PREA Facility Audit Report: Final

Name of Facility: Mule Creek State Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: 04/12/2021 **Date Final Report Submitted:** 11/08/2021

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		V
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		7
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.		V
Auditor Full Name as Signed: Nicole Fernandez Date of Signature: 11/08/2021		

AUDITOR INFORMATION	
Auditor name:	Fernandez, Nicole
Email:	nicole.c.fernandez@hawaii.gov
Start Date of On-Site Audit:	02/21/2021
End Date of On-Site Audit:	02/25/2021

FACILITY INFORMATION	
Facility name:	Mule Creek State Prison
Facility physical address:	4001 Hwy. 104, Ione, California - 95640
Facility Phone	
Facility mailing address:	

Primary Contact		
Name:	Arthur Avalos	
Email Address:	Arthur.Avalos@cdcr.ca.gov	
Telephone Number:	209-663-5362	

Warden/Jail Administrator/Sheriff/Director		
Name:	Patrick Covello	
Email Address:	Patrick.Covello@cdcr.ca.gov	
Telephone Number:	209-274-4911 X5000	

Facility PREA Compliance Manager		
Name:	Arthur Avalos	
Email Address:	arthur.avalos@cdcr.ca.gov	
Telephone Number:	O: (209) 663-5362	

Facility Health Service Administrator On-site		
Name:	Traci Patterson	
Email Address:	Traci.Patterson@cdcr.ca.gov	
Telephone Number:	209-274-4911 X5970	

Facility Characteristics	
Designed facility capacity:	4106
Current population of facility:	3945
Average daily population for the past 12 months:	3976
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-99
Facility security levels/inmate custody levels:	Levels I/II/III/IV (Minimum to Max)
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	1679
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	859
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	45

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

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

Agency-Wide PREA Coordin	ator Information		
Name:	Shannon Stark	Email Address:	shannon.stark@cdcr.ca.gov

AUDIT FINDINGS

Narrative:

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

A Department of Justice (DOJ) Prison Rape Elimination Act (PREA) audit was conducted at the Mule Creek State Prison (MCSP) as part of the Western State Consortium Agreement. This audit was the third PREA audit for the MCSP facility. MCSP is under the jurisdiction of the California Department of Corrections and Rehabilitation (CDCR). The PREA Audit team consisted of DOJ Certified Auditor Nicole Fernandez (lead auditor) with support staff of Cheyenne Evans (DOJ Certified Auditor) Kona Mann, and Kristine Najim, hereafter referred to as the PREA Audit Team. Support staff assisted the lead auditor and participated in the site review and conducting interviews with staff and inmates. The on-site audit was conducted from February 21, 2021 to February 25, 2021.

Pre-Onsite Phase

Prior to the onsite audit a posting of the PREA Audit Notices and auditor's contact information was distributed throughout MSP and posted on January 27, 2021, four (4) weeks prior to the first day of the on-site audit. It should be noted that there was a delay in the posting of the PREA Audit Notices as it was unclear if the audit was still scheduled due to the COVID-19 pandemic. However, as a result of the delay the Audit Notices with auditor's contact information remained posted in the facility for at least two weeks after the onsite phase. The facility provided email documentation, including pictures, to demonstrate the notices were posted in accordance with audit requirements in English and Spanish. The notices included instructions for inmates that all correspondence must include "for MCSP PREA Audit" on the envelope; otherwise it will not be considered confidential. Further, that all written and verbal correspondence and disclosures provided to the auditor are confidential and will not be disclosed unless required by law.

MCSP's Pre-Audit Questionnaire (PAQ) and supporting documents was completed on January 5, 2021, on the Online Audit System (OAS). The PAQ and documents reviewed prior to the onsite audit included agency policies and procedures; forms; organizational charts; PREA related posters, brochures; and memorandums of agreements. A pre-audit correspondence was facilitated on January 22, 2021, between the auditor, MCSP PREA Compliance Manager and CDCR PREA Coordinator to discuss the review of the PAQ, documents and file/records needed for review while on site and the schedule for the on-site phase. On January 25, 2021, a follow-up pre-audit phone conference was facilitated between the auditor and MCSP PREA Compliance Manager to discuss logistics of the on-site audit, review of the purpose and general process of the audit, goals and expectations about accessibility to areas of the facility, files, inmates and staff.

On January 26, 2021, the auditor requested the following from the MCSP's PREA Compliance Manager and CDCR PREA Coordinator: List of All MCSP Staff; List of all Custody and Non-Custody with Job/Position Title; list of all staff (custody and non-custody) hired, promoted and transferred to MCSP in the last 12 months; list of All MCSP Contractors and Volunteers; list of all contractors and volunteers granted admission to MCSP in the last 12 months; updated PREA at Risk Screening inmate list; list of all PREA investigations at MCSP in the last 12 months; training Verification for all MCSP PREA investigators; and Facility Map/Schematics. Additionally, a request for the following lists were requested to be provided on the first day of the audit, if not sooner: 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.

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, MCSP 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 February 10, 2021 through February 17, 2021. These telephone interviews included the following:

- CDCR Agency Head or Designee
- CDCR Agency Contract Administrator
- CDCR PREA Coordinator
- MCSP Warden
- MCSP Administrative Staff
- MCSP Grievance Staff
- MCSP Supervisory-Level Medical and Mental Health Staff
- MCSP Staff who are involved in screening for risk of victimization and abusiveness
- MCSP Supervisory-Level Intake Staff
- MCSP Investigative Staff
- MCSP Designated Staff charged with Monitoring Retaliation

- MCSP Incident Review Team staff (IPRC)
- Sexual Assault Forensic Examiner (SAFE) and Sexual Assault Nurse Examiner (SANE) Staff
- · Volunteers and Contractors who have contact with inmates

Additionally, the auditor contacted Just Detention International (JDI) and the local rape crisis center, Operation Care, as it related to PREA related services at MCSP. On February 12, 2021, the auditor received further email correspondence from Operation Care staff discussing the current Memorandum of Understanding (MOU) with MCSP and the PREA related services that are being provided at MCSP. The auditor received nine (9) confidential correspondence from an inmate at MCSP prior to the on-site phase. It should be noted that upon completion of the on-site phase the auditor received four (4) additional letters. The auditor interviewed several inmates that wrote letters to the auditor during the on-site phase of the audit as further follow-up to their correspondence. The auditor was not able to interview inmates that were in quarantine and isolation because of COVID-19 for further follow-up.

On-Site Phase

On February 21, 2021, the audit team met with MCSP PREA Compliance Manager, MCSP assigned Investigative Services Unit (ISU) escort staff and CDCR PREA support team at MCSP to begin the on-site review. MCSP had an inmate population of 3,855 on February 21, 2021. It should be noted that due to the COVID-19 pandemic, the following housing units were not able to be toured as due to their quarantine or isolation status: Facility A (A2, A3, and A4); Facility B (B7 and B10); Facility C (C11); Facility D (D18); and Facility E (E19). These steps were taken to keep the PREA Audit team, MCSP 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. Areas that could not be toured due to their quarantine or isolation status as there was a high probability of infection of the Covid-19 virus were photographed. Photos consisted of entrances, cell doors, showers, and toilets from different angles to see when a staff member walks in or by the cells with toilets and showers to include angels from where staff are posted.

The audit team conducted a facility tour of the MCSP Infill Complex (MCIC) that consisted of Facility D and E. MCIC is located with the grounds of MCSP and is enclosed by a double cyclone perimeter fencing with an electrified fence. Each facility is self-sufficient with individual program and recreational areas, education, vocations, and basic operation functions for inmates and staff. The following areas were toured in each facility: Program Office (Captain, Lieutenant, Sergeant, Correctional Counselor offices, Committee Room and Classrooms); Hobby Shop, Chapel, Library, Education, Media Center, Visiting, Canteen, Laundry, Clinic, Rehabilitative Program Building, Dining Halls and Kitchen. Each Facility (D and E) has three (3) inmate housing units that are identical in structure with all units surrounding a communal recreation area located in the middle of the yard. The recreation area has stationary equipment and outdoor toilets, urinal and sink surrounded by a hip high partition. The inmate restroom on the recreation yards of Facility D and E were identified for corrective action due to opposite gender viewing concerns as when approaching or fronting the area you can see the toilet and inmate's may be exposed to opposite gender viewing. The inmate restrooms in the Clinic and Laundry areas on Facility D and E were also identified for corrective action due to opposite gender viewing concerns. The Canteen and Laundry areas of Facility D and E were identified for corrective action due to blind spots created by shelving placements.

