in English and Spanish. Further CDCR Director of Adult Institutions stated that all CDCR staff are trained in providing effective communication to inmates.

115.16(c) - CDCR DOM, Section 54040.12, Investigations (pg.475) states that except in limited circumstances or exigent circumstances, investigators shall not rely solely on inmate interpreters, readers, or other types of inmate assistance during a sexual violence, staff sexual misconduct, or sexual harassment investigations. FSP has designated staff that are tested and proficient in other languages to assist with interviewing inmates who may be limited or have disabilities. The PAQ indicated that FSP did not utilize inmate interpreters during the twelve months prior to the audit. Interviews with random staff indicated that staff is aware of the policy and does not rely solely on inmate interpreters, readers, or other types of inmate assistance during sexual violence, staff sexual misconduct, or sexual harassment investigations.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion**Policy, Materials, Interviews, and Other Evidence Reviewed:**

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. California Code of Regulations, Title 15, Section 3401.5 - Staff Sexual Misconduct
3. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 3, Section 31060 - Appointments
 2. Chapter 3, Section 31060.16 - Criminal Records Checks
 3. Chapter 3, Section 3106.17 - Pre-Employment Documentation
 4. Chapter 3, Section 31070.1 - Personnel Identification Cards
 5. Chapter 3, Section 33030.16 - Employee Disciplinary Matrix Penalty Levels
4. CDCR Personal Information Bulletin #2016-005
5. CDCR Supplemental Application - CDCR 1951
6. CDCR Employment Reference Questionnaire - CDCR Form 2025
7. CDCR Contract Agreement (Exhibit D)
8. CDCR Memorandum: Completion of Background Checks Under PREA - (07/14/2017)
9. CDCR Memorandum Re: Standard 115.17(e)1 - (10/06/2017)
10. CDCR Memorandum Re: Personal Identification Card - (02/26/2016)
11. CDCR 2164 Form - Live Scan Response Form
12. FSP Human Resource files
13. Interviews with the following:
 1. FSP Institutional Personnel Officer (Human Resources)
 2. FSP Community Resources Manager (Human Resources)

115.17(a)- (b) - CDCR DOM, Section 31060.3, Power of Appointment (pg.159) addresses this standard by prohibiting the hiring and promoting of anyone or utilizing the services of any contractor or volunteer, who: 1) has engaged in sexual violence, or staff sexual misconduct of an inmate in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 2) has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or 3) has been civilly or administratively adjudicated to have engaged in the activity described above. Further, hiring authorities shall: 1) implement and enforce departmental EEO policy and 2) maintain the highest standards of personnel selection. CDCR Supplemental Application for all CDCR Employees (Form 1951) must be completed for any applicant, transfers, and promotional opportunities. Section D for Form 1951 includes questions that are specific to PREA and this substandard. In the past twelve (12) months, 129 people were hired at FSP who may have contact with inmates. An interview with the FSP

Institutional Personnel Officer and a review of human resource files confirmed that this policy and practice are in place.

115.17(c) - CDCR DOM, Section 31060.16, Criminal Records Check (pg.170-171) states that a criminal records check is a requirement for employment with the Department. The process for checks involved using CI&I SSCH, Live Scan fingerprinting alert system, USINS Form I-9, Physical examination report and CDCR Form 1951, Supplemental Application for all CDCR employees. This process is used for internal and external applicants. The Live Scan system allows CDCR human resource staff to be alerted 24/7 on relevant background information for staff, contractors, and volunteers. The CDCR 2164 Form - Live Scan Response Form is used to verify that a request and response for a background check was completed, the date it was completed, and the staff that received it. In the past twelve (12) months, FSP hired 129 people who may have contact with inmates. An interview with FSP Institutional Personnel Officer confirmed this process and the completion of the background check process completed utilizing the CDCR 2164 Form - Live Scan Response Form was confirmed through file reviews.

115.17(d) -CDCR Contract Agreement (Exhibit D) states "Security Clearance/ Fingerprinting" as one of the special terms and conditions. The State reserves the right to conduct fingerprinting and/or security clearance through the Department of Justice, Bureau of Criminal Identification and Information (BCII), prior to award and at any time during the term of the Agreement, in order to permit Contractor and/or Contractor's employee access to State premises. The State further reserves the right to terminate the Agreement should a threat to security be determined. It stipulates that the contractor shall conduct a criminal background records check for each contract employee, who will have contact with CDCR inmates, and provide a written certification that it was done. Contract employees, who have contact with inmates, shall be provided training to learn their responsibilities under the agency's sexual abuse and harassment prevention, detection, and response policies and procedures. An interview with the FSP Personnel Information Officer and a review of human resource files confirmed this process.

115.17(e) - California Code of Regulations, Title 15, Section 3411 (pg.257) states that if an employee is arrested or convicted of any violations of law; the employee must promptly notify the institution head or appropriate Director/Assistant Secretary of that fact. CDCR memorandum Re: Standard 115.17(e) dated October 6, 2017, requires that all employees who may have contact with inmates be Live Scanned (fingerprinted) at the time of hire. The Live Scan system notifies CDCR of any subsequent arrest an employee or contact has on an ongoing basis. CDCR memorandum dated February 26, 2016, Personnel Identification Card Issuance states the procedure for issuance of identification cards. The pre-employment procedures found in CDCR DOM 31060.16 apply to all employees, contractors, or volunteers. Interviews with FSP Personnel Information Officer and Community Resources Manager confirmed that all employees, contractors, and volunteers are required to participate in the Live Scan system.

115.17(f) - (h)-CDRC Form 1951- Supplemental Application, includes background and PREA misconduct questions for all CDCR employees. Before signature

<p>acknowledgment of CDCR Form 1951, it states that the applicant understands and agrees that if material facts are later discovered which are inconsistent with or differ from the facts they furnished before beginning employment, they may be disciplined, up to and including dismissal from State service. California Code of Regulations, Title 15, Section 3401.5, Staff Sexual Misconduct (pg.253) describes employee sexual misconduct and penalties that all allegations of sexual misconduct shall be subject to investigation, which may lead to disciplinary action and/or criminal prosecution.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Design and Construction Policy Guidelines, Section H.1.c 3. CDCR Design and Construction Policy Guidelines, Section H.1.n 4. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Director of Adult Institutions 2. FSP Warden <p>115.18(a) - (b) -CDCR Design and Construction Policy Guidelines were amended on August 14, 2017, to include that for any future CDCR projects, when designing or acquiring any new facility in planning any substantial expansion or modification of existing facilities, and when installing or updating a video monitoring system, the department shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.</p> <p>FSP has made substantial expansions or modifications to its existing facilities since the last PREA audit, to include the Central Health Building and pill distribution areas. Interviews with the CDCR Director of Adult Institutions and FSP Warden affirmed that CDCR/FSP take into consideration ensuring a level of privacy for inmates in addition to protecting inmates from sexual abuse. FSP Warden further stated that every PREA allegation is reviewed and recommendations have been made to the hire authority for video monitoring technology to be installed throughout the facility to assist in the facility's ability to protect inmates from sexual abuse</p>

115.21

Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 5, Section 54040 - Prison Rape Elimination Act
 2. Chapter 5, Section 54040.8.1 - Custody Supervisor Responsibilities
 3. Chapter 5, Section 54040.8.2 - Victim Advocate and Victim Support Person
 4. Chapter 5, Section 54040.9 - Forensic Medical Examinations
3. CDCR Memorandum Re: Standard 115.21(a) 3- Dated 10/06/17
4. California Health Care Services Policy
 1. Volume 1, Chapter 10, 1.10 - Copayment Program Plan
5. CDCR PREA Specialized Training for Locally Designated Investigators Curriculum
6. CDCR and San Joaquin General Hospital Standard Agreement
7. CDCR and Women Escaping a Violent Environment, Inc. (WEAVE) Agreement (MOU)
8. FSP Additional Services for Victims of Sexual Abuse Poster
9. FSP PREA Investigation files
10. Interviews with the following:
 1. FSP Medical Staff
 2. SANE/SART Nurse at San Joaquin General Hospital
 3. FSP Random staff
 4. FSP Investigative staff
 5. FSP Inmates who reported sexual abuse

115.21(a) - (b) - CDCR Correctional staff/Peace Officers are under the California Penal Code and are authorized and trained to conduct both administrative and criminal investigations. FSP utilizes Locally Designated Investigators (LDI) and other designated institutional staff who have been trained to conduct criminal and administrative investigations into allegations of sexual violence and/or staff misconduct. The investigative office at FSP is called the Investigative Services Unit (ISU). FSP PREA Garrity type of investigations against staff are managed at the department level by the Office of Internal Affairs (OIA). According to CDCR Memorandum Re: Standard 115.21(a) and CDCR DOM, Section 54040.9, Forensic Medical Examination (pg. 476), the designated supervisor and investigators follow a uniform evidence protocol and procedure when conducting sexual abuse investigations. The process addresses assault examinations appropriate for adults/adolescents and children/adolescents. Interviews with random staff, medical staff, and responsible investigators confirmed that all investigations alleging sexual abuse will be investigated and follow evidence protocols.

115.21(c) - CDCR DOM Section 54040.9, Forensic Medical Examination (pg.476) states that the victim will be taken to the designated hospital, or on-site location, where SART Contract Staff will complete the forensic exam. The designated hospital for FSP is the San Joaquin General Hospital. CDCR has a standard agreement with San Joaquin General Hospital to perform sexual assault forensic examinations for inmates/ patients referred by CDCR. This agreement is for the period of July 1, 2020, through June 30, 2023. California Health Care Services Policy, Chapter 10, 1.10 states that copayment shall not be charged to the inmate if health care service(s) is considered to be treatment services related to sexual abuse or assault. Interview with the SANE/ SAFE staff at the San Joaquin General Hospital verified that they conduct the sexual assault forensic exams for FSP and that they have staff on-call and in the rare instances that they do not have anyone available, due to staff shortages, they would have one available within 12 hours or less. FSP's PAQ reported that there were five (5) forensic medical exams conducted in the last 12 months and documentation was reviewed by the auditor and confirmed compliance with this sub-standard.

115.21(d) - (e) - FSP has a Memorandum of Understanding (MOU) with Women Escaping a Violent Environment, Inc. (WEAVE) to provide victim support and emotional support services related to sexual abuse. This agreement is from July 1, 2019, through June 30, 2024. CDCR DOM, Section 5, 54040.8.1 requires that the facility Watch Commander contact the Rape Crisis Center to request a Victim Advocate to be dispatched. This can be documented via the Watch Commander Notifications Checklist. Additionally, posters were visible throughout FSP for additional services for victims of sexual abuse that include a hotline number and address in which they can contact WEAVE. The auditor reviewed FSP PREA investigation files which confirmed FSP's practice of requesting victim advocates for inmates.

115.21(f) - California Penal Code (PC) Section 13516 mandates that the Commission on Peace Officer Standards and Training (POST) established guidelines/standards for investigations of sexual assault. All law enforcement agencies must comply with the POST training guidelines for Sexual Assault Investigators. CDCR/FSP is responsible for administrative and criminal investigations.

115.21(h) - CDCR DOM Section 54040.3, states that if cases where an outside Victim Advocate is not available, a designated employee will be summoned, if available; an employee who has been certified by a rape crisis center as training in counseling of sexual assault victims and who either: 1) is a psychiatrist, psychologist, licensed clinical social worker, psychiatric mental health registered nurse, a staff person with a master's degree in counseling, or others listed in Evidence Code section 1010; or 2) has 40 hours of specialized training listed in Evidence Code 1035.2 and is supervised by a staff member in sub-section (1) above.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.12 - Investigations 2. Chapter 5, Section 54040.3 - Definitions 3. Chapter 5, Article 14- Internal Affairs Investigations 3. CDCR Memorandum Re: Standard 115.22(b) 1- Dated October 6, 2017 4. CDCR PREA Annual Report - Calendar Year 2021 5. FSP PREA Investigation files 6. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Director of Adult Institutions 2. CDCR PREA Coordinator 3. FSP Investigative Staff <p>115.22(a) - CDCR DOM, Section 54040.12, Investigations (pg.447-478) requires that all allegations of sexual violence, staff sexual misconduct, sexual abuse and sexual harassment shall be investigated, and the findings documented in writing. Further, all terminations for violations of agency sexual misconduct or harassment policies, or resignations by employees that would have been terminated if not for their resignation, are reported to any relevant licensing body by the hiring authority or designee. This also applies to CDCR contractors and volunteers. A review of CDCR DOM, Chapter 5, 54040.3, Definitions (pg.469-470) confirms that CDCR's definitions for sexual violence, sexual abuse, and sexual harassment are in line with PREA Standards. Further, review of FSP PREA investigation files confirmed that allegations of sexual violence, staff sexual misconduct, sexual abuse and sexual harassment are being investigated and documented.</p> <p>115.22(b) - CDCR Memorandum Re: Standard 115.22(b) 1 dated October 6, 2017, states that inmate on inmate sexual abuse and sexual harassment are investigated by the Investigative Services Unit (ISU) and if the allegations are found to be substantiated, ISU collaborates with the District Attorney to make a determination on criminal prosecution. If the incident involves staff sexual conduct and sexual harassment, ISU conducts a preliminary investigation and if the allegations are found to have potentially occurred, ISU refers the case to the Office of Internal Affairs (OIA). OIA is an entity within CDCR with authority to investigate all staff misconduct allegations. OIA completes the investigation and collaborates with the District Attorney to make a determination on criminal prosecution. This process was confirmed during interviews with the CDCR Director of Adult Institutions, CDCR PREA Coordinator, and ISU staff and during the auditor's review of FSP PREA investigation files.</p>

CDCR ISU are mandated to complete the Bureau of Justice Statistics' Survey of Sexual Victimization Incident form as a data collection tool, which is then forwarded to the CDCR PREA Coordinator. CDCR's website has links for the CDCR DOM, Article 44-PREA Policy, CDCR PREA annual reports and final PREA audit reports, which was verified by the auditor.

(c)- (e) - Not applicable as all CDCR/FSP investigations are completed through the ISU.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040 - Prison Rape Elimination Act 2. Chapter 5, Section 54040.4 - Education and Prevention 3. CDCR Memorandum Re: Overview of Senate Bill 132-Training (11/06/2020) 4. CDCR On the Job Training (OJT) PREA Lesson Plan 5. FSP Training Records 6. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Random staff <p>115.31(a)-(d) - CDCR DOM, 54040.4, Education and Prevention (pg.472-473) requires that all staff, including employees, volunteers, and contractors, shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. The training covers interactions with all genders, especially due to CDCR's transgender, non-binary, and intersex requirements based on California State Law. PREA training is conducted during new employee orientation with annual refresher trainings occurring subsequently through CDCR On-the-Job Training (OJT). However, base on the COVID-19 pandemic and the need to social distance in-service training components were transitioned to primarily online/web-based, if available. Participation in the training will be documented on a CDCR 844, Training Participation Sign-in Sheet.</p> <p>CDCR's In-Service PREA Training lesson plan and OJT lesson plan were provided and reviewed by the auditor. CDCR's In- Service PREA Training lesson plan covers all categories listed in subsection a (1-10). CDCR documents completion of the required training with CDCR 844 and the PREA OJT Acknowledgement form certifying that the employee has read, understood, and agrees to comply with the PREA OJT training. Interviews with random staff and review of training records confirmed that they receive refresher PREA training annually.</p>

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. CDCR DOM, Chapter 5, Section 54040.4 - Education and Prevention 2. CDCR DOM, Chapter 3, Section 32010.8.3 - Record Keeping Forms 3. CDCR Memorandum Re: CDCR Form 2301 - PREA Policy Information for Volunteers and Contractors (05/27/2020) 3. CDCR PREA Information and Acknowledgement Form 4. CDCR PREA Policy Volunteer/Contractor Informational Sheet 5. FSP Human Resource-Contractors and Volunteers File Review 6. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Contractors who have contact with inmates 2. FSP Volunteers who have contact with inmates 3. FSP Institutional Personnel Officer (Human Resources) 4. FSP Community Resources Manager (Human Resources) <p>115.32(a) - CDCR DOM, 54040.4, Education and Prevention (pg.472) requires that all staff including volunteers and contractors shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. All contractors and volunteers are required to complete a background check and acknowledge CDCR's PREA policy prior to entry into a state prison by certifying their responsibility to immediately report any information that indicates an offender is being or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment. FSP reported having 163 volunteers and contractors who have contact with inmates that have been trained on the agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response.</p> <p>115.32(b) - CDCR Memorandum Re: Standard 115.32(b) 1, requires that all volunteer and contract staff participate in a one-hour mandatory training regarding inmate/staff interactions. This training covers understanding the dynamics of establishing positive, professional interactions with inmates, maintaining professional distance while maintaining effective communication with inmates, and avoiding becoming overly familiar and/ or other inappropriate behavior. Although all volunteer and contract staff are required to complete the required one-hour training, staff who work 8-hour shifts with little to no custody staff supervision at times are mandated by the institutions to complete more extensive training based on their level of contact with inmates. Volunteers and contractors are also required to complete the CDCR PREA Policy Volunteer/Contractor Informational Sheet (CDCR Form 2301) which acknowledges their responsibilities and duties to immediately report any information on any PREA-related incidences.</p>

115.32(c) -CDCR, DOM, Section 32010.8.3, Record Keeping Forms (pg.207-208) outlines record keeping and documentation through CDC form 843 Training Record and Instruction Sheet and CDCR 844 Training Participation Sign-in Sheet. Additionally, volunteers and contractors are also required to complete and sign the CDCR PREA Policy Volunteer/Contractor Informational Sheet (CDCR Form 2301) which acknowledges their responsibilities and duties to immediately report any information on any PREA-related incidences.

Interviews with volunteers and contractors indicated that they have been trained and are knowledgeable about their responsibilities as it relates to PREA. A review of training records and human resource files confirmed that contractors have been trained and are knowledgeable about their responsibilities as it relates to PREA. This standard required corrective action as an initial review of human resource files for volunteers were missing CDCR Form 2301 to confirm training and acknowledgement of their responsibilities as it related to PREA. It should be noted that due to the COVID-19 pandemic, volunteers were not consistently coming into FSP during the 12 months preceding the audit. FSP provided the auditor with an updated listing of all active volunteers and provided verification of the completed CDCR Form 2301 for volunteers that ensures that volunteers were trained and acknowledged their responsibilities as it relates to PREA. FSP has demonstrated compliance with this standard.

115.33

Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations Manual (DOM)
3. Chapter 5, Section 54040.4 - Education and Prevention
4. CDCR PREA Sexual Abuse/Assault Prevention and Intervention booklet (English and Spanish)
5. CDCR Senate Bill 132 - "The Transgender Respect, Agency and Dignity Act" brochure
6. CDCR PREA Sexual Violence Awareness Brochure (English and Spanish)
7. CDCR/FSP General Chrono (CDCR128-B) - Inmate PREA Education Form
8. CDCR PREA Posters (English and Spanish)
9. Review of Inmate Records
10. Interviews with the following:
 1. FSP Intake staff
 2. FSP Random inmates

115.33(a) and (f) - CDCR DOM, Section 54040.4, Education and Prevention (pg. 472-473) requires that verbal and written information shall be provided to offenders which will address: Prevention/Intervention, Reporting, Treatment, and Counseling. Initial offender orientation on PREA is provided to the offender population in Reception Centers (RC) via either written or multi-media presentations every week in both English and Spanish. Approved PREA posters that contain departmental policy and sexual violence, staff sexual misconduct, and harassment reporting telephone numbers shall be posted in designated locations throughout the institution. The PREA brochures titled "Sexual Assault Awareness" and the PREA booklet titled "Sexual Abuse/Assault: Prevention and Intervention" are distributed during initial processing and the materials are also available through the correctional counselors and the institution's offender orientation handbook.

Upon admission to FSP, all inmates are provided information on the agency's zero-tolerance policy on sexual abuse and sexual harassment, how to report an incident or suspicion of sexual abuse and sexual harassment, and support services for those that have been sexually abused. This information is provided to inmates through posters, inmate orientation handbooks, and brochures. All inmates must sign off on the CDCR General Chrono (128-B) - Inmate PREA Education form acknowledging that they received this handbook and PREA brochures and booklets. Interviews with Intake Staff affirmed that inmates are provided with this information as part of the intake process before they are released to their assigned housing unit.

115.33(b) - Upon admission to FSP, the CDCR PREA information video is played as part of the inmate orientation process at Receiving and Release (R&R), prior to the

inmate being released to their assigned housing unit. The PREA educational video informs inmates on their right to be free from sexual abuse and sexual harassment and from retaliation for reporting sexual abuse and sexual harassment and the agency's policies and procedures for responding to a reported incident. Further, CDCR PREA posters which contain departmental policy on sexual violence, and sexual harassment reporting contact information are posted throughout the institution.

115.33(c) -All inmates at FSP are provided information on the agency's zero-tolerance policy on sexual abuse and sexual harassment, how to report an incident or suspicion of sexual abuse and sexual harassment, and support services for those that have been sexually abused. This information is provided to new inmates and inmates transferred from other facilities through posters, inmate orientation handbooks, a brochure titled "Sexual Violence Awareness" and the PREA booklet titled, "Sexual Abuse/Assault - Prevention and Intervention" through the initial processing process into the facility at intake.

115.33(d) - CDCR DOM, Section 54040.4, Education and Prevention (pg. 472-473) requires that appropriate provisions shall be made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and those with disabilities. Institutions may consider using offender peer education to enhance the offender's knowledge and understanding of PREA. An interview with intake staff confirmed this practice. All inmates sign an acknowledgment form that they have seen the PREA Education video and can ask questions if they have any. Interpreter services with Interpreting and Consulting Services, Inc. and Voiance Language Services are available for use to inmates who are Limited English proficient and deaf to ensure that they receive inmate PREA education. Additionally, the facility has some staff who are bilingual certified to provide translation services. The PREA inmate education video is played with sound and includes closed-captioning in intake to ensure inmates with limited reading skills and visual impairments are receiving inmate PREA education.