The housing units on Facility D and E consist of two-tiered, dormitory style housing. Each housing unit has a central staff control area with that maintains door controls, housing intercom and monitors for cameras (6-PTZ cameras) that are in each pod, and general exterior building cameras. Surrounding each central staff control area are mental health meeting rooms, medical room, and staff restrooms. Each housing unit contains four (4) pods labeled A, B, C and D that have a total of 44 dorm-like rooms. The 1st tier of each pod has five (5) dorm-like rooms that can house up to six (6) inmates in each room. The 2nd tier has six (6) dorm-like rooms that can house up to six (6) inmates in each room. Each dorm room includes a sink and toilet that includes a metal privacy screen. Each pod can house up to 66 inmates for a total of 264 inmates per housing unit. Each pod has a common TV area, two program rooms, janitorial closet, bulletin boards with miscellaneous memos, PREA and inmate information, and two inmate phones and several single person showers. The audit team conducted an onsite review of Housing Units D16, D17, E20 and E21, the remaining housing units of D18 and E19 were on quarantine/isolation status during the onsite period. During the onsite review of Facility E housing units, it was observed by the audit team that inmates create "curtains" with their bed linens that were hung up on lines in the cells that created tent like structures around the beds. These curtains create blind spots in the dorm rooms.

The Rehabilitative Programming building on Facility D consist of the Work Change, Vocational Dining, Building Maintenance, Plant Operations and Welding. Blind spots were identified for corrective action in the Building Maintenance caged workshop, Plant Operations electricians work cage, and Welding area. Opposite gender viewing concerns were identified for corrective action in the Work Change and Vocational Dining areas.

The audit team continued with a facility tour of the Minimum Support Facility (MSF) which is located outside the secured perimeter of the main MCSP facility. The MSF consist of two, two story open dorms. Each dorm has a common area that has a staff office, miscellaneous office, laundry cage with a washer and dryer and inmate telephones. Each dorm has inmate restrooms and shower areas with moveable privacy screens to protect from opposite gender viewing. Additionally, the following areas of the MSF were also toured: Program Office (Staff offices, Committee Room, Sergeant and Correctional Counselor Offices, Holding Cells), Clinic, Library, Dining Hall and Kitchen. Blind spots were identified for corrective action in the MSP library that are created by shelving placements.

On February 22, 2021, the audit team met with MCSP key staff to include PREA Compliance Manager and the CDCR PREA support team and continued with the facility site review. The audit team along with assigned escorts continued with the site review of the facility and

interviews with staff and inmates. The audit team conducted a site review of Facility A, B and C. Facility A, B, and C are identical in their 270-degree design, two-tiered, with 50 cells per tier (maximum double occupancy). Each housing unit on Facility A, B and C has individual toilets in each cell and three individual use shows on each tier. Each housing unit also has a control booth on the second tier and can view the entire housing unit.

Facility A consist of 5 housing units (A1, A2, A3, A4 and A5), Program Offices, Chapel, Education, Clinic, Dining Hall, Work Change, CALPIA fabric production, CALPIA coffee roasting plant, Laundry, Canteen and Visiting area. The audit team conducted an onsite review of Housing Units A1 and A5, the remaining housing units A2, A3, A4 and Gym were on quarantine/isolation status during the onsite period. The windows to the inmate work change area and CALPIA fabric productions inmate restrooms were identified for corrective action due to opposite gender viewing concerns. These areas were corrected prior to the completion of the onsite phase. Additionally, the work change strip out area is under monitoring by a CCTV and camera and mitigations were made onsite to move the location where the camera is unable to view a strip search/change out.

Facility B consist of 5 housing units (B6, B7, B8, B9 and B10), Program Offices, Chapel, Education, Clinic, Kitchen, Dining Hall, Gym, Appeals Office, and Vocations area. The audit team conducted an onsite review of Housing Units B6, B8 and B9, the remaining housing units (B7 and B10) were on quarantine/isolation status during the onsite period. Blind spots were identified and recommended for corrective action in the Chapel, Facility Captain's office, Vocation's chemical sterile room, and Kitchen dry storage area.

Facility C consist of 5 housing units (C11, C12, C13, C14 and C15), Program Offices, Visitation, Chapel, Education, Clinical, Canteen, Kitchen, Dining Hall, Gym, Work Change, Vocation and Plant Operations. The Vocation and Plant Operations consist of the CALPIA meat processing plant, vocations electronics, CALPIA laundry, Office services/Computer related technology and Literacy, and Computer and Programming officer (staff only). The CALPIA vocation and plant operations are is also monitored by approximately 50 cameras. The audit team conducted an onsite review of Housing Units C12, C13, C14 and C15, the remaining housing units (C11) and gymnasium were on quarantine/isolation status during the onsite period. Housing Unit C12 is the Administrative Segregation housing unit and has its own inmate recreation are that consist of 20 walk alone cells with an officer assigned to monitor them. Blind spots were identified for corrective action in the Plant Operations office and Mental Health office as staff had coverings (paper or blinds) on their windows. The papers covering the windows in the Mental Health Office were removed onsite. Corrective action was also identified for inmate restrooms in the Education area, Segregation clinic, Medical group holding cell, and in the Segregation Unit walk alone cells for opposite gender viewing concerns. The work change area was also identified for corrective action for opposite gender viewing concerns as the area where the strip searches occur has a PTZ camera that can view the area and can also be seen in the mirror that is in the upper corner. Additionally, it was recommended that when strip searches are ongoing, the sign that notifies staff that strip searches are in progress should be placed outside of the door entry rather than inside.

On February 23, 2021, the audit team met with MCSP key staff to include PREA Compliance Manager and the CDCR PREA support team and continued with the facility site review. The audit team along with assigned escorts continued with the site review of the facility and interviews with staff and inmates. The audit team toured the Firehouse, CALPIA Warehouse, Inmate Work Labor (IWL) area, and returned to Facility D and E to complete interviews. The Firehouse is located outside the secured perimeter of the main MCSP facility. The Firehouse has an engine bay for the fire truck, officers for the Fire Chief and administrative services and living quarters. The living quarters have separate areas for the inmate firefighters and the Fire Captains. There are single use toilets and showers for the inmates and staff. The Fire Chief is a female that is onsite at the Firehouse during normal business hours and inmates are not allowed the offices or living quarters when she is onsite.

The CALPIA Warehouse is located next to the Firehouse. The warehouse has no cameras and inmates are supervised and escorted by their supervisors throughout the warehouse. When inmates are not actively working, they are to sit in the break area that is un full view of staff and not authorized to linger around other areas of the warehouse. The CALPIA maintenance cage in the warehouse was identified as a blind sport and recommended for corrective action by resituating the mirror to properly mitigate the blind spot.

The Inmate Work Labor (IWL) is located next to the CALPIA main warehouse. The IWL is managed by CDCR in conjunction with the California State Building and Constructions Trade Council. The IWL area is a secured yard with a portable bathroom that is no longer being used by inmates. The IWL area has two trailers that serves as the inmate work line supervisor area and tool cages and another for the supervisor's office space. There are several mental containers on the IWL yard that secure supplies and work items, stacks or metal sheets and beams.

On February 24, 2021, the audit team observed the intake process at Receiving and Release (R&R). The Receiving and Release contains four (4) large holding cells for multiple inmates. All new admissions to MCSP are issued an inmate handbook that notifies them of the rules and regulations of CDCR/MCSP, to include PREA information and reporting information. Inmate handbooks are provided in English and Spanish languages. While in the holding cells, the newly admitted inmates are shown the PREA education video prior to their placement to their assigned housing unit. Not all cells had moveable privacy screens for the toilet when in use, specifically Cells 3 and 4. This was identified for corrective action due to opposite gender viewing concerns.

The audit team conducted an onsite review of the Correctional Treatment Center (CTC) that is located just outside of Facility B. The CTC houses the triage and treatment area, on-site specialty services, medical records, telemedicine, laboratory, radiology, and pharmacy for both the inpatient and outpatient population. The CTC also consist of an inpatient unit with ten (10) licensed beds (2 medical beds and 8 mental health crisis beds).

On February 25, 2021, the audit team met with MCSP key staff to include PREA Compliance Manager and the CDCR PREA support team and continued with the facility site review. The audit team along with assigned escorts continued with the site review of the facility and interviews with staff and inmates. The audit team returned to the MSF to tour areas that were not observed during the first tour, which consisted of the Laundry and Canteen areas. Additionally, the audit team continued with interviews of staff and inmates.

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

MCSP reported a total of 73 allegations of sexual abuse and sexual harassment in the 12-month period preceding the audit period as follows:

- Total number of allegations -73
 - Allegations reported at MCSP -54
 - Allegations reported at MCSP to have occurred at other institutions -6
 - Allegations reported at other facilities to have occurred at MCSP -13
- · Type of allegations.
 - Staff on Inmate Sexual Abuse 8
 - Inmate on Inmate Sexual Abuse –47
 - Staff on Inmate Sexual Harassment 12
 - Inmate on Inmate Sexual Harassment -6
- · Dispositions:
 - Substantiated 3
 - Unsubstantiated 40
 - ∘ Unfounded 17
 - Pending 14
 - *Note: One PREA investigation had two alleged suspects in which one suspect was found to be substantiated and the other suspect unsubstantiated.

The following list compares the required category/numbers of interviews versus the actual category/numbers of interviews conducted for the inmate population size of MCSP. February 21, 2021, there were 3,855 inmates at MCSP. There were no identified youthful inmates or inmates who were in segregated housing for high risk of sexual victimization at MCSP during the onsite phase. This was corroborated through the facility tour, interviews with the MCSP PREA Compliance Manager, Intake Staff and listing of inmates. All other inmates were randomly selected by the audit team based on list provided by the facility and ensured a diversity of inmates based on age, ethnicity, and lengths of stay at the facility. Random and Targeted Interviews were conducted in one on one and in available rooms or office space within the housing units and throughout the facility to ensure privacy. Throughout the on-site review, the audit team was able to also conduct informal interviews with inmates.

Category of Inmates	Number of Interviews Conducted
Random Inmates (Total)	28
Targeted Inmates (Total)	30
Total Inmates Interviewed	58
Breakdown of Targeted Inmates	
Youthful Inmates	N/A
Inmates with Physical Disability	4
Inmates who are Blind, Deaf, or Hard of Hearing	2
Inmates who are LEP	5
Inmates with a Cognitive Disability	2
Inmates who identify as Lesbian, Gay or Bisexual	3
Inmates who identify as Transgender or Intersex	5
Inmates in Segregated Housing for High Risk or Sexual Victimization	N/A
Inmates Who Reported Sexual Abuse	6
Inmates Who Reported Sexual Vicitimization During Risk Screening	3
Total Targeted Inmates Interviewed	30

MCSP has approximately 1,679 staff, 859 contractors and 45 volunteers at the facility. 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 MCSP and job titles. Throughout the on-site review, the audit team was able to also conduct informal interviews with staff.

The audit team conducted interviews with 63 staff members. It should be noted that every staff member and volunteer / contractor serve in more than one role. All employees are mandated reporters, and most are first responders. Specialized staff interviewed may serve in more than one role and were responsible for more than one of the Specialized staff duties and as a result some interviews conducted with Specialized staff included multiple interview questionnaires.

Category of Staff	Number of Interviews Conducted
Random Staff Interview Protocols (Total)	24
Specialized Staff Interview Protocols (Total)	59
Total Staff Interview Protocols	83
Breakdown of Specialized Staff Interviews	
Agency Head (Designee)	1
Warden (Designee)	1
PREA Coodinator	1
PREA Compliance Manager	1
Agency Contract Administrator	1
Intermediate-or-Higher level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment	5
Line staff who supervise youthful inmates, if any	N/A
Education staff who work with youthful inmates, if any	N/A
Program staff who work with youthful inmates, if any	N/A
Medical and Mental Health Staff	9
Non-medical staff involved in cross gender strip or visual searches	N/A
Administrative (human resources) staff	2
SAFE and/or SANE staff	1
Volunteers and Contractors who have contact with inmates	6
Investigation taff	4
Staff who preform screening for risk of victimization and abusiveness	4
Staff who supervise inmates in segregated housing	2
Staff on sexual abuse incident review team	1
Designated staff member cgarged with monitoring retaliation	2
First responders, security and non-security	14
Intake staff	2
Appeals (Grievance) staff	1
Mailroom staff	1
Total Specialized staff interviews* *Note: Pandam and Specialized staff interviewed were responsible for	59

*Note: Random and Specialized staff interviewed were responsible for more than one of the specialized staff duties; therefore, the number of specialized staff interviews present in the table above exceeds that total number of staff interviewed.

The audit team tested the inmate phone system in several areas to contact Operation Care and the Office of the Inspector General, as listed on the posters throughout the MCSP facility and all calls were processed, and the facility was notified of a report being made in a timely manner. The audit team recommended that the PREA hotline and reporting numbers be placed near the inmate phones to allow for better access and to help protect the confidentiality of reporting by inmates.

Throughout the on-site review, PREA Audit notices and posters were posted throughout the entire facility in English and Spanish and the audit team observed consistent announcements of the opposite gender notification, when entering housing or living units. The unannounced rounds by intermediation and higher-level supervisors were also verified by reviewing logbooks and through interviews with staff.

On February 25, 2021, a debrief with MCSP key administrators to include PREA Compliance Manager and the CDCR PREA support team was conducted with a summary of preliminary findings relating to the PREA standards being discussed. Interviews with staff and inmates throughout the on-site phase indicated that both have been informed and are knowledgeable about PREA. CDCR and MCSP started to work with the auditor on areas identified in the preliminary discussion that required corrective action prior to the interim report.

The Interim Report was provided to the facility on April 12, 2021, triggering the corrective action period. Ten (10) standards required corrective action:

- Standard 115.13 Supervision and Monitoring
- Standard 115.15 Limits to Cross Gender Viewing
- Standard 115.17 Hiring and Promotion Decisions
- Standard 115.31 Employee Training
- Standard 115.33 Inmate Education
- Standard 115.41 Screening for Risk of Victimization and Abusiveness
- Standard 115.41 Use of Screening Information
- Standard 115.67 Agency Protection Against Retaliation
- Standard 115.73 Reporting to Inmates
- Standard 115.81 Medical and Mental Health Screenings; History of Sexual Abuse

During the corrective action period, the facility PREA Compliance Manager provided the auditor with all requested information and documentation necessary to show compliance with identified standards. The corrective action period ended on October 9, 2021.

AUDIT FINDINGS

Facility Characteristics:

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

Mule Creek State Prison (MCSP) is state prison for male inmates located in Ione, California. Construction for MCSP broke ground in late 1984 and MCSP was officially completed and operational by 1987. MCSP employs over 1,600 employees who protect and provide medical care to approximately 3,867 inmates. MCSP is comprised of 6 Facilities/Yards (Facility A, B, C, D, E and Minimum Support Facility) with a total of 23 housing units. The main facility consists of Facility A, B and C. The Infill Complex (MCIC) consist of Facility D and E.

Facility A is a Level IV Special Needs Yard (SNY) that houses inmates that receive Enhanced Outpatient (EOP), Correctional Clinical Case Management Services (CCCMS) and general population SNY. Facility A consists of five housing units (A1, A2, A3, A4, and A5) that are 270-degree design, two-tiered, with 50 cells per tier (maximum double occupancy). Units A1 through A4 hours Level IV SNY inmates; and Unit A5 houses Level IV SNY Enhanced Outpatient program (EOP) inmates.

Facility B is a Level III SNY that houses inmates that received Outpatient (OP), Enhanced Outpatient (EOP) and Developmentally Disabled Program (DDP) services, and general population SNY. Facility B consists of five housing units (B6, B7, B8, B9, and B10) that are 270-degree design, two-tiered, with 50 cells per tier (maximum double occupancy). Unit B6 houses Level III SNY Outpatient program (OP) inmates; Unit B7 houses Level III SNY Enhanced Outpatient program (EOP) inmates; Unit B8 houses Level III SNY Developmentally disabled program (DDP) inmates; and Unit B9 and B10 house Level III SNY inmates.

Facility C is a Level III SNY that houses inmates that receive Correctional Clinical Case Management Services (CCCMS) and general population SNY. Facility C consists of five housing units that are 270-degree design, two-tiered, with 50 cells per tier (maximum double occupancy). Housing Units C11, C14 and C15 houses Level III SNY inmates. Housing Unit C12 houses the Administrative Segregation Unit. The Administrative Segregation Unit also consist of 16 holding cells that are used for video court and inmate telephone calls. Housing Unit C13 houses general population SNY inmates and is also used as a Temporary Mental Health Unit (TMHU) for inmates that need immediate observation as well as an overflow for suicide watch mental health crisis beds. Additionally, several cells are utilized for "Intake" for inmates that need monitoring for 72 hours upon arrival to MCSP. Unit C12 (Administrative Segregation) has its own inmate recreation area that consist of 20 walk alone cells.