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

This standard required corrective action as during the on-site phase interviews with random inmates identified that comprehensive PREA education was not occurring consistently. This was corroborated through a review of inmate records. A review of inmate records found that documentation of inmate comprehensive PREA education on the CDCR 128B-Receipt of PREA Education form was not being completed consistently. Rather, it was being completed on a general chrono which did not indicate comprehensive education was provided. Further, during the on-site review, the auditor observed the intake process and identified that the PREA information video was not being played in a way that allowed all inmates in intake to view and hear the video. Corrective action was taken on-site to ensure all inmates were able to view and hear the PREA information video and FSP provided the auditor with verification of training for 2nd watch intake staff. However, training logs for 3rd watch intake staff along with time to demonstrate proof of practice was needed to

<p>determine compliance. FSP provided refresher training to custody staff on these requirements and provide verification of training (CDCR 844) to the auditor. Additionally, FSP provided the auditor with a listing of new admissions to FSP during the corrective action period and verification of completed CDCR 128B - Receipt of PREA Education forms for the new admissions. FSP has demonstrated compliance with this standard.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.3 - Definitions 2. Chapter 5, Section 54040.4 - Education and Prevention 3. CDCR PREA Specialized Training for Locally Designated Investigators Curriculum 4. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Investigative staff <p>115.34(a) - CDCR DOM, Section 54040.3, Definitions (pg.469) defines the Locally Designated Investigator (LDI) as institutional staff, who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct. Section 54040.4, Education and Prevention (pg.472) also states that investigators assigned to sexual violence and/or staff sexual misconduct cases will receive specialized training and that the institution's PREA Compliance Manager shall ensure employees investigating PREA incidents are properly trained.</p> <p>115.34(b) -(c) - The curriculum for the CDCR PREA Specialized Training for Locally Designated Investigators was reviewed by the auditor and includes training on techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection and evidence required to substantiate a case for administrative action or prosecution referral. FSP has designated four (4) PREA-specific Locally Designated Investigators. Interviews with FSP Investigative Staff (ISU) indicated that investigators are well-trained in conducting sexual abuse and sexual harassment investigations and confirmed their understanding of the specialized training curriculum. A review of training records confirmed that LDIs completed CDCR's PREA Specialized Training for Locally Designated Investigators.</p>

115.35	Specialized training: Medical and mental health care
	<p data-bbox="256 185 986 219">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 560 297">Auditor Discussion</p> <hr/> <p data-bbox="256 342 1214 376">Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol data-bbox="320 443 1430 896" style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.3 - Definitions 2. Chapter 5, Section 54040.4 - Education and Prevention 3. CCHCS Memorandum Re: PREA Specialized Training for Medical and Mental Health Staff (08/09/2017) 4. CDCR PREA Specialized Training for Medical and Mental Health Staff Curriculum 5. Training records for medical and mental health staff 6. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Medical and Mental Health staff <p data-bbox="256 936 1469 1514">115.35(a) - CDCR DOM, Section 54040.4, Education and Prevention (pg.472) requires that all staff including volunteers and contractors shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. This training will be conducted during new employee orientation, and annual block training, and will be included in the curriculum of the Correctional Training Academy. The training will be gender specific based on the offender population at the assigned institution. The Specialized Training for Medical and Mental Health staff was reviewed by the auditor and covers how to identify potential signs of sexual abuse and sexual harassment; how and whom to report allegations or suspicions of sexual abuse and sexual harassment; methods to respond effectively and professionally to victims of sexual abuse and sexual harassment; and steps required to preserve evidence of sexual abuse. Interviews with medical and mental health staff confirmed their knowledge and participation in PREA Specialized Training for Medical and Mental Health Staff.</p> <p data-bbox="256 1554 1469 1796">This substandard required corrective action as a review of medical and mental health staff training records identified that 89 of the 237 medical and/or mental health staff at FSP had not completed the PREA Specialized Training. FSP provided the auditor with verification of training for all medical and mental staff completing the PREA Specialized Training for Medical and Mental Health Staff. FSP has demonstrated compliance with this substandard.</p> <p data-bbox="256 1836 1469 2078">115.35(b) - CDCR DOM, Section 54040.3, Definitions (pg.470) states that unless an institution has been previously authorized for contracted onsite SART exams, they will utilize the resources available via contract at the local community hospital for SART examination of the victim and offender-suspect. As CDCR/FSP contracts with a local hospital (San Joaquin Hospital) to perform SART exams, this substandard is not applicable to FSP.</p>

115.35(c) - CCHCS Memorandum Re: PREA Specialized Training for Medical and Mental Health Staff - dated August 9, 2017, requires that once staff has completed the specialized training on the Learning Management Systems (LMS), they must provide a copy of their certificate, with signature, to their local In-Service Training office.

115.35(d) - CDCR DOM, Section 54040.4, Education and Prevention (pg. 470) requires that all staff including volunteers and contractors shall receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment. This training will be conducted during new employee orientation, and annual block training, and will be included in the curriculum of the Correctional Training Academy. Review of training records confirmed that medical and mental health care practitioners employed by the agency received training as mandated for employees by §115.31.

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 5, Section 54040.6 - Offender Housing
 2. Chapter 5, Section 54040.7 - Detection, Notification, and Reporting
 3. Chapter 5, Section 54046.5 - Initial Screening
3. CDCR Memorandum Re: PREA Risk Screening (08/28/2017)
4. CDCR Memorandum Re: PREA Risk Screening - Correctional Counselor Responsibilities (09/29/2017)
5. CDCR Memorandum Re: Changes to the PREA Risk Screening Form (07/23/2020)
6. CDCR PREA Risk Screening Tool
7. Review of Inmate Records
8. Interviews with the following:
 1. CDCR PREA Coordinator
 2. FSP PREA Compliance Manager
 3. FSP Intake Staff
 4. FSP Staff Responsible for Screening
 5. FSP Random Inmates

115.41(a) -(b)- CDCR Memorandum Re: PREA Risk Screening (08/28/2017) requires that during the intake process, the custody supervisor conducting the Initial Housing Review in Receiving and Release shall also be responsible for completing a PREA screening form for every inmate. In addition, if the PREA screening form identifies an inmate to be at risk of being sexually abused by other inmates or sexually abusive towards other inmates, the custody supervisor shall also enter an alert into the Inmate Precaution section in SOMS. All PREA Screening forms will be completed electronically and submitted directly into ERMS. During the onsite phase, Intake staff was able to demonstrate the screening process and provided a copy of the PREA risk screening to the auditor. In the past 12 months, 2,736 inmates entered FSP and were screened. Interviews with intake staff confirmed that staff was informed and knowledgeable on the PREA risk screening process and that the screening occurs before inmates are placed into an assigned housing unit. This was further corroborated through interviews with inmates, who acknowledged receiving screening upon admission to FSP, and review of inmate records.

115.41(c) - (d) - CDCR's PREA Risk Screening Tool was reviewed by the auditor and was determined to be an objective screening instrument that considers the minimum criteria listed in subsection d (1-10). The CDCR PREA Risk Screening Tool considers the following items when assessing inmates for risk of sexual victimization: 1) Victim of substantiated incident of sexual violence in a correctional setting (not including

sexual harassment) in the last 10 years; 2) Victim of sexual victimization in a non-correctional setting; 3) Mental, Physical or Developmental disability; 4) Age ; 5) Physical build; 6) Any prior or current convictions for sex offenses against an adult or child; 7) Whether they consider themselves or have ever been perceived by others as Lesbian, Gay, Bi-Sexual, Transgender, Inter-sex or Gender Non-Conforming; 8) Prior incarcerations; 9) Exclusively non-violent criminal history; and 10) Whether they currently consider themselves vulnerable to sexual victimization. Additionally, CDCR Memorandum Re: Changes to the PREA Risk Screening Form (07/23/2020) further elaborates that CDCR made changes to their PREA screening form in July 2020 to consider whether the individual was a victim of a substantiated or unsubstantiated incident of sexual violence in a correctional setting in the last 10 years and if the individual has experienced sexual victimization in a correctional setting that he/she has not previously reported. Interviews with staff responsible for conducting risk screening confirmed that all factors of this subsection are taken into consideration when they conduct the risk screening on inmates and that the information is gathered through interviewing the inmate as well as SOMS and ERMS.

115.41 (e) - CDCR's PREA Risk Screening Tool was reviewed by the auditor and considers risk for sexual abusiveness by considering: 1) History of sexual violence in a correctional setting; 2) Prior convictions for sex offenses in a non-correctional setting; 3) Conviction for non-sexual violent offenses in a non-correctional setting within 5 years; and 4) any guilty finding for non-sexual violent offense in a correctional setting within 5 years. Interviews with staff responsible for conducting risk screening confirmed that all factors of this subsection are taken into consideration when they conduct the risk screening on inmates and that the information is gathered through interviewing the inmate as well as SOMS and ERMS.

115.41(f) - (g) -CDCR DOM, Section 54040.7, Detection, Notification, and Reporting, states that an inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization. CDCR Memorandum Re: PREA Risk Screening - Correctional Counselor Responsibilities - dated September 29, 2017, states that Correctional Counselors will identify if any new information has been received related to PREA victimization or sexual abusiveness towards other inmates during the Classification Committee process. FSP inmates appear before a classification committee generally within 14 days of their admission to the facility. During the classification committee meeting, the inmate is asked if they have any new or relevant information related to the PREA screening that was initially completed upon admission. Interviews with staff who complete screenings corroborate that staff is knowledgeable and aware of their responsibilities to complete 30-day reviews of the PREA risk screening. This was further corroborated through interviews with inmates and review of inmate records.

115.41(h) - CDCR DOM, Section 54040.6, Offender Housing, states that offenders will not be disciplined for refusing to answer, or not disclosing complete information related mental, physical, or developmental disabilities, their sexual orientation, sexual victimization or perception of vulnerability. Interviews with intake staff and random inmates confirmed that inmates are not disciplined for refusing to answer, or

not disclosing complete information on the PREA Risk Screening.

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

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. California Code of Regulations - Title 15 <ol style="list-style-type: none"> 1. Section 3269- Inmate Housing Assignments 2. Section 3375 - Classification Process 3. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.6 - Offender Housing 2. Chapter 5, Section 54040.7 - Detection, Notification, and Reporting 3. Chapter 5, Section 54046.5 - Initial Screening 4. Chapter 6, Section 62080.14 - Transgender Inmates 4. CDCR Memorandum Re: PREA Risk Screening (08/28/2017) 5. CDCR Memorandum Re: PREA Risk Screening Correctional Counselor Responsibilities (09/29/2017) 6. CDCR Memorandum Re: PREA Risk Screening Mental Health Referral Process (10/24/2018) 7. CDCR's Roadmap for Standard 115.42 8. CDCR Senate Bill 132 -"The Transgender Respect, Agency and Dignity Act" Brochure 9. CDCR PREA Risk Screening Tool 10. CDCR's Transgender Biannual Assessment (Form CDC 128-B) 11. CDCR Memorandum Re: Transgender Biannual Reassessment for Safety in Placement and Programming (08/25/2017) 12. Review of FSP Inmate Records 13. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR PREA Coordinator 2. FSP PREA Compliance Manager 3. FSP Staff Responsible for Screening <p>115.42(a) - (b) - CDCR DOM, Section 54040.6, Offender Housing (pg.473) indicates that factors for single-cell housing include the initial housing review assessment and responses to sexual violence and victimization. California Code of Regulations, Title 15, Section 3269 also notes a presumption for single-cell housing based on documented and verified instances of being a victim of in-cell physical or sexual abuse by another inmate or verified predatory behavior towards a cell partner. CDCR's CDCR Memorandum Re: PREA Risk Screening (08/28/2017) directs the assigning staff to review the inmate precaution screen to determine if the inmate(s) are identified as being "at risk as a victim" or "at risk as an abuser". If either precaution exists, the custody supervisor is required to review the potential cellmate's precaution screen(s) and case factors to ensure potential victims and potential abusers are not housed together in a cell. The PREA Risk Screening is</p>

reassessed within 30 days (generally 14 days) of arrival at FSP by the Initial Unit Classification Committee. During the committee, the PREA screening is reviewed and considered in all decisions affecting the inmate including housing, work, education, and program assignments. Interviews with the FSP's PREA Compliance Manager and staff responsible for risk screening and review of inmate records affirmed this process.

115.42(c) - (d) & (g) - CDCR DOM Section 62080.14, Transgender Inmates (pg.575-576) specifies that inmates who have been diagnosed as transgendered shall be housed at designated facilities "to the maximum extent practical" based on the need to ensure the inmate's medical care and mental health treatment. If the inmate has multiple case factors which make it difficult to house in the specified institutions, a case conference with key CDCR staff shall be conducted to determine the most appropriate level of care and institution suitable for the inmate's case factors. Additionally, per California Code of Regulations, Title 15, Section 3375, the classification and housing process shall take into consideration the inmate's needs, interests and desires, his/her behavior, and placement score in keeping with the CDCR and institution's/facility's programs and security missions and public safety. An interview with the CDCR PREA Coordinator confirmed that CDCR has 14 designated transgender institutions and that the institutions were selected as they have more specialized medical and mental health staff that are experienced and able to provide services better in line with the needs of transgender inmates and that the classification and housing process takes into account all factors listed above and is done on a case-by-case basis. Further, CDCR PREA Coordinator affirmed that if transgender inmates are housed at a designated facility they are housed throughout the facility in all housing types, not in one housing unit. Additionally, CDCR PREA Coordinator further affirmed that an inmate who identifies as transgender is not housed at one of the designated facilities solely because they identify as transgender and that transgender inmates are housed throughout all CDCR facilities, not just designated facilities, depending on the needs and classification of the inmate.