Facilities A, B and C each have its own programming building (consisting of education, chapel, library, canteen, health clinic and dining hall), gym and recreation area. The main MCSP facility also consist of the Reception and Release (R&R) building. The R&R unit has four (4) cells that are used through the intake process. Cells 1 & 2 are used for intakes and the PREA video is played on a TV that is fronting the two cells. Cells 3 & 4 are used to facility property issuance and holding for transports. Each cell has an individual toilet for use while inmates are waiting in R&R.

The MCSP Infill Complex (MCIC) is located above the main MCSP facility and covers approximately 60 acres and includes six housing units. The MCIC consist of two autonomous yards (Facility D and E) with three housing units per yard. Each facility/yard has its own recreational area. The MCIC is under the authority and operation of MCSP but functions independently and is self-contained with all necessary related support buildings and inmate programming space to meet the needs of the inmates. MCIC has approximately 224 cameras with housing common areas, exterior buildings, entrance/exit gates and recreation/yard areas.

The housing units on Facility D and E consist of two-tiered, dormitory style housing. Each housing unit has a central staff control area with that maintains door controls, housing intercom and monitors for cameras (6-PTZ cameras) that are in each pod, and general exterior building cameras. Surrounding each central staff control area are mental health meeting rooms, medical room, and staff restrooms. Each housing unit contains four (4) pods labeled A, B, C and D that have a total of 44 dorm-like rooms. The 1st tier of each pod has five (5) dorm-like rooms that can house up to six (6) inmates in each room. The 2nd tier has six (6) dorm-like rooms that can house up to six (6) inmates in each room. Each dorm room includes a sink and toilet that includes a metal privacy screen. Each pod can house up to 66 inmates for a total of 264 inmates per housing unit. Each pod has a common TV area, two program rooms, janitorial closet, bulletin boards with miscellaneous memos, PREA and inmate information, and two inmate phones and several single person showers.

MCIC has its separate Receiving and Release (R&R) from the main MCSP facility. Due to the COVID-19 pandemic, the MCIC R&R was converted for medical use to house inmates that tested positive for COVID-19 that need oxygen support.

Facility D houses Level II SNY inmates. Housing unit (D18) is dedicated to housing Enhanced Outpatient Program (EOP) and Developmentally Disabled Program (DDP) inmates who require more mental health care services. Facility E houses Level II SNY inmates. Housing unit (E20) houses the POOCH program in which inmates house, care for and train future service dogs.

The Minimum Support Facility (MSF) is a separate facility within the grounds of the MCSP facility and has a single barbwire fence as its perimeter. MSF consist of two, two story open dorms and the Firehouse. MSF houses Level I and II inmates who primarily participate in vocations such as CALPIA, MCSP Support Services, Off Reservation work detail, and facility clerical support. The MSF has its own

education, health clinic, library, canteen, laundry, and dining hall. There are eight (8) sections within each dorm consisting of Sections A, B, C and D on the lower level and Sections E, F, G and H on the upper level. Each section has six (6) cubicles and each cubicle can house 12 inmates, double bunked. However, currently due to the COVID-19 pandemic, only five (5) inmates are housed in each section for health and safety precautions. There are centralized showers and restrooms on each level of the dorm (upper and lower).

The Firehouse sits outside the perimeter fence of the main MCSP facility towards the operational warehouse. The Firehouse consist if an engine bay for the fire truck, offices for the Fire Chief and administrative services, a main living room, and an open dorm room for inmate firefighters and Fire Captain living quarters. The Firehouse can house up to six (6) inmate firefighters and one (1) inmate clerk. However, due to the COVID-19 pandemic, only three (3) inmate firefighters and one (1) inmate clerk are housed in the Firehouse at this time for health and safety precautions. The Firehouse has a single use bathroom and shower for inmates to use.

Each Facility yard has its own stand-alone medical clinic. The medical clinics are staffed with two to three primary care nurses and two primary care physicians and are in operation Monday through Friday, excluding holidays. Inmate are seen in the facility medical clinics for non-emergent medical issues. MCSP has a Central Health building located in the center of the institution and houses the Triage and Treatment Area (TTA), on-site specialty services, Medical Records, Telemedicine, Laboratory, Radiology, Pharmacy for both the inpatient and outpatient population. The TTA provides urgent care services to inmates. Additionally, the Central Health building houses the Correctional Treatment Center (CTC), which is an inpatient unit that is comprised of ten licensed beds (two medical beds and eight mental health crisis beds). Each Facility yard also has its own dental operatory, designated dental laboratory/sterilization area. The dental clinic is in operation Monday through Friday, excluding holidays. MCSP dental unit has a dentist on call during non-clinic hours for any dental emergencies.

Approximately 2,286 inmates at MCSP receive mental health services. There are 723 Enhanced Outpatient (EOP) and 1,552 Correctional Clinical Case Management Services (CCCMS) inmates at this time. Mental health services are provided on all yards for every custody level and on-call providers are available during non-business hours. On-site crisis coverage is also provided until midnight Monday through Thursday and until 2:00am Friday through Saturday. Mental Health treatment is provided at the Mental Health Crisis Bed, Enhanced Outpatient and Correctional Clinical Case Management Services level of care. Treatment is provided to general population inmates as well. EOP inmates participate in ten hours of group therapy weekly and CCCMS inmates are offered group therapy as well. MCSP has eight beds available for temporary/alternative housing while an inmate awaits placement into a crisis bed in addition to the eight Mental Health Crisis Beds in the CTC.

The California Prison Industry Authority (CALPIA) is a State-organized agency that provides productive work assignments to the inmates at MCSP. CALPIA's program goal is to produce trained offenders that have a job skill, good work habits, basic education, and job support in the community when they are released from prison. CALPIA provides meat processing, coffee roasting, fabric products, laundry operations, general facilities maintenance and repairs, food and beverage packaging enterprise, and healthcare facilities maintenance throughout MCSP. The operations are located throughout the facility as follows:

- Facility A Coffee Roasting and Fabric Productions (Sewing)
- Facility B Fabric Productions (Sewing)
- Facility C Meat Processing, Maintenance and Repairs and Laundry
- Facility D Healthcare Facilities Maintenance and Welding
- Facility E Healthcare Facilities Maintenance and Food and Beverage Packaging

The CALPIA main warehouse is located outside the secured perimeter of the main MCSP facility, past the Firehouse. The warehouse has no cameras and inmates are supervised and escorted by their supervisors throughout the warehouse. The Inmate Work Labor (IWL) is located next to the CALPIA main warehouse. The IWL is managed by CDCR in conjunction with the California State Building and Constructions Trade Council. The IWL area is a secured yard with a portable bathroom that is no longer being used by inmates. The IWL area has two trailers that serves as the inmate work line supervisor area and tool cages and another for the supervisor's office space. There are several mental containers on the IWL yard that secure supplies and work items, stacks or metal sheets and beams.

MCSP offers educational and vocational programming to its inmates through Creekside Adult School. Creekside Adult School currently has eight (8) academic classes covering grad levels 1 through 9 and offers inmates the ability to obtain their GED. Creekside Adult School also offers college programs through extended learning, distant learning, and on-site learning.

MCSP has a commitment to inmate rehabilitative programming and over the last several years has expanded its Inmate Activity Groups (IAGS). MCSP offers 31 various IAGS in the areas of 12 Step Recovery Groups. Peer Support Groups, Victim Impact Programming, Evidence Based Group Programming, Innovation Grant Programs and Collaborative Community Based Groups. As part of the Innovation Group Programs, MCSP has received several volunteer led programs to include Arts in Corrections, Alternatives to Violence Project (AVP), Concerned About Recovery Education (CARE), Guiding Rage into Power (GRIP), Buddhism Education/Medication Program, Paws for Life and Prisoner's Overcoming Obstacles and Creating Hope (POOCH). Paws for Life and POOCH are rehabilitative canine programs in which inmates, selected through classification, are assigned to a specific dog for the purpose of bonding, training and care in order to train the dogs for placement with individuals with autism and veterans with disabilities or for adoption.

However, it should be noted that as a result of the COVID-19 pandemic, many inmate programs and work assignments were placed on hold or drastically downsized and educational programming was facilitated via correspondence rather than in-person for the health and safety of

the inmates, staff and volunteers.