Further, Senate Bill 132 - "The Transgender Respect, Agency, and Dignity Act" was signed into law on September 26, 2020, and took effect on January 1, 2021. Senate Bill 132 is legislation that allows incarcerated transgender, non-binary, and intersex people to request to be housed and searched in a manner consistent with their gender identity. Offenders may request to be housed in an institution in accordance with their gender identity and all placement requests go through an in-depth review prior to an approval or disapproval being determined. The review is conducted by a multi-disciplinary classification committee chaired by the Warden and made up of custody, medical and mental health staff, and the PREA Compliance Manager. The committee reviews all case factors and the individual's history to make a recommendation for approval or disapproval of the request. If the request is approved, the offender is then transferred to a male or female Reception Center, consistent with their gender identity. If the request is disapproved, the offender is notified and has up to thirty (30) days to grieve the decision. If a grievance is filed, it is then referred to the Departmental Review Board for a decision regarding housing in a male or female prison. Interviews with the CDCR PREA Coordinator and FSP PREA

Compliance Manager confirmed this process.

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

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) 3. Chapter 5, Section 54040.6 - Offender Housing 4. California Code of Regulations Title 15 - Article 7. Segregation Housing 5. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Warden 2. FSP PREA Compliance Manager <p>115.43(a) - CDCR DOM, Section 54040.6, Offender Housing (pg.471) states that offenders at high risk for sexual victimization, as identified on the electronic Initial Housing Review, shall not be placed in segregated housing unless an assessment of all available alternatives has been completed, and a determination has been made that there is no available alternative means of separation from likely abusers. These assessments shall be completed immediately or within 24 hours of placement into segregated housing. FSP Warden confirmed in his interview that the facility does their best to exhaust all means before placing an inmate in involuntary segregation. FSP had no inmates at high risk for sexual victimization placed in involuntary segregated housing in the last 12 months at FSP.</p> <p>115.43(b) - (e) - California Code of Regulations, Title 15, Article 7 states that, Non-Disciplinary Segregation (NDS) means segregated housing placement for administrative reasons to include but are not limited to: (d) Investigation related to being the victim of a Prison Rape Elimination Act (PREA) incident. If the placement in NDS is related to being the victim, the inmate will be afforded all programs, privileges, and education in accordance with section 3044-Inmate Work Groups and subsection 3190 (b) (5) (c), of Title 15 of the CCR. If these are restricted, assigned staff shall document: 1) the opportunities that have been limited; 2) the duration of the limitation; and 3) the reasons for such limitation. This section also addresses the assignment to NDS only until an alternative means of separation from likely abusers can be arranged, and assignment shall not exceed 30 days, if so, a review by assigned supervisor shall be completed to determine whether there is a continuing need for separation. FSP had no inmates at high risk for sexual victimization placed in involuntary segregated housing in the last 12 months at FSP. Interviews with FSP Warden and FSP PREA Compliance Manager confirmed that should an inmate be identified to be at risk they would be re-evaluated and only if no available alternative means of separation from likely abusers could be made, a transferred to another facility would be an option. Further, that access to programs, privileges and education is done through review with the assigned counselors.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. California Code of Regulations - Title 15 <ol style="list-style-type: none"> 1. Section 3401.5 - Employee Sexual Misconduct 3. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.4 - Education and Prevention 2. Chapter 5, Section 54040.7 - Detection, Notification, and Reporting 4. CDCR PREA Volunteer/Contractor Training - Informational Sheet 5. CDCR PREA Sexual Abuse/Assault Prevention and Intervention booklet (English and Spanish) 6. CDCR PREA Sexual Violence Awareness Brochure (English and Spanish) 7. CDCR PREA Posters (English and Spanish) 8. Review of Inmate Records 9. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Intake staff 2. FSP Random inmates <p>115.51(a) - (b) - CDCR DOM, Section 54040.7, Detection Notification and Reporting (pg. 472) outlines that an offender may report sexual violence, staff sexual misconduct, or sexual harassment that occurs under the jurisdiction of the CDCR to any staff member, volunteer, contractor, Office of Internal Affairs, Office of the Inspector General, the Inmate Appeals Process, the sexual assault hotline or through a third party. These reports can be verbally or in writing. In addition, offenders being retained solely for civil immigration may contact consular officials or officials at the Department of Homeland Security. During the site review, posters were observed up all around the facility in both English and Spanish informing inmates of the various ways of reporting - to staff, Internal Affairs, Inspector General, or via a third party through a family member. The Inmate Orientation Handbook provided to every inmate at intake likewise lists the above. Both interviews with intake staff and random inmates confirmed that they are aware of the various ways to report, including but not limited to contacting the PREA hotline number, to staff in writing or in person, and on a form 602 (grievance form). The current inmate phone system requires an inmate to use a Personal Identification Number (PIN) to make any outgoing phone calls. However, once a call is made to the identified phone numbers of the local rape crisis center, Office of Internal Affairs (OIA), or Office of the Inspector General (OIG), the calls are then redirected to a non-recorded, secure, private and anonymous phone line. This process was confirmed through interviews with inmates and auditors testing the inmate phone system.</p> <p>115.51(c) - (d) - California Code of Regulations, Title 15, Section 3401.5 requires that any employee who observes or receives information from any source concerning</p>

	<p>sexual misconduct, shall immediately report the information or incident directly to the institution head, unit supervisor or highest ranking official on duty, who shall then immediately notify the Office of Internal Affairs. Interviews with staff confirmed that staff knew of the various ways to report privately. Interviews with staff confirmed that they would report it through their chain of command.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.15.1 - Alleged Victim - False Allegations 2. Chapter 5, Section 54040.7 - Notification via Third-Party Reporting 3. California Code of Regulations Title 15 - Article 8. Appeals, Section 3084 4. Memorandum - Referral of All Unnecessary or Excessive Use of Force and Specified Prison Rape Elimination Acts Allegations to the Allegation Inquiry Management Section (12/29/2021) 5. FSP grievances alleging sexual abuse or staff sexual misconduct 6. FSP PREA Investigation files 7. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Warden 2. FSP Grievance Coordinator <p>115.52(a) - The agency is not exempt from this standard as it has an appeals process to address inmate grievances regarding sexual abuse. California Code of Regulations, Title 15 - Article 8 states that a grievance in whole or part containing allegations of sexual violence or staff sexual misconduct shall be processed as an emergency appeal. As an emergency appeal, the appeal is immediately reviewed by the Hiring Authority or designee and processed directly at the second level of review.</p> <p>115.52(b)-(c) - California Code of Regulations, Title 15 - Article 8 states that there shall be no time limits for allegations of sexual violence or staff sexual misconduct. While the department maintains the right to defend against an inmate lawsuit on the grounds of the applicable statute of limitations, a time limit shall not be imposed upon when an appellant may file such a grievance. Further, Article 8, Section 3084.7 states that appeal responses shall not be reviewed and approved by a staff person who participates in the event of the decision being appealed. Effective January 1, 2022, specified PREA-related allegations of staff (on offender) sexual misconduct, to include allegations of sexual harassment or sexual assault by a staff member, unless evidence exists to warrant an OIA investigation or direct action, originating from grievances submitted by incarcerated persons and parolees are now sent to the Allegation Inquiry Management Section (AIMS) to conduct independent and objective inquiries. The AIMS section is within the Office of Internal Affairs.</p> <p>115.52(d) - California Code of Regulations, Title 15 - Article 8, Section 3084.8 (pg.79) states that appeal time limits indicate that the first and second-level responses have a time limit of 30 days, and third-level responses have 60 days. If an exceptional delay prevents completion of the review within specified time limits, the inmate shall be provided an explanation of the reasons for the delay and the estimated completion</p>

date. Additionally, Section 3084.9 (pg.79-80) states that second and third-level reviews may be extended in increments of 30 days, but shall not exceed 160 days from the date the appeal was received by the appeals coordinator. The appellant may consider an absence of a timely response at any level, including that of any properly noticed extension, a denial at that level. FSP had thirteen (13) grievances filed that alleged sexual abuse in the last 12 months. An interview with the FSP Grievance Coordinator affirmed this practice. This substandard required corrective action as a review of FSP PREA-related grievances was not able to be completed as a follow-up request from the auditor for the complete inmate grievance to include the response to the inmate was not received by the completion of the interim report. FSP provided the auditor with PREA-related inmate grievances and responses during the corrective action period that confirmed that all grievances are reviewed and final decisions were within 90 days. FSP has demonstrated compliance with this substandard.

115.52(e) - CDCR COM, Chapter 5, Section 54040.7.2, Notification via Third Party Reporting of Misconduct Against an Employee, Contractor or Volunteer (pg.474) discusses how a third party can file a complaint on behalf of an inmate and it is to be submitted to the hiring authority of the alleged perpetrator. When a third-party files a complaint on behalf of an inmate, a supervisory employee shall take the alleged victim to a private setting to discuss the complaint and assess immediate housing needs. The agency/facility does not require as a condition of processing the request that the alleged victim agree to have the request filed on their behalf. An interview with the FSP Grievance Coordinator and a review of FSP PREA Investigations files confirmed that all allegations of sexual misconduct are investigated, including those received via a third party.

115.52(f) - California Code of Regulations, Title 15- Article 8, Section 3084.9 (pg. 79-80) establishes a timeframe of 48 hours for an initial risk assessment to be conducted and documented upon submission of an emergency grievance. An inmate is allowed to file an emergency grievance should he/she be subject to a substantial risk of imminent sexual abuse, with an initial response within 48 hours, and a final decision within 5 calendar days. FSP's PAQ and grievance records indicated that they had no emergency grievances alleging a substantial risk of imminent sexual abuse in the last 12 months.

115.52(g) - CDCR DOM, Section 54040.15.1, Alleged Victim - False Allegations (pg.478) states that following an investigation if it is determined that the allegations were made not in good faith the offender making the allegations may be subject to disciplinary action. An allegation that is deemed to be unsubstantiated or unfounded based on lack of evidence, does not constitute false reporting. FSP had no instances in the past 12 months of inmates filing grievances alleging sexual abuse in bad faith.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) Chapter 5 <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.8 - Victim Advocate and Victim Support Person 3. CDCR Sexual Abuse/Assault Prevention and Intervention Pamphlet 4. CDCR Sexual Violence Awareness Pamphlet 5. FSP Inmate Orientation Handbook 6. CDCR "Shine the Light on Sexual Abuse" Posters 7. CDCR/FSP PREA Information for Orientation Handbook 8. Memorandum of Understanding between FSP and Women Escaping a Violent Environment (WEAVE) 9. Review of Inmate Records 10. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Random Inmates 2. FSP Inmates who Reported Sexual Abuse <p>115.53(a) - CDCR DOM, Section 54040.8.2- requires that victims of rape, unlawful sexual intercourse with a person under 18, rape of spouse, sodomy, oral copulation, forcible acts of sexual penetration have a right under PC 264.2 and PC 679.04 to victim advocate and victim support person for both the medical examination and investigatory interview. FSP provides access to victim advocates for emotional support services related to sexual abuse through the local rape crisis center, Women Escaping a Violent Environment (WEAVE). Inmates are informed of these services and the contact information (phone and mailing address) of the local rape crisis center, WEAVE, through the inmate handbook and the CDCR/FSP "Sexual Abuse/Assault Prevention and Intervention" pamphlet and posters.</p> <p>CDCR/FSP has established a way to inform inmates through the PREA Informational Sheet for Orientation Handbook that services from WEAVE will maintain confidentiality as required by state and federal laws for Sexual Assault Counselors. Additionally, if inmates chose to write to WEAVE, they are informed that the envelope must state: "EVID. CODE 1035.4 PRIVILEGED COMMUNICATION" so that it is treated as confidential mail. Inmate interviews acknowledge that inmates are aware of the services, or at least where to find the information to contact them, should they feel the need for them. Inmates who reported sexual abuse affirmed through interviews they knew where they could find the contact information should they choose to receive further services.</p> <p>115.53(b) - CDCR/FSP has established a way to inform inmates through the PREA Informational Sheet for Orientation Handbook that the telephone calls from the</p>

inmate telephone system are recorded and if PREA allegations are identified on this system, it will be referred to appropriate staff for inquiry and investigation. Interviews with inmates noted that they overall felt that the information they shared would be confidential but also noted that they understood that if it was regarding an incident that occurred at the facility that it would have to be reported so that it could be addressed.