MCSP has an Inmate Advisory Council (IAC). The council is covered by CDCR California Rules and Regulations Title 15 Section 3230. The IAC is an organization established by CDCR to give inmates the opportunity to have a voice on issues that affect the general population. The IAC representatives serves as a liaison with facility officials and distributes information concerning events at MCSP. Each housing unit has four elected representatives, one from each ethnic group (Hispanic, African American, White, and Other). These representatives form the general council, which elects a Chairman/President and Vice Chairman/Vice President and appoints four other executive body members. IAC meetings are scheduled in each facility and are open to all inmates. The IAC general council members are given the opportunity to meet with all administrative and custodial officials on a regular basis to express and advocate the concerns of the inmates in the facility. Emergency and PREA related issues may be brought to the attention of staff members at any time and do not need to go through the IAC.

MCSP is currently authorized to have 1,715 overall staffing positions as follows: Custody staff/Peace Officers (856); Non-Custody/Support staff (110); Executive staff (12); Health Care (496), Education (64), CALPIA (41) and Plant Operations/Food Service (136). MCSP provides direct and indirect supervision of inmates. Security rounds are conducted throughout each shift by custody staff assigned to the specific area.

MCSP has a dedicated Investigation Services Unit (ISU) that is comprised of specialized investigators that monitor and investigate all suspicious activities within MCSP to include Strategic Threat Groups (STG), narcotics, contraband, and PREA. ISU staff are proficient in crime scene preservation and processing, evidence collection and conduct comprehensive investigations involving felony activities. ISU has a responsibility to refer all criminal misconduct occurring on CDCR facility property to the Amador County District Attorney's Office for possible prosecution.

AUDIT FINDINGS

Summary of Audit Findings:

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

Number of standards exceeded:	0
Number of standards met:	45
Number of standards not met:	0

Number of Standards Exceeded: 0

Number of Standards Met: 45

Number of Standards Not Met: 0

Summary of Corrective Action:

Standard 115.13 – Supervision and Monitoring: The Interim Report identified corrective action by MCSP ensuring that areas identified with blind spots or areas where staff and inmates may be isolated are addressed and adequate supervision and monitoring is provided, as indicated in the staff plan.

Standard 115.15 – Limits to Cross-Gender Viewing and Searches: The Interim Report identified corrective action by MCSP ensuring that all areas identified as having opposite gender viewing concerns are addressed to ensure that offenders are able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite biological sex viewing their breast, buttocks or genitalia.

Standard 115.17 – Hiring and Promotion Decisions: The Interim Report identified corrective action by MCPS ensuring a practice for employee and contractor files to include the CDCR Supplemental Application for all CDCR Employees (Form 1951, Rev. 07/18) for all new hires, promotions and transfers.

Standard 115.31 – Employee Training: The Interim Report identified corrective action by CDCR/MCSP ensuring that all MCSP staff complete and are up to date with annual PREA training.

Standard 115.33 – Inmate Education: The Interim Report identified corrective action by MCSP ensuring that, 1) all inmates are provided with inmate education on PREA, and 2) that inmate education of PREA is documented on the General Chrono- CDCR 128B form and scanned into ERMS.

Standard 115.41 – Screening for Risk of Victimization and Abusiveness: The Interim Report identified corrective action by MCSP ensuring that all inmates are reassessed within 30 days after arrival to MCSP and that such reassessment is properly documented.

Standard 115.42 – Use of Screening Information: The Interim Report identified corrective action by MCSP ensuring that all inmates are reassessed, within 30 days after arrival at MCSP and that MCSP must demonstrate that the information from the risk screening required by Standard 115.41 is taken into consideration for inmate housing, bed, work, education and programming assignments. Additionally, MCSP ensured that biannual reviews are completed and documented biannually for transgender inmates.

Standard 115.67 – Agency Protection Against Retaliation: The Interim Report identified corrective action by MCSP ensuring and documenting that the monitoring of the conduct and treatment of inmates or employees who reported a PREA allegation to ensure there are no changes that may suggest retaliation are initiated immediately following the report of a sexual abuse, sexual harassment or staff sexual misconduct incident.

Standard 115.73 – Reporting to Inmates: The Interim Report idenfitied corrective action by MCSP ensuring and documenting that the alleged victim, 1) is provided written notification of the findings as to whether the allegation has been substantiated, unsubstantiated, or unfounded, and 2) be informed unless determined to be unfounded, whenever the alleged abused is no longer posted within the inmate's unit, is no longer employed at the facility, and/or has been indicted or convicted of the alleged sexual miscondut.

Standard 115.81 – Medical and Mental Health Screenings; History of Sexual Abuse: The Interim Report identified corrective action by MCSP, 1) ensuring that all inmates who disclose either previous sexual abuse or previous perpetrating sexual abuse, will be immediately offered a follow-up meeting with a mental health practitioner, and 2) ensuring documentation of all mental health referrals for inmates who disclose either previous sexual abuse or previously perpetrating sexual abuse.

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.

22 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department Operations Manual (DOM)
 - 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:
 - 1. CDCR PREA Coordinator
 - 2. MCSP PREA Compliance Manager

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.

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, she directly oversees 35 facility PREA Compliance Managers and 1 PREA Compliance Manager who monitors CDCR contracted facilities.

115.11(c) –CDCR and MCSP has designated a Correctional Captain as the facility PREA Compliance Manager (PCM). MCSP PREA Compliance Manager reports that he has sufficient time and authority to coordinate the facility's efforts to comply with the PREA.

CDCR and MCSP has shown that there is a zero-tolerance policy for sexual abuse and sexual harassment, 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 Auditor Overall Determination: Meets Standard

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department of Operations Manual
 - 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:

Auditor Discussion

1. CDCR Agency Contract Administrator

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. A CDCR Captain oversees the CBU. CDCR contracted with seven (7) facilities for the placement of CDCR inmates with The GEO Group Incorporated, City of Delano, City of Shafter, and City of Taft. As of January 1, 2021, the CDCR Agency Contract Administrator reported that due to the large decrease in the CDCR inamte population, six (6) contracts have been terminated and only one contracted facility remains at this time with a tentative closure scheduled for May 2021.

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 which 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. Contract agreements for the contracted facilities were reviewed by the auditor and confirm that contractors are required to adopt and comply with PREA standards.

115.12(b) – Of the seven (7) contracted facilities for the placement of CDCR inmates, all seven of the facilities have successfully completed a PREA audit. Contract language also contains provisions for contract monitoring to monitor the Contractor's performance under each agreement or contract. CDCR's CBU Captain reported that his unit conducts monthly on-site inspections for the in-state facilities. Further, he reported that each contracted agency has a PREA Coordinator and 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 CBU Captain, 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. CDCR Policy Department Operations Manual (DOM)
 - 1. Article 26, American Correctional Association Standards
 - 2. Chapter 5, Article 44, Section 54040 Prison Rape Elimination Policy
- 2. MCSP Staffing Plan Analysis Fiscal Year 2020 2021
- 3. MCSP Standardized Staffing Plan
- 4. MCSP Daily Activity Reports
- 5. MCSP Inmate Population Reports
- 6. CDCR PREA Annual Data Collection Tool and Staffing Plan Review for MCSP 2020
- 7. On-site review of housing areas and program areas
- 8. On-site review of security log books
- 9. Interview with the following:
 - 1. CDCR PREA Coordinator
 - 2. MCSP Warden
 - 3. MCSP PREA Compliance Manager
 - 4. MCSP Random Intermediation or Higher-Level Facility Staff

115.13(a) - CDCR has developed, documented and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate staffing levels, video monitoring, and considers factors identified in section a. 1-11. The average daily population for MCSP since August 2012 has been 4,028 and the average daily population on which the staffing plan was predicated for is 4,028. The facility provided the auditor with the most recent staffing plan which covered the period from fiscal year 2020 to 2021. Interviews with the CDCR PREA Coordinator and the MCSP Warden confirmed that MCSP regularly develops a staffing plan and adequate staffing levels to protect inmates against sexual abuse are considered in the development of the plan. The auditor reviewed the MCSP Staffing Plan Analysis for Fiscal Year 2020 to 2021 and confirmed that the staff plan includes a detailed analysis addressing items (1) through (11).

This substandard required corrective action as while MCSP did have a staffing plan in place to address items (1) through (11), during the on-site review blind spots were identified in the following: Facility B - Chapel, Facility Captain's office, Vocation's chemical sterile room, and Kitchen dry storage area; Facility C - Plant Operations office and Mental Health office as staff had coverings (paper or blinds) on their windows; Facility D and E - Facility D Maintenance caged workshop, Plant Operations electricians work cage, and Welding area; Facility D and E Canteen and Laundry; and MSF library that were created by shelving placement. Additionally, it was observed in Facility E housing units by the audit team that inmates create "curtains" with their bed linens that were hung up on lines in the cells that created tent like structures around the beds. These curtains created blind spots in the dorm rooms. Staff confirmed that inmates are not allowed to have window coverings and/or makeshift curtains in their cells.

MCSP provided training on supervision and monitoring to all Facility E custody staff to remind staff of the Warden's directive of the "zero-tolerance" policy for cell window coverings or any obstructions in cells which do not allow or restrict staff from maintaining a clear line of sight into the cells to ensure safety for all inmates and maintain security. MCSP provided the auditor with verification of training through training logs (CDCR 844). Further, MCSP provided Rule Violation Reports (RVRs) for inmates who were found to have window coverings and/or makeshift curtains up in their cells. MCSP was able to address and correct all identified blind spots where recommended and submitted verification through photo documentation. MCSP has demonstrated compliance with this substandard.

115.13(b) – MCSP reported to have deviations from the staffing plan in the last twelve (12) months as a result of riots, weather, homicides and COVID-19. During the interview with the MCSP Warden, he reported that MCSP 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, MCSP Warden indicated that if the staffing plan is deviated from it is noted on the daily activity report and reported to CDCR Headquarters. The auditor reviewed a sample of the MCSP daily activity reports that confirmed this practice.

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 MCSP annual data collection and staffing plan along with interviews with the

CDCR PREA Coordinator, MCSP Warden and MCSP PREA Compliance Manager demonstrate and confirm that MCSP 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 MCSP, 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 confirmedthrough the auditor's review of unit logs books.

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

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP 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 CONPASS Low Dose Scanner Dated February 8, 2019
- 4. CDCR Office of Training and Development Searches and Inmate Property Curriculum
- 5. CDCR Office of Training and Development Transgender Inmates Curriculum
- MCSP Training Logs
- 7. Interviews with the following:
 - 1. MCSP Intake staff
 - 2. MCSP Random staff
 - 3. MCSP 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 a 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 CONPASS 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 MCSP 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. Review of training curriculum, written policy, and interviews with random staff and inmate confirm that MCSP does not conduct cross-gender strip or cross-gender visual body cavity searches of inmates. Additionally, MCSP 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 inmate shall be conducted by female corrections staff only, except in emergency situations and under no circumstances shall male correctional staff perform non-emergency clothed body searches of female inmates. MCSP is a male facility, therefore this subsection is not applicable.

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. MCSP is a male facility and did not have any incidents of cross gender strip searches or visual body cavity searches with the last 12 months.

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. During the on-site phase the auditor observed consistent announcements of the opposite gender notification, when entering housing or living units. Interviews with random staff and inmates confirmed that opposite gender announcements are an institutionalized practice at MCSP.

This substandard required corrective action as during the onsite review, the audit team identified several areas of opposite gender viewing concerns in the following: Facility A - windows to the inmate work change area, CALPIA fabric productions inmate restrooms and the work change strip out area is under monitoring by a CCTV and camera; Facility C - inmate restrooms in the Education area, Segregation clinic, Medical group holding cell, Segregation Unit walk alone cells and the inmate restrooms in the Education area, Segregation clinic, Medical group holding cell, Segregation Unit walk alone cells and work change area as the area where the strip searches occur has a PTZ camera that can view the area and can also be seen in the mirror that is in the upper corner; Facility D and E - inmate restrooms on the recreation yards of Facility D and E,

as when approaching or fronting the area you can see the toilet and inmate's may be exposed, and inmate restrooms in the Clinic and Laundry areas on Facility D and E and Facility D Work Change and Vocational Dining areas; CALPIA Warehouse - CALPIA maintenance cage in the warehouse; and Receiving and Release (R&R) - all holding cells (1-4) were recommended to have moveable privacy screen for when the toilet is in use.

Facility A areas identified for corrective action were addressed and mitigations were made and completed onsite to move the location where the camera is unable to view a strip search/change out. Additionally, it was recommended that when strip searches are ongoing in all work change areas, the sign that notifies staff that strip searches are in progress should be placed outside of the door entry rather than inside. MCSP was able to address and place and/or replace modesty screens and change camera placements where recommended, to ensure privacy from opposite gender viewing, and submitted verification through photo documentation. MCSP has demonstrated compliance with this substandard.

115.15(e) – CDCR DOM, Chapter 5, Section 52050.16.7, states if there is an individual going through Receiving and Release (Intake), who self-identifies as transgender or with a gender that seems not to match their biological sex, the search will be conducted by staff of the same biological sex as the inmate to be searched. If an individual's genital status is ambiguous, the search shall be conducted by a staff member that is the same biological sex as indicated in the inmate's records. If staff are unable to determine the genital status through medical records or an interview with the inmate, it will be determined during the standard intake medical evaluation that all inmates received upon admission to the facility. Although the auditor was unable to interview a transgender or intersex inmate during the audit, interviews with random 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, 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 CDCR, Title 15, and Section 3287(b). Interviews with staff and review of training logs and lesson plans confirm that staff have been trained to ensure pat down searches are conducted in a professional and respectful manner.

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Pre-Audit Questionnaire (PAQ)
- 2. California Code of Regulations Title 15
- 3. CDCR Policy Department Operations Manual (DOM)
 - 1. Section 5, 54040.4 Education and Prevention
 - 2. Section 5, 54040.12 Investigation
- 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 (07/01/19 06/30/21)
- 7. CDCR Exectured Contract with Interpreters Unlimted (10/01/19 06/30/22)
- 8. CDCR Executed Contract with Sign Language Interpreting Services, Inc. DBA Wilder Interpreting Service (10/01/19 06/30/22)
- 9. Interviews with the following:
 - 1. CDCR Director of Adult Institutions
 - 2. MCSP Random Staff
 - 3. MCSP Random Inmates with Disabilities/Limited English Proficient

115.16(a) - (b) - California Code of Regulations Title 15 defines effective communication as; providing the inmate, to the extent possible, the means to understand and participate in disciplinary process to the best of their ability. This may be accomplished through reasonable accommodation or assignment of a staff assistant. If the inmate's Test of Adult Basic Education (TABE) score is 4.0 or lower, employees are required to query the inmate to determine whether 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 interpreter, and bilingual interpreter. 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. Appropriate provisions are made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and persons with disabilities. Institutions may consider the use of offender peer educators to enhance the offender population's knowledge and understanding of PREA and sexually transmitted diseases. CDCR has current contracts in place for communication assistance: Sign Language Interpreting Services, Inc. DBA Wilder Interpreting Service, 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, 2019 to June 30, 2021, to provide interpreter services over the telephone, facsimile or internet, for 140 languages to assist CDCR with inmates that are limited English proficient. Interpreter services are available twentyfour (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 MCSP 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 proficient were interviewed and confirmed that tools and aids are present at MCSP 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. Interview with 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 on 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. MCSP 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 MCSP did not utilize inmate interpreters during the twelve-month period. 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 a 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. MCSP 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 Level
- 4. CDCR Supplemental Application CDCR 1951 (Rev. 07/18)
- 5. CDCR Employment Reference Questionnaire CDCR Form 2025
- 6. CDCR Contract Agreement (Exhibit D)
- 7. CDCR Memorandum: Completion of Background Checks Under PREA Dated July 14, 2017
- 8. CDCR Memorandum Re: Standard 115.17(e)1 Dated October 6, 2017
- 9. CDCR Memorandum Re: Personal Identification Card Dated February 26, 2016
- 10. CDCR 2164 Form Live Scan Response Form
- 11. MCSP Human Resource files
- 12. Interviews with the following:
 - 1. MCSP Institutional Personnel Officer (Human Resources)
 - 2. MSP 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, Rev.07/18) must be completed for any applicant, transfers, and promotional opportunities. Section D for Form 1951 includes questions that are specific to PREA and this substandard. In the past twelve (12) months, 246 staff and contractors were hired at MCSP who may have contact with inmates. Interview with the MCSP Institutional Personnel Officer and review of human resource files of new hires and promotions confirm compliance with this process.