115.53(c) - CDCR/FSP has a Memorandum of Understanding (MOU) with Women Escaping a Violent Environment (WEAVE) to provide emotional support services related to sexual abuse and victim advocate service. The MOU is in effect from July 1, 2019, through June 30, 2024. Contact information for WEAVE is listed in the Inmate Orientation Handbook, and the Sexual Violence Awareness brochures provided to inmates. The auditor facilitated correspondence with the WEAVE staff who confirmed that they are presently providing emotional support services related to sexual abuse and victim advocate services to inmates at FSP.

115.54	Third-party reporting
	<p data-bbox="256 188 986 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 560 300">Auditor Discussion</p> <p data-bbox="256 340 1214 376">Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol data-bbox="320 443 1401 815" style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR, DOM, Section 54040.7.3 - Notification via Third Party Reporting of Sexual Violence or Sexual Harassment Against an Offender 3. CDCR Agency web page 4. CDCR/FSP PREA Posters 5. FSP Inmate Orientation Handbook (English and Spanish) 6. Interviews with the following: <ol data-bbox="427 734 772 815" style="list-style-type: none"> 1. FSP Random inmates 2. FSP Random staff <p data-bbox="256 853 1485 1173">115.54(a) - The CDCR website: provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. The website outlines ways that visitors, inmate family members or associates, and other community members can privately report sexual abuse or sexual harassment. Additionally, PREA posters are posted throughout the facility, including visitation areas, which provide information on how to report sexual abuse or sexual harassment. The website information was verified and during interviews with staff and inmates, it was confirmed that they had knowledge of the information and website.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.12 - Investigations 2. Chapter 5. Section 54040.7 - Detection, Notification, and Reporting 3. Chapter 5, Section 54040.8 - Response 3. California Correctional Health Care Services Memorandum Re: Mandatory Reporting of Patient Sexual Abuse or Misconduct (01/03/2020) 4. CDCR Memorandum Re: Standard 115.61 (01/27/2020) 5. FSP PREA Investigation Files 6. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Warden 2. FSP Medical and mental health staff 3. FSP Random inmates 4. FSP Random staff <p>115.61(a) - (b) - CDCR DOM, Section 54040.7, Detection, Notification and Reporting (pg.473) requires that staff immediately and confidentially report any PREA violation by staff or inmates whether witnessed or reported, to the appropriate supervisor. In addition to reporting, employees have a responsibility to assist the offender and refer him/her to medical and mental health for evaluation. Volunteers/Contractors are also required to report incidents of sexual violence, harassment, and staff sexual misconduct to the appropriate staff. CDCR DOM, Section 54040.8 outlines the expectations of staff to ensure that reporting of information is done confidentially and that incident-specific information shall be treated as confidential, and disclosure made only to employees who have a "need to know" and to other entities as permitted or requested by law. All staff interviews confirmed that all staff are aware of the agency's policy for reporting any information related to inmate sexual abuse and compliance with this substandard.</p> <p>115.61(c) - California Correctional Health Care Services Memorandum Re: Mandatory Reporting of Patient Sexual Abuse or Misconduct (01/03/2020) affirms that CDCR and California Correctional Health Care Services providers must report allegations of sexual violence, staff sexual misconduct, and sexual harassment to include informing patients of the provider's duty to report, and the limitation of confidentiality, at the initiation of services. Interviews with FSP medical and mental health staff confirmed that they inform patients of their duty to report and the limitations of confidentiality.</p> <p>115.61(d) - FSP does not house inmates under the age of 18. Current litigation against CDCR regarding vulnerable adults which resulted in the remedial plans and the State of California - Health and Human Services Agency, there is no requirement</p>

for CDCR to report to the state or local services agency such as Adult Protective Services. It should be noted that CDCR Investigators are classified as Peace Officers and receive specialized training in conducting sexual abuse investigations of all persons incarcerated up to and including criminal cases.

115.61(e) - CDCR DOM, Section 54040.12, Investigations (pg.475) requires that all allegations of sexual violence, staff sexual misconduct, and sexual harassment shall be investigated, and the findings documented in writing, it further states that for allegations reported to the Hiring Authority, the allegation will be assigned to an LDI to conduct an investigation and utilizing standard investigatory procedures. An interview with the FSP Warden confirmed this practice at FSP. A review of FSP PREA investigations completed during the audit period confirmed compliance with this substandard.

115.62	<p>Agency protection duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.6 - Offender Housing 2. Chapter 5. Section 54040.7 - Detection, Notification, and Reporting 3. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Director of Adult Institutions 2. FSP Warden 3. FSP Random staff <p>115.62(a) - CDCR DOM, Section 54040.7, Detection, Notification and Reporting (pg. 473-474) establishes a responsibility for CDCR employees to protect the inmates in their custody. All staff are responsible for reporting immediately and confidentially to the appropriate supervisor any information that indicates an offender is being or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment. Additionally, CDCR DOM, Section 54040.6 states that inmates at high risk for sexual victimization, as identified on the electronic Housing Review, shall not be placed in segregated housing unless an assessment of all available alternatives has been completed and a determination has been made that there are no available alternative means of separation from likely abusers.</p> <p>FSP reported on the PAQ to have no instances in the past 12 months of determining that an inmate was at risk of imminent sexual abuse. CDCR Director of Adult Institutions and FSP Warden both confirmed in interviews that housing alternatives are always available to ensure the protection of inmates at risk of imminent sexual abuse. Some of the alternatives considered would be moving the inmate to a different housing unit, single cell placements, and recommending a transfer to a different facility if deemed necessary. Based on staff interviews, it was evident that staff is aware of their responsibility to protect inmates in their care and that any perceived threat of harm including sexual abuse would result in immediate reporting and preventative action by staff.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.7.4 - Notification from/to Other Confinement Facilities 3. FSP PREA Investigation Files 4. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Director of Adult Institutions 2. FSP Warden 3. FSP Investigation Staff <p>115.63(a) - (c) - CDCR DOM, Section 54040.7.4, Notification from/to Other Confinement Facilities (pg.473) states that upon receiving an allegation that an offender was the victim of sexual violence or staff sexual misconduct while confined at another institution/confinement facility, the hiring authority where the allegation was received shall notify the hiring authority of the institution or appropriate office of the agency where the alleged incident occurred. The notification shall be made via telephone contact or electronic mail and will be followed up with a written summary. Notifications must be made as soon as possible but no later than 72 hours. The institution or facility where the alleged sexual violence or staff sexual misconduct is reported will be responsible to complete the SSV-IA form. In the past 12 months, FSP received seven (7) allegations of an inmate being sexually abused while confined at another confinement facility. FSP ISU were assigned the investigations and investigation files reviewed by the auditor confirmed that FSP completes an investigation report and documentation of notification to the other confinement facility.</p> <p>115.63(d) - CDCR DOM, Section 54070.7.4, Notification from/to Other Confinement Facilities (pg.474) further states that the agency receiving notification that an incident occurred at their institution, shall assign and ensure that the allegation is investigated and reported in accordance with DOM Section 54040.12. Upon completion, a closure report shall be returned to the institution where the alleged incident was reported. In the past twelve months, FSP received three (3) allegations of sexual abuse occurring at FSP from another facility. PREA investigation file reviews and interviews with FSP Investigation staff confirmed the practice.</p>

115.64	<p>Staff first responder duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.8 - Response 3. CDCR PREA Initial Contact Guide 4. CDCR Custody Supervisor PREA Checklist 5. FSP PREA Investigation Files 6. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Random staff 2. FSP Staff and non-security first responders 3. FSP Inmates who reported sexual abuse <p>115.64(a) - (b)- CDCR DOM Section 54040.8, Response (pg.474) requires that the employee who the inmate makes initial contact with will take the alleged victim to a private secure location and utilize the Initial Contact Guide to complete the tasks associated with the initial contact which includes preservation of evidence, requesting that the alleged victim and alleged abuser not take any actions that could destroy physical evidence. The custody supervisor shall ensure that a perimeter has been established and an officer has been posted to keep persons out of the crime scene area and keep a chronological log of all persons entering the crime scene area and purposes for doing so. CDCR developed a checklist as a tool for watch commanders to follow in these incidents. The CDCR Custody Supervisor PREA checklist clearly outlines the steps and covers items (1) through (4) in this substandard. A review of FSP PREA Investigation files confirmed that these steps are taken when an allegation is received. The Confidential Memorandum in the PREA Investigation files also includes documentation on the steps that were taken once the allegation was received. Interviews with security and non-security staff confirmed that staff is aware of the procedures and their responsibilities as first responders to a PREA incident.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.8 - Response 2. FSP Supplement to CDCR DOM Section 54040 -Revised January 2022 3. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Warden 2. FSP Random Staff <p>115.65(a) - FSP Supplement to CDCR DOM Section 54040 outlines and addresses FSP's institutional plan to respond to incidents and coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership, required by PREA standard 115.65. FSP Supplement to CDCR DOM Section 54040.3 is reviewed annually by the FSP PREA Compliance Manager and was last reviewed in January 2022. Interviews with the FSP Warden and facility staff confirmed that staff is aware of the coordinated response in place at FSP.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. California Correctional Peace Officers Association Bargaining Unit 6 Agreement 3. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Director of Adult Institutions <p>115.66(a) - CDCR Collective Bargaining Agreement (CBA) for Unit 6 contract is effective July 3, 2020 through July 2, 2022, with an extension granted to end on July 2, 2023. The CBA does not limit management's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The CBA section 4.01: Management Rights (pg.29) states that management has the authority to hire, transfer, promote and demote employees as the employer may determine to be necessary for the orderly, efficient, and economical operation of CDCR. Interview with the CDCR Director of Adult Institutions confirmed that involuntary actions related to the removal and reassignment of staff is within their authority.</p>

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. California Code of Regulations - Title 15
 1. Section 3401.5 - Employee Sexual Misconduct
3. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 5, Section 54040 - Prison Rape Elimination Act Policy
 2. Chapter 5, Section 54040.13 - Allegation Follow-Up
4. CDCR Protection Against Retaliation Form (PAR -CDCR 2304)
5. FSP PREA Investigation Files
6. Interviews with the following:
 1. CDCR Director of Adult Institutions
 2. FSP Warden
 3. FSP PREA Compliance Manager
 4. FSP Staff Charged with Monitoring Retaliation

115.67(a) - (e) - CDCR DOM, Section 54040.13, Allegation Follow-Up (pg.478) requires that for at least 90 days following a report of sexual violence or staff sexual misconduct, the institutional PREA Compliance Manager shall assign a supervisory staff member to monitor the conduct and treatment of inmates or employees who reported the allegation to ensure there are no changes that may suggest retaliation. The assigned supervisor shall notify the PREA Compliance Manager of any changes and the PREA Compliance Manager shall act promptly to remedy any such retaliation and ensure a CDCR form 2304 or 2305, Protection Against Retaliation (PAR) is initiated which includes; periodic inmate status checks, inmate disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff. This section also states that the monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need and that the obligation to monitor shall terminate if the investigation determines that the allegation is unfounded or proven false.

Interviews with the FSP PREA Compliance Manager and FSP staff charged with monitoring retaliation revealed that they were very knowledgeable on their responsibilities and duties to monitor and report any changes to the PREA Compliance Manager. Review of FSP PREA Investigation files confirmed the monitoring for retaliation is occurring. In the 12 months prior to the audit, FSP did not receive any reports of retaliation from PREA related incidents.

CDCR DOM, Section 54040.1, PREA Policy (pg.471) also states that retaliatory measures against employees or offenders who report incidents of sexual violence, staff sexual misconduct or sexual harassment as well as retaliatory measures against those who cooperate with investigations shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. This is also reiterated in California

	<p>Code of Regulations, Title 15, Section 3401.5. Interviews with CDCR Director of Adult Institutions and FSP Warden affirm the zero-tolerance for retaliation.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. California Code of Regulations - Title 15 <ol style="list-style-type: none"> 1. Article 7 - Segregation Housing 3. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.6 - Offender Housing 4. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Warden <p>115.68(a) -CDCR DOM, Section 54040.6, Offender Housing (pg.473) states that offenders at high risk for sexual victimization, as identified on the electronic Initial Housing Review, shall not be placed in segregated housing unless an assessment of all available alternatives has been completed, and a determination has been made that there is no available alternative means of separation from likely abusers. These assessments shall be completed immediately or within 24 hours of placement into segregated housing. California Code of Regulations, Title 15 - Segregation Housing states that non-disciplinary segregation means segregated housing placement for administrative reasons to include investigations related to being the victim of a PREA incident. If the placement in non-disciplinary segregation is related to being the victim of a PREA incident, the inmate will be afforded all programs, privileges, and education in accordance with CCR, Title 15, sections 3044-Inmate Work Groups and subsection 3190 (b)(5)(c). If programs, privileges, and education are restricted, assigned staff shall document: 1) the opportunities that have been limited; 2) the duration of the limitation; and 3) the reasons for such limitation. This section also addresses the assignment to non-disciplinary segregation only until an alternative means of separation from likely abusers can be arranged, and assignment shall not exceed 30 days. If it is exceeded, then it shall be documented on Classification Committee Chrono. The inmate is reviewed every 30 days to determine whether there is a continuing need for segregation from the general population. If the determination is that segregation should cease, the inmate is referred to the classification committee for a programmatic review.</p> <p>FSP reported no instances of involuntary non-disciplinary segregation to protect an inmate who is alleged to have suffered sexual abuse in the last 12 months. Interview with the FSP Warden confirmed that placement into involuntary non-disciplinary segregation to protect an inmate who is alleged to have suffered sexual abuse would only occur while finding available housing space at FSP or while pending transfer to another facility for housing.</p>

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion**Policy, Materials, Interviews, and Other Evidence Reviewed:**

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. California Code of Regulations - Title 15
 1. Section 3316 - Referral for Criminal Prosecution
3. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 1, Section 14030.5 - Who May a Request a Polygraph Examination
 2. Chapter 3, Section 31140.6 - Authority to Conduct Investigations
 3. Chapter 5, Section 54040 - Prison Rape Elimination Act
 4. Chapter 5, Section 54040.17 - Records Retention
 5. Chapter 5, Section 54040.4 - Education and Prevention (Staff Training)
 6. Chapter 5, Section 5404.8.1 - Custody Supervisor Responsibilities
 7. Chapter 5, Section 54040.12 - Investigations
4. CDCR PREA Specialized Training for Locally Designated Investigators Curriculum
5. CDCR Office of Internal Affairs (OIA) Investigator's Field Guide - Compelled Interviews (May 2008)
6. CDCR - PREA Instructions for Records Retention Schedule (RRS) Update
7. FSP PREA investigation files
8. Interviews with the following:
 1. CDCR PREA Coordinator
 2. FSP Warden
 3. FSP PREA Compliance Manager
 4. FSP Investigative Staff
 5. FSP Inmates who reported sexual abuse

CDCR DOM section 54040.1 has Locally Designated Investigators (LDI) who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct. CDCR/FSP refers to their investigator as the Investigative Services Unit (ISU).

115.71(a) - CDCR DOM, Section 54040.12, Investigations (pg.477) requires that all allegations of sexual violence, staff sexual misconduct, and sexual harassment be investigated, and findings documented in writing. This includes any allegations made through a third-party or anonymous report. CDCR DOM, Section 54040.8.1 requires immediate notification to the Hiring Authority which will assign an LDI to conduct inquiry work until sufficient information is obtained to warrant an Office of Internal Affairs (OIA) investigation, or the information collected refutes the allegations, as determined by the Hiring Authority. Information will be thoroughly documented on a Confidential Memorandum that shall be maintained with the investigatory file. The complaint will be investigated utilizing standard investigatory procedures. Upon

conclusion, the alleged victim will be provided written notification of the findings as described in section 54040.12.5. This section states that all incidents shall be investigated, and the findings documented in writing. CDCR DOM, Section 54040.8.1, Custody Supervisor Responsibilities (pg.474-475) further states that if it is believed by staff to constitute an emergency they shall report immediately to a supervisor where notifications to OIA, Regional Office, SAC, or OIA can be made.

Interviews with FSP Investigative staff confirmed that an investigation is immediately started when there is an allegation of sexual abuse or sexual harassment. When there is an anonymous or third-party report, Investigative Staff handles it immediately and appropriately. Investigation files of sexual abuse/sexual harassment completed during the audit period were provided to the auditor for review and a review of the files confirmed that investigations are completed promptly and thoroughly.

115.71(b) - (c) - CDCR DOM, Section 54040.4, Education and Prevention (pg.470) requires that investigators assigned to sexual violence and/or staff sexual misconduct cases will receive specialized training and that the Facility PREA Compliance Manager shall ensure employees investigating these incidents are properly trained. CDCR PREA Specialized Training for LDI curriculum and training records for LDI's were provided and reviewed by the auditor. A review of training records confirmed that all LDI's received specialized training in sexual abuse investigations, interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection, and identifying evidence required to substantiate a case for administrative action or prosecution referral. Interviews with Investigation staff affirmed that they received specialized training and are highly knowledgeable in completing PREA-related investigations.

115.71(d) -California Code of Regulations, Title 15, Section 3316, states that all criminal misconduct by persons under the jurisdiction of the department or occurring on facility property shall be referred by the institution head or designee to appropriate authorities for possible investigation and prosecution when there is evidence substantiating each of the elements of the crime to be charged. A review of PREA investigation files and interviews with the CDCR PREA Coordinator and FSP Investigation staff affirmed that this process was being followed and that when the quality of evidence appears to support criminal prosecution, the agency conducts compelled interviews only after consulting with prosecutors.

115.71(e) - CDCR DOM, Section 14030.5, Who May Request a Polygraph (pg.52) states that no person shall be ordered to take a polygraph examination. No coercion or offer of reward shall be used to induce any person to take a polygraph examination. Interviews with FSP Investigations staff confirmed that they treat any alleged victim as a victim and do not discriminate or have a bias based on the inmate or staff's status during an investigation. Interviews with FSP Investigation staff and inmates who reported sexual abuse confirmed that FSP does not require alleged victims, suspects, or witnesses to submit to a polygraph examination as a condition of proceeding with an investigation.

115.71(f) - (h) - Interviews with FSP Investigation staff affirmed that thorough

investigations are done and that all pertinent information such as a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings is gathered and documented, to include an effort to determine whether staff actions or failures of actions contributed to the abuse. This includes statements, staff rosters, inmate housing assignments, etc. Interviews also affirmed that all investigations are documented in writing and that all cases that appear to be criminal are referred for prosecution. Since the last PREA Audit, FSP has had ten (10) completed investigations of sexual abuse that were referred for prosecution. Investigation files were reviewed and confirmed that investigations include an effort to determine whether staff actions or failures to act may have contributed to the abuse, description of physical and testimonial evidence, reasoning behind the credibility of statements, and investigative facts and findings.

115.71(i) - CDCR DOM, Section 54040.20, PREA Data Storage and Destruction (pg.477) states that CDCR shall ensure that all PREA data collected are securely retained and are maintained for 10 years after the date of the initial collection. The PREA Instructions for Records Retention Schedule (RRS) states that Investigatory files are retained in the ISU for a minimum of 10 years or for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, whichever is longer.

115.71(j) - CDCR DOM, Section 54040.12, Investigations (pg.475-476) states that the departure of the alleged suspect or victim from the employment or control of CDCR shall not provide a basis for terminating an investigation. This was confirmed through interviews with Investigative staff and investigation files.

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

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) Chapter 3, Section 33030.13.1 - Investigative Findings 3. Chapter 3, Section 33030.17 - Applying the Employee Disciplinary Matrix 4. FSP PREA Investigation Files 5. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Investigative Staff <p>115.72(a) - CDCR, DOM, Section 33030.13.1, Investigative Findings (pg.245) defined the findings of each allegation shall be determined by the Hiring Authority in consultation with the Vertical Advocate for designated cases and the SAIG. For a case to be Sustained or substantiated, this section states, "The investigation disclosed a preponderance of evidence to prove the allegation(s) made in the complaint." Further, CDCR DOM, Section 33030.17, Applying the Employee Disciplinary Matrix (pg.246) requires that sufficient evidence establishing a preponderance is necessary before any disciplinary action can be taken. The Employee Disciplinary Matrix shall be the foundation for all disciplinary action considered and imposed by the Department and shall be utilized by the Hiring Authority to determine the penalty to impose for misconduct. Auditor review of documentation of standard of proof used in investigative findings followed the standard. The FSP Investigative staff confirmed the same level of standard in substantiating a sexual harassment or sexual abuse allegation.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5. Section 54040.8.1 - Custody Supervisor Responsibilities 2. Chapter 5, Section 54040.12.5 - Reporting to Offenders 3. Review of PREA investigation files 4. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Warden 2. FSP PREA Compliance Manager 3. FSP Investigative Staff 4. FSP Inmates who reported sexual abuse <p>115.73(a) - (f) - CDCR DOM, Section 54040.12.5, Reporting to Offenders (pg.476) states for Staff on Offender that following an offender's allegation that a staff member has committed sexual misconduct against an offender, the alleged victim shall be informed as to whether the allegation has been substantiated, unsubstantiated, or unfounded. The PREA Compliance Manager or designee shall inform that offender unless determined to be unfounded, whenever the alleged abuser is no longer posted within the inmate's unit, is no longer employed at the facility, has been indicted or convicted of the alleged sexual misconduct. This section further states that following an investigation into an offender's allegation of sexual violence by another offender, the institution shall inform the alleged victim of the outcome of the investigation and whenever the alleged abuse has been indicted or convicted of the alleged sexual violence. The agency's obligation to report/inform the offender of changes shall terminate if the offender is released from the agency's custody. CDCR DOM, Section 54040.8.1, Custody Supervisor Responsibilities (pg.474) states that upon conclusion of the investigation, the alleged victim will be provided written notification of the findings as described in DOM Section 54040.12.5.</p> <p>Interviews with the FSP PREA Compliance Manager and FSP Investigative staff found that they were very knowledgeable on their responsibilities and duties of the notification process to alleged victims upon conclusion of the investigation. Review of FSP PREA investigation files confirmed that the practice and documentation to notify to the alleged victim of the findings as described in DOM Section 54040.12.5 is occurring on a consistent basis.</p>