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 finger printing alert system, USINS Form I-9, Physical examination report and CDCR Form 1951, Supplemental Application for all CDCR employees. This process is used for internal and external applicants. The Live Scan system allows CDCR 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, date it was completed and the staff that received it. In the past twelve (12) months, MCSP hired 242 staff and contractors who may have contact with inmates. Interview with MCSP Institutional Personnel Officer confirmed this process and the background check process is completed utilizing the CDCR 2164 Form – Live Scan Response Form and Insitutional Reference Checks.

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. In the past twelve (12) months, MCSP hired 22 contractors who may have contact with inmates. Interviews with MCSP Personnel Information Officer and 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 to be Live Scanned (fingerprinted) at the time of hire. The Live Scan system notifies CDCR of any subsequent arrest an employee or contact has in an on-going basis. CDCR memorandum dated February 26, 2016, Personnel Identification Card Issuance states the procedure for issuance of identification cards. The pre-employment procedures found in CDCR DOM 31060.16 apply to all employees, contractor or volunteer. Interviews with MCSP Personnel Information Officer and Community Resources Manager human 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. Prior to signature acknowledge of CDCR Form 1951, it states that the applicant understands and agrees that if material facts are later discovered which are inconsistent with or differ from the facts they furnished before beginning employment, they may be disciplined, up to and including dismissal from State service. California Code of Regulations, Title 15, Section 3401.5, Staff Sexual Misconduct (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.

This standard required corrective action as review of human resource files for transfers were missing the CDCR Supplemental Application for all CDCR Employees (Form 1951, Rev.07/18). MCSP provided documentation of refresher training to personnel staff on this requirement (CDCR 844), a new listing of transfers to the institution, and verification of completed CDCR Supplemental Application for all CDCR Employees (Form 1951, Rev.07/18) to the auditor. MCSP has demonstrated compliance with this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP 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:
	CDCR Director of Adult Institutions
	2. MCSP Warden
	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.
	MCSP has not had any substantial expansions or modifications to its existing facilities since it's last PREA audit. Interviews
	with the CDCR Director of Adult Institutions and MCSP Warden affirmed that CDCR/MCSP take into consideration ensuring
	a level of privacy for inmates in addition to protecting inmates from sexual abuse. MCSP Warden further stated that every
	PREA allegation is reviewed and recommendations have been made to the hire authority for more video monitoring
	technology to be installed throughout the facility to assist in the facility's ability to protect inmates from sexual abuse.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP 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 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 Operation Care Memorandum of Understanding (MOU)
- 8. MCSP Additional Services for Victims of Sexual Abuse Poster
- 9. MCSP PREA Investigation files
- 10. Interviews with the following:
 - 1. MCSP Medical Staff
 - 2. SANE/SAFE Nurse at San Joaquin General Hospital
 - 3. MCSP Random staff
 - 4. MCSP Investigative staff
 - 5. MCSP 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. MCSP 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 MCSP is called the Investigative Services Unit (ISU). MCSP 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 adult/adolescent and child/adolescent. Interviews with random staff, medical staff and responsible investigators confirmed that all investigations alleging sexual abuse will be investigated and follow evidence protocols.

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 MCSP 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 at the San Joaquin General Hospital verified that they conduct the sexual assault forensic exams for MCSP and that there is always a SANE/SAFE on the schedule at the hospital and that the scheduled is covered 24/7. MCSP's PAQ reported that there was (1) 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) – MCSP has a Memorandum of Understanding (MOU) with the Operation Care to provide victim support and emotional support services related to sexual abuse. This agreement is for the period of July 1, 2019 through June 30, 2024. CDCR DOM, Section 5, 54040.8.1 requires that the Watch Commander or designee contact the local Rape Crisis Center to request a Victim Advocate to be dispatched. Additionally, posters were visible throughout MCSP for additional services for victims of sexual abuse that include a hotline number and address in which they can contact Operation Care. The auditor reviewed MCSP PREA investigation files which confirmed MCSP's practice in offering and 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/MCSP 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, 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.

Policies to ensure referrals of allegations for investigations Auditor Overall Determination: Meets Standard Auditor Discussion Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP Completed Pre-Audit Questionnaire (PAQ)

- 2. CDCR Policy Department Operations Manual (DOM)
 - 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 2018 and 2019
- 5. MCSP PREA Investigation files
- 6. Interviews with the following:
 - 1. CDCR Director of Adult Institutions
 - 2. CDCR PREA Coordinator
 - 3. MCSP Investigative Staff

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 MCSP PREA investigation files confirmed that allegations of sexual violence, staff sexual misconduct, sexual abuse and sexual harassment are being investigated and documented.

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 MCSP PREA investigation files.

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 MCSP investigations are completed through the ISU.

115.31 **Employee training** Auditor Overall Determination: Meets Standard **Auditor Discussion** Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP 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 54040.4 – Education and Prevention 3. CDCR In-Service PREA Training Lesson Plan 4. CDCR On the Job Training (OJT) PREA Lesson Plan 5. MCSP Training Records 6. Interviews with the following: 1. MSP Random staff 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. Training is gender specific based on the inmate population at the assigned institution. PREA training is conducted during new employee orientation with annual refresher trainings occurring subsequently through CDCR On-the-Job Training (OJT). Participation in the training will be documented on a CDCR 844, Training Participation Sign-in Sheet. 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 confirmed that staff receive training annually. This standard required corrective action as review of training records indicated that as of April 9, 2021, there are 86 active employees that still required their refresher annual PREA training and 13 employees identified as out on long-term leave that still required refresher training upon their return to work. MCSP provided verficiation of training for all staff of the annual in-

service PREA training through training logs. There were nine (9) employees identified as out on long term leave who will be provided the required annual in-service PREA training upon their return. MCSP has demonstrated compliance with this

standard.

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

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department Operations Manual (DOM)
 - 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: Standard 115.32(b)-Volunteer and Contractor Training- Dated October 6, 2017
- 4. CDCR Memorandum Re: CDCR Form 2301 PREA Policy Information for Volunteers Dated May 27, 2020
- 5. CDCR PREA Information and Acknowledgement Form
- 6. CDCR PREA Policy Volunteer/Contractor Informational Sheet
- 7. MCSP Human Resource File Review (Volunteers/Contractors)
- 8. Interviews with the following:
 - 1. MCSP Volunteers and Contractors who have contact with inmates
 - 2. MCSP Institutional Personnel Officer (Human Resources)
 - 3. MCSP Community Resources Manager (Human Resources)

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 immediate report any information that indicates an offender is being, or has been, the victim of sexual violence, staff sexual misconduct or sexual harassment. MCSP reported to have 904 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.

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 in regard to inmate/staff interactions. This training covers understanding the dynamics of establishing positive, professional interactions with inmates, maintaining professional distance while maintaining effective communication with inmates, and avoiding becoming overly familiar and/ or other inappropriate behavior. Although all volunteer and contract staff are required to complete the required one-hour training, staff who work 8 hour shifts with little to no custody staff supervision at times are mandated by the institutions to complete more extensive training based on their level of contact with inmates. Volunteers and contractors are also required to complete the CDCR PREA Policy Volunteer/Contractor Informational Sheet which acknowledges their responsibilities and duties to immediately report any information on any PREA related incidences.

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.

Interviews with volunteers and contractors and review of human resource files indicated that they have been trained and are knowledgeable on their responsibilities as it relates to PREA.

115.33 Inmate education Auditor Overall Determination: Meets Standard Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department Operations Manual (DOM)
 - 1. Chapter 5, Section 54040.4 Education and Prevention
- 3. CDCR PREA Sexual Abuse/Assault Prevention and Intervention booklet (English and Spanish)
- 4. CDCR PREA Sexual Violence Awareness Brochure (English and Spanish)
- 5. MCSP Inmate Orientation Handbook (English and Spanish)
- 6. CDCR PREA Posters (English and Spanish)
- 7. MCSP General Chrono (CDCR128-B) PREA Acknowledgement Form
- 8. Review of MCSP Inmate Records
- 9. Interviews with the following:
 - 1. MCSP Intake staff
 - 2. MCSP 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 presentation on a weekly basis in both English and Spanish. Approved PREA posters which contains departmental policy and sexual violence, staff sexual misconduct, and harassment reporting telephone numbers shall be posted in designated locations throughout the institution. The PREA brochures titled "Sexual Assault Awareness" and the PREA booklet titled "Sexual Abuse/Assault: Prevention and Intervention" are distributed during initial processing and the materials are also available through the correctional counselors and the institution's offender orientation handbook.