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. California Code of Regulations - Title 15
 1. Chapter 3, Section 3401.5 - Staff Sexual Misconduct
3. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 3, Section 33030.15 - Types of Adverse Action Penalties
 2. Chapter 3, Section 33030.16 - Employee Disciplinary Matrix Penalty Levels employee
 3. Chapter 5, Section 54040.12.3 - Reporting to Outside Agencies
 4. Chapter 5, Section 54040.12.4 - Report to Outside Agencies for Contractors
4. FSP PREA Investigation Files
5. Interviews with the following:
 1. CDCR Director of Adult Institutions
 2. CDCR PREA Coordinator
 3. FSP Warden
 4. FSP PREA Compliance Manager
 5. FSP Investigative Staff

115.76(a) - (d) - California Code of Regulations, Title 15, Section 3401.5, Staff Sexual Misconduct (pg.253) states that any sexual behavior between an inmate/parolee, departmental employee, volunteer, agent, or individual working on behalf of CDCR shall subject the employee to disciplinary action and/or prosecution under the law. Further, Section 33030.15 outlines the five types of adverse action penalties; (15.1) Letter of Reprimand, (15.2) Salary Reduction, (15.3) Suspension without Pay, (15.4) Demotion to a Lower Class, (15.5) Dismissal from State Service. Per the Employee Disciplinary Matrix Penalty Levels in Section 33030.16, there are nine levels ranging from official reprimands, suspensions, salary reductions, and dismissals. According to DOM section 33030.19- Employee Disciplinary Matrix (EDM) (pg.249) number (18)- Over-familiarity with an inmate(s)/parolee(s) would follow a penalty of (6) which is, a salary reduction of 10 for 13-24 months or suspension without pay for 26-48 work days. EDM number (19)-Sexual Misconduct with an inmate(s)/Parolee(s) would follow a penalty of (9) which is, Dismissal.

CDCR DOM, Section 54040.12.3 and 54040.12.4, Reporting to Outside Agencies (pg.477) states that for all employees, contractors or volunteers that are terminations for violations of agency sexual misconduct or harassment policies, or resignations by employees that would have been terminated if not for their resignation, shall be reported to any relevant licensing body by the hiring authority or designee.

In the past 12 months, there were no employees, volunteers, contractors, or individuals working on behalf of CDCR that were terminated for violating agency

	<p>sexual abuse or sexual harassment policies at FSP. FSP PREA Investigative files were reviewed and interviews with CDCR and FSP leadership affirm compliance with this standard.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.12.4 - Report to Outside Agencies for Contractors 2. Chapter 10, Section 101090.9 - Termination 3. CDCR Contractor Bid/Agreement Contract Special Terms and Conditions (Exhibit D) 4. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Warden <p>115.77(a) - CDCR DOM, Section 54040.12.4, Reporting to Outside Agencies for Contractors (pg.477) states that any contractor or volunteer who engages in staff sexual misconduct shall be prohibited from contact with the offenders and shall be reported to the relevant licensing body by the hiring authority or designee. Further, CDCR Contractor Bid/Agreement (Exhibit D) provision (59) informs the contractor that any contract employee who engages in sexual abuse of an inmate shall be prohibited from contact with inmates and shall be subject to administrative and/or criminal investigation including possible referral to the District Attorney, unless the activity was clearly not criminal, and shall be subject to reporting to relevant licensing bodies. The agreement also states that by signing the contract they agree to all provisions and shall abide by the laws, rules, and regulations governing conduct in associating with prison inmates or wards.</p> <p>115.77(b) - CDCR DOM, Section 101090.9, Termination (pg. 821-822) states that the hiring authority may limit or discontinue activities of any volunteer or group which may impede the security and/or orderly operation or threatens the security and safety of the volunteer, employees, public, or inmates. Termination can be carried out expeditiously if there is evidence of volunteer misconduct that includes acts of inappropriate familiarity with inmates, parolees, and participating in behavior either on or off duty that is of such nature that it may cause discredit to CDCR or its services.</p> <p>FSP reported that there were no substantiated PREA incidents involving a contractor or volunteer within the past 12 months. An interview with FSP Warden affirmed that appropriate and immediate measures would be taken to assure contact with inmates would cease, an investigation conducted to include reporting to the relevant licensing body and referral to law enforcement agencies.</p>

115.78 Disciplinary sanctions for inmates**Auditor Overall Determination:** Meets Standard**Auditor Discussion****Policy, Materials, Interviews, and Other Evidence Reviewed:**

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. California Code of Regulations - Title 15
 1. Section 3007 - Sexual Behavior
 2. Section 3317 - Mental Health Evaluations for Disciplinary Hearings
 3. Section 3323 - Disciplinary Credit Forfeiture Schedule
3. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 5, Section 54040.15 - Disciplinary Process
 2. Chapter 5, Section 54040.15.1 - Alleged Victim - False Allegations
 3. Chapter 5, Section 54040.7 - Referral for Mental Health Screening
4. FSP PREA Investigative Files
5. Inmate disciplinary sanctions report
6. Interviews with the following:
 1. FSP Warden
 2. FSP Medical and mental health staff

115.78(a) - (b) - CDCR subjects inmates to a disciplinary process and sanctions for those who engage in sexual abuse and sexual misconduct. Sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history as described in California Code of Regulations Title 15, Section 3323, which describes the level of the rule violation, and CDCR DOM, Section 54040.15. CDCR DOM, Section 54040.15, Disciplinary Process (pg.476) states, that upon completion of the investigative process, the existing disciplinary process, which includes referral for criminal prosecution and classification determinations, shall be followed. If the allegations of sexual violence warrants a disciplinary/criminal charge, a CDCR Form 115, Rules Violation Report shall be initiated. The offender who is charged will be entitled to all provisions of CCR Section 3320 regarding hearing procedures and time limitations and CCD Section 3316, Referral for Criminal Prosecution. There were no administrative and/or criminal findings of inmate-on-inmate sexual abuse at FSP within the past 12 months.

115.78(c) - California Code of Regulation, Title 15, Section 3317, Mental Health Evaluations for Disciplinary Hearings (pg.158) requires that inmates in the Mental Health program or any inmate showing signs of possible mental illness may require a CDC 115 MH, Rules Violation Report: Mental Health Assessment. Persons who exhibit bizarre, unusual, or uncharacteristic behavior at the time of the rules violation shall be referred for a Mental Health Assessment. Interviews with FSP Warden and mental health staff affirmed that FSP considers an inmate's mental health status when determining what type of sanction, if any, should be imposed.

115.78(d) - CDCR DOM, Section 54040.7, Referral for Mental Health Screening

(pg.474) states that an offender who during the initial intake screening reports that he/she has experienced prior sexual victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is referred to mental health utilizing the CDCR form 128-MH5, mental health referral chronological. Interviews with FSP's mental health staff confirmed that FSP offers mental health services to offenders who have sexually abused another offender and that they do not require the offending inmate to participate in interventions as a condition of access to programming or other benefits.

115.78(e) - California Code of Regulations, Title 15, Section 3323, Discipline Credit Forfeiture Schedule (pg.163) outlines that in an inmate who commits Rape, attempted rape, sodomy, attempted sodomy, oral copulation, and attempted oral copulation against the victim's will shall be assessed credit forfeiture ranging from 181-360 days. FSP had no instances of an inmate on staff sexual abuse within the past 12 months.

115.78(f) - CDCR DOM, Section 54040.15.1, Alleged Victim - False Allegations (pg.478) states that CDCR and its facility will not apply disciplinary action against an inmate for filing any report of sexual violence, or staff sexual misconduct unless it is clearly demonstrated and documented that the inmate knowingly made a false report. An allegation deemed unsubstantiated or unfounded based on lack of evidence does not constitute false reporting.

115.78(g) - California Code of Regulations, Title 15, Section 3007, Sexual Behavior (pg.24) indicates that inmates may not participate in illegal sexual acts. Inmates are specifically excluded in laws, which report legal restraints from acts between consenting adults. FSP also investigates any "consensual sex" misconduct to avoid abuse under consent as means to deter sexual abuse in the facility and that inmates are disciplined accordingly should they participate in illegal sexual acts.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.7 - Referral for Mental Health Screening 3. CCHCS PREA Health Care Guidelines 4. CDCR PREA Screening Form 5. CDCR PREA Authorization to Release Information Form (CDCR 7552) 6. CDCR Informed Consent for Mental Health Care Form (CDCR MH-7448) 7. Review of FSP PREA-related mental health referrals 8. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Staff Responsible for Risk Screening 2. FSP Inmates who Disclosed Sexual Victimization at Risk Screening 3. FSP Mental health staff <p>115.81(a) -(d) - CDCR DOM, Section 54040.7, Referral for Mental Health Screening (pg. 474) states that if it is reported by an offender during the initial intake screening, that he/she has experienced prior sexual victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is referred to mental health utilizing the CDCR form 128-MH5, Mental Health Referral Chrono. During the on-site review of the intake area observed was a medical/mental health satellite office where all new intakes are seen as part of the initial screening prior to being assigned to a housing unit. The Intake Officer was interviewed and reported that all inmates who disclose either previous sexual abuse or previously perpetrating sexual abuse, will immediately be offered a follow-up meeting with a mental health practitioner. The inmate can then choose to accept or decline a mental health referral, which is documented on the CDCR PREA Screening Form. This standard required corrective action as the auditor requested follow-up documentation of the Initial PREA screening forms of randomly selected inmates who disclosed prior sexual victimization during their screening to confirm that the inmate(s) declined a mental health referral as reported. However, the follow-up documentation was not received before the completion of the interim report and therefore the auditor is unable to determine compliance at that time. Subsequently, during the corrective action period, FPS provided the auditor with the Initial PREA screening forms of inmates who disclosed prior sexual victimization during their screening to confirm that the inmate(s) declined a mental health referral as reported. FSP has demonstrated compliance with this substandard.</p> <p>CCHCS PREA Health Care Guidelines outline the mental health referral process. Referrals to mental health may be made on an Emergent, Urgent, or Routine Basis. Emergent referrals are seen immediately, Urgent referrals are seen within 24 hours and Routine referrals are seen within five working days. All referrals are made on the</p>

CDCR-MH5 Mental Health Referral Chrono and forwarded to the mental health office. Emergent and Urgent referrals should also be made by phone to facilitate a timely response. Interviews with mental health staff and reviews of mental health referrals confirmed that these guidelines are in practice. Interviews with staff also affirmed that information related to sexual victimization or abusiveness of an inmate is shared with the appropriate staff on a need-to-know basis.

115.81(e) - CDCR utilizes Authorization for Release of Information (CDCR 7552) to obtain consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. Information may be released to others including but not limited to authorized law enforcement agencies, authorized prosecutors, and other appropriate agencies to include health care information. Informed Consent for Mental Health Care (Form CDCR MH-7448) is provided to the inmate for all CDCR mental health services. Interviews with mental health staff confirmed the practice of obtaining informed consent.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.8.3 - Medical Services Responsibilities 2. Chapter 5, Section 54040.10 - Return to Triage and Treatment Area 3. California Correctional Health Care Services (CCHCS) <ol style="list-style-type: none"> 1. Volume 1, Governance and Administration, Chapter 10: Copayment Program Policy 2. Volume 1, Governance and Administration Chapter 16: PREA Procedures 3. Volume 4, Medical Services, Chapter 12: Emergency Medical Responses 4. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Medical and mental health staff 2. FSP Inmates who reported sexual abuse 3. FSP Security staff and non-security staff first responders <p>115.82(a) - (d) - CCHCS Volume 1, Chapter 16, outlines the procedures of CCHCS to provide medically necessary emergency and follow-up treatment; follow-up plans; and necessary referrals to CCHCS patients who are alleged victims or suspects of sexual violence, staff sexual misconduct, and sexual harassment consistent with its duties under CDCR PREA policy. Health care staff are responsible to provide emergency care until the alleged victim or suspect can be sent to the county Sexual Assault Response Team (SART) facility for forensic clinical evaluation and treatment, and/or hospital for medical stabilization, determine if the injuries sustained by the alleged victim qualify as serious bodily injury as defined in the CCR and report the injuries. The policy further states that health care must ensure a follow-up testing for pregnancy, sexually transmitted infections/diseases (STI/STD), and HIV, as indicated; and provide follow-up clinical care as indicated. Interviews with medical, mental health staff and inmates who reported sexual abuse confirmed this practice.</p> <p>115.82(b) - Interviews with security and non-security staff affirmed that staff are aware of the preliminary steps to protect the victim and to report the incident to medical and mental health in the event a report of sexual abuse is made.</p> <p>115.82(c) - CDCR DOM, Section 54040.10, Return to Triage and Treatment Area states that upon return of the victim from the SART/SANE Exam one of the processes are that the offender, if appropriate, shall be given educational materials to provide information related to the medical and mental health conditions which may have resulted after a sexual violence/staff sexual misconduct incident.</p> <p>115.82(d) - CCHCS Volume 1. Chapter 10 indicates that there will be no copayment</p>

	<p>charge to the inmate if the health care service(s) are to be considered treatment services relating to sexual abuse or assault. Interviews with medical staff and inmates who reported sexual abuse confirmed that there is no copayment charge to the inmate.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.10 - Return to Triage and Treatment Area 3. CCHCS Volume 1 Governance and Administration <ol style="list-style-type: none"> 1. Chapter 10 - Copayment Program Policy 2. Chapter 16 - PREA Procedures 4. Interviews with the following: <ol style="list-style-type: none"> 1. FSP Medical and mental health staff 2. FSP Inmates who reported sexual abuse <p>115.83(a) - (f) - CCHCS Volume 1, Chapter 16 and CDCR DOM, Section 54040.10, outlines the procedures and responsibilities of CCHCS and CDCR to provide medical and mental health evaluations, treatment, and follow-up services to all inmates who have been victims of sexual abuse in any institution. CDCR provides follow-up medical and mental health services to include treatment plans and when necessary referrals for continued care when transferred or placed in other facilities. Further, this includes follow-up testing for sexually transmitted infections/diseases (STI/STD), and HIV. CDCR agency policy states that victims of vaginal penetration are offered pregnancy tests among other STD testing, treatment, and relevant information. Interviews with medical, and mental health staff and inmates who reported sexual abuse confirmed that is in practice at FSP.</p> <p>115.83(g) - CCHCS Volume 1. Chapter 10 indicates that there will be no copayment charge to the inmate if the health care service(s) are to be considered treatment services relating to sexual abuse or assault. Interviews with medical staff and inmates who reported sexual abuse confirmed that there is no copayment charge to the inmate. The “no copayment” is not conditional upon cooperating with any investigation.</p> <p>115.83(h) - Interviews with mental health staff confirmed that referrals for alleged perpetrators of sexual abuse are done and that the mental health evaluation conducted as with any other inmate.</p>

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion**Policy, Materials, Interviews, and Other Evidence Reviewed:**

1. FSP Completed Pre-Audit Questionnaire (PAQ)
2. CDCR Policy - Department Operations Manual (DOM)
 1. Chapter 5, Section 54040.17 - Institutional PREA Review Committee
3. Review of PREA Investigation Files
4. Interviews with the following:
 1. FSP Warden
 2. FSP PREA Compliance Manager

115.86(a) - (b) - CDCR DOM, Section 54040.17, Institutional PREA Review Committee (pg.478) requires that the Hiring Authority conduct an incident review of every sexual violence or staff sexual misconduct allegation, including allegations that have not been substantiated. A review is not required for allegations that have been determined to be unfounded. Further, it requires that the facility PREA Compliance Manager normally schedule these PREA incidents for review by the Institutional PREA Review Committee (IPRC) within 60 days of the date of discovery.

115.86(c) - (d) - The Institutional PREA Review Committee (IPRC) is the designated sexual abuse incident review team for CDRC. The IPRC generally consists of the Hiring Authority or designee, PREA Compliance Manager, In-Service Training Manager, Health Care Clinician, Mental Health Clinician, and ISU staff. When conducting a review, the IPRC must consider:

- Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- Whether the incident or allegation was motivated by race; ethnicity; gender identity; LBGTI status, or perceived status; gang affiliation; or was it motivated or otherwise caused by other group dynamics at the facility;
- Examines the area in the facility where the incident occurred to assess whether physical barriers in the area may enable abuse;
- Determine if, the staffing plan was not complied with and this shall be documented in the review as a part of the corrective action plan;
- Assess the adequacy of staffing levels in that area during different shifts;
- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff, and prepare a report of the IPRC findings and any recommendations for improvement to correct any deficiencies.

The findings of the review are documented as a formal written report and shall be submitted to the Hiring Authority. The final report shall be provided to the Associate Director and the CDCR PREA Coordinator. Completed IPRC forms and IPRC meeting minutes related to that case are stored in the PREA investigation file. Interviews with

	<p>the FSP Warden, and FSP PREA Compliance Manager and a review of PREA Investigation files confirmed the policy and practice of the IPRCs being conducted and completed as required.</p>
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115.87	Data collection
	<p data-bbox="256 188 986 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 558 300">Auditor Discussion</p> <hr/> <p data-bbox="256 340 1204 376">Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol data-bbox="319 443 1436 851" style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.17 - Institutional PREA Review Committee 2. Chapter 5, Section 54040.19 - Tracking - Data Collection and Monitoring 3. Chapter 5, Section 54040.20 - PREA Data Storage and Destruction 3. CDCR PREA Annual Report - Calendar Year 2021 4. Survey of Sexual Victimization Form (SSV-IA) 5. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR PREA Coordinator <p data-bbox="256 891 1460 1220">115.87(a) - (f) - CDCR DOM, section 54040.17, Institutional PREA Review Committee (pg.478) states that the agency is required to review data collected pursuant to standard §115.87 in order to assess and improve the effectiveness of its sexual violence prevention, detection, and response policies, practices and training. CDCR DOM, Section 54040.19, outlines CDCR’s procedure to collect accurate, uniform data for every allegation of sexual abuse at the facilities under its direct control. CDCR uses the Survey of Sexual Victimization Form (SSV-IA) as a standardized instrument with a set of definitions for all allegations of sexual abuse and misconduct incidents.</p> <p data-bbox="256 1261 1444 1668">CDCR DOM Section 54040.19 further states that the Office of Internal Affairs maintains records of investigations into allegations of staff/offender sexual misconduct, and will report by case number, the type of sexual misconduct, subcategory; whether the allegations were sustained; and whether a referral to the District Attorney was made. CDCR shall aggregate the incident-based data at least annually. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the SSV conducted by the Federal Department of Justice. CDCR shall maintain, review, and collect data as needed from all available documents including incident reports, investigation files, and PREA incident reviews.</p> <p data-bbox="256 1709 1476 2027">CDCR shall also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of inmates. Upon request, the agency shall provide all such data from the previous calendar year to the federal Department of Justice no later than June 30. The most recent annual report available is for Calendar Year 2021. The annual report can be found at: https://www.cdcr.ca.gov/prea/prea/reports-audits/. This report includes a comparison of the current year’s data and corrective actions with those from prior years and provides an assessment of the agency’s progress in addressing sexual abuse.</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.17 - Institutional PREA Review Committee 2. Chapter 5, Section 54040.19 - Tracking - Data Collection and Monitoring 3. CDCR PREA Annual Report - Calendar Year 2021 4. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Director of Adult Institutions 2. CDCR PREA Coordinator 3. FSP PREA Compliance Manager <p>115.88(a) - CDCR DOM, Section 54040.17, requires CDCR to review data collected pursuant to standard §115.87 to assess and improve the effectiveness of its sexual violence prevention, detection, and response policies, practices and training. On an annual basis the Department PREA Coordinator will forward to each institution, a data collection tool which will be utilized by the institutional PREA Compliance Manager to summarize information gathered through the institutional PREA committee. The departmental PREA Coordinator will prepare an annual report of the findings and corrective actions for each facility, as well as the agency as a whole. The final report will be routed through the chain of command to the agency Secretary for review and approval, once it is approved the report will be forwarded to the Office of Public and Employee Communication for placement on the CDCR Website.</p> <p>Completed SSV-IA forms were reviewed and interviews with the CDCR Director of Adult Institutions, CDCR PREA Coordinator, and FSP's PREA Compliance Manager all attested that the facility collects data, aggregates data, and analyzes the information to assist them in creating a safer environment for the inmates and staff. Interviews with the CDCR Director of Adult Institutions, the CDCR PREA Coordinator, and the FSP PREA Compliance Manager all revealed that they agency collects and uses aggregated data to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training.</p> <p>115.88(b)- (d)- CDCR DOM, Section 54040.19, Tracking - Data Collection and Monitoring (pg.479) states that CDCR shall aggregate the incident-based data at least annually, reports shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual violence and staff sexual misconduct. The report shall be approved the CDCR Secretary and made available to the public through the CDCR website. Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility; however, the report must indicate the nature of the material redacted. CDCR's Director of Adult</p>

	<p>Institutions stated that she approves the annual reports and CDCR PREA Coordinator confirmed that personal identifiers are redacted from reports.</p>
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115.89	Data storage, publication, and destruction
	<p data-bbox="256 188 986 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 558 300">Auditor Discussion</p> <p data-bbox="256 340 1204 376">Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ol data-bbox="319 443 1396 815" style="list-style-type: none"> 1. FSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) <ol style="list-style-type: none"> 1. Chapter 5, Section 54040.20 PREA Data Storage and Destruction 3. CDCR Agency PREA website 4. CDCR PREA Annual Report - Calendar Year 2021 5. Interviews with the following: <ol style="list-style-type: none"> 1. CDCR Director of Adult Institutions 2. CDCR PREA Coordinator 3. FSP PREA Compliance Manager <p data-bbox="256 855 1484 1178">115.89(a) - (d) - CDCR DOM, Section 54040.20, PREA Data Storage and Destruction (pg.479) requires that CDCR ensures that PREA data collected are securely retained. All aggregated PREA data, from facilities under CDCR's direct control and private facilities with which it contracts, shall be made readily available to the public at least annually through the CDCR website. Before making aggregated PREA data publicly available, all personal identifiers shall be removed. PREA data collected shall be maintained for 10 years after the date of the initial collection. CDCR PREA Coordinator confirmed that personal identifiers are redacted from reports.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>CDCR has in previous years submitted Governor Assurances of Intention to Adopt and Achieve Full Compliance with the standards. CDCR is currently working to ensure that one-third of its facilities are audited in the third year of the three-year audit cycle. This commitment by CDCR was reiterated and confirmed during interviews with the Director of Adult Institutions and the PREA Coordinator. While onsite at FSP, the audit team was provided with access to, and the ability to observe, all areas of the facility. The auditor received copies of all requested documents and was permitted to conduct private interviews with staff and inmates. Inmates were permitted to send confidential correspondence to the auditor. This standard is rated as a “meets standard”.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	CDCR has submitted Governor Assurances and California is working to ensure that their facilities are audited at least once during the three-year cycle by a DOJ Certified Auditor. The completed CDCR PREA Audit reports are located on the CDCR website at https://www.cdcr.ca.gov/PREA/Reports-Audits.html .

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	yes

	for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	
	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.)	na
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.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	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	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that 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.)	na
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.)	na
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).)	na
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.)	yes

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.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	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.)	yes
	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).)	na
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.)	na

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.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
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	
	<p>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.)</p>	yes