Upon admission to MCSP, all inmates are provided information on the agency's zero-tolerance policy on sexual abuse and sexual harassment, how to report an incident or suspicion of sexual abuse and sexual harassment, and support services for those that have been sexually abused. This information is provided to inmates through posters, inmate orientation handbooks and brochures. All inmates must sign-off on the CDCR General Chrono form acknowledging that they received this handbook and PREA brochures and booklets.

115.33(b) – Upon admission to MCSP, 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 to responding to a reported incident. Further, CDCR PREA posters which contain departmental policy on sexual violence, sexual harassment reporting contact information are posted throughout the institution.

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

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 educations to enhance the offender's knowledge and understanding of PREA. Interview with intake staff confirmed this practice. All inmates sign an acknowledgement form that they have seen the PREA Education video and are able to ask any questions if they have any. CDCR has interpreter services with Sign Language Interpreting Services, Inc. DBA Wilder Interpreting Service, for American Sign Language Interpreter Service and Voiance Language Services are available for use to for 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. During the on-site phase, the auditor observed the PREA video while in R&R.

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

Interviews with Intake Staff affirmed that inmates are provided with PREA information and education as part of the intake process before they are released to their assigned housing unit. This standard required corrective action as interviews with random inmates and review of inmate records indicated that inmate education is not being completed consistently and is not being documented as required by policy on the General Chrono CDCR128-B. MCSP provided refresher training to custody staff on this requirement and provided verification of training (CDCR 844) to the auditor. Additionally, MCSP instituted a new practice where it requires all facility Lieutenants to ensure the completion of the PREA screening forms and General Chrono CDCR128-B for inmate PREA education. Lieutenants are also to ensure that the CDCR Form 128-B for inmate PREA education is sent to records for inclusion in the inmate's record in ERMS and that a copy is to be retained in R&R. The Watch Commander shall ensure at the end of their shift that all intakes were completed with PREA screening and inmate education. MCSP provided the auditor with a listing of new admissions to MCSP and verification of completed CDCR 128-Bs for inmate PREA education for the new admissions.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ) CDCR Policy – Department Operations Manual (DOM)
	 Chapter 5, Section 54040.3 – Definitions Chapter 5, Section 54040.4 – Education and Prevention
	CDCR PREA Specialized Training for Locally Designated Investigators Curriculum Interviews with the following: 1. MCSP Investigative staff
	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 PREA Compliance Manager shall ensure employees investigating PREA incidents are properly trained.
	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.
	MCSP has 25 designated Locally Designated Investigators. Interviews with MCSP Investigative Staff (ISU) indicated that investigators are well trained in conducting sexual abuse and sexual harassment investigations and confirmed their understanding of the specialized training curriculum. Review of training records confirmed that LDIs completed CDCR's PREA Specialized Training for Locally Designated Investigators.

115.35 Specialized training: Medical and mental health care Auditor Overall Determination: Meets Standard Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department Operations Manual (DOM)
 - 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 dated August 9, 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:
 - 1. MCSP Medical and Mental Health staff

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, annual block, training, and will be included in the curriculum of the Correctional Training Academy. The training will be gender specific based on the offender population at the assigned institution. The Specialized Training for Medical and Mental Health staff was reviewed by the auditor and covers how to identify potential signs of sexual abuse and sexual harassment; how and whom to report allegations or suspicions of sexual abuse and sexual harassment; methods to respond effectively and professionally to victims of sexual abuse and sexual harassment; and steps required to preserve evidence of sexual abuse. Review of training records and interviews with medical and mental health staff confirmed their knowledge and participation in PREA Specialized Training for Medical and Mental Health Staff.

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/MCSP contracts with a local hospital (San Joaquin General Hospital) to perform SART exams, this substandard is not applicable to MCSP.

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

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, 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. MCSP 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 dated August 28, 2017
- 4. CDCR Memorandum Re: Changes to the PREA Risk Screening Form dated July 23, 2020
- CDCR Memorandum Re: PREA Risk Screening Correctional Counselor Responsibilities dated September 29, 2017
- 6. CDCR Memorandum Re: PREA Reassessments at Reception Centers dated March 13, 2019
- CDCR PREA Risk Screening Tool
- 8. Review of Inmate Records
- 9. Interviews with the following:
 - CDCR PREA Coordinator
 - 2. MCSP PREA Compliance Manager
 - 3. MCSP Intake Staff
 - 4. MCSP Staff Responsible for Screening
 - 5. MCSP Random Inmates

115.41(a) –(b)- CDCR Memorandum Re: PREA Risk Screening – dated August 28, 2017 requires that during the intake process, the custody supervisor conducting the Initial Housing Review in Receiving and Release shall also be responsible for complete a PREA screening form for every inmate. In addition, if the PREA screening form identifies an inmate to be at risk of being sexually abused by other inmates or sexual abusive towards other inmates, the custody supervisor shall also enter an alert into the Inmate Precaution section in SOMS. All PREA Screening forms will be completed electronically and submitted directly into ERMS. During the 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 1,343 inmates entered MCSP 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 MCSP, 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 or unsubstantiated incident of sexual violence in a correctional setting (not including sexual harassment) in the last 10 years; 2) Whether they have experienced sexual victimization in a correctional setting that they have not previously reported; 3) Victim of sexual victimization in a non-correctional setting; 4) Mental, Physical or Developmental disability; 5) Age; 6) Physical build; 7) Any prior or current convictions for sex offenses against an adult or child; 8) Whether they consider themselves or have ever been perceived by others as Lesbian, Gay, Bi-Sexual, Transgender, Inter-sex or Gender Non-Conforming; 9) Prior incarcerations; 10) Exclusively non-violent criminal history; and 11) Whether they currently consider themselves vulnerable to sexual victimization. Interviews with staff responsible for conducting risk screening confirmed that all factors of this subsection are taken into consideration when they conduct the risk screening on inmates and that the information is gathered through interviewing the inmate as well as 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. MCSP 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 substandard required corrective action as interviews with random inmates and review of inmate records indicated that 30-day reviews were not occurring consistently. During the corrective action period and after further review of records, it appeared as though 1) inmate records contained language that read as though the 30-day reviews were occurring on the same day as the initial PREA screening, and 2) 30-day reviews were not being conducted with consistently with all inmates. Through subsequent interviews with the facility and discussion with CDCR headquarters, it was clarified that the 30-day reviews were occurring at the committee hearing date which generally happens fourteen (14) days after admission. These discussions also identified that the facility was doing more initial PREA screenings than the standard calls for. In addition to the initial PREA screening conducted upon arrival to MCSP, another initial PREA screening may subsequently be done any time an inmate is transferred to another unit or facility within MCSP. After further review, the auditor was able to confirm that 30-day reviews were completed after the initial PREA screening that occured when the inmate first arrived at MCSP. Additionally, the auditor reviewed more inmate records during the corrective action period that affirmed that 30-day reviews are occurring consistently. Therefore, MCSP has demonstrated compliance with this substandard.

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, MCSP 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

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. California Code of Regulations Title 15
 - 1. Section 3269- Inmate Housing Assignments
 - 2. Section 3375 Classification Process
- 3. 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
 - 4. Chapter 6, Section 62080.14 Transgender Inmates
- 4. CDCR Memorandum Re: PREA Risk Screening dated August 28, 2017
- 5. CDCR Memorandum Re: PREA Risk Screening Correctional Counselor Responsibilities dated September 29, 2017
- 6. CDCR Memorandum Re: PREA Risk Screening Mental Health Referral Process dated October 24, 2018
- 7. CDCR's Roadmap for Standard 115.42
- 8. CDCR PREA Risk Screening Tool
- 9. CDCR's Transgender Biannual Assessment (Form CDC 128-B)
- 10. CDCR Memorandum Re: Transgender Biannual Reassessment for Safety in Placement and Programming dated August 25, 2017
- 11. Review of Inmate Records
- 12. Interviews with the following:
 - 1. CDCR PREA Coordinator
 - 2. MCSP PREA Compliance Manager
 - 3. MCSP Staff Responsible for Screening

115.42(a) – (b) – CDCR DOM, Section 54040.6, Offender Housing (pg.473) indicates that factors for single cell housing includes the initial housing review assessment and responses to sexual violence and victimization. California Code of Regulations, Title 15, Section 3269 also notes a presumption for single cell housing based on documented and verified instances of being a victim of in-cell physical or sexual abuse by another inmate or verified predatory behavior towards a cell partner. CDCR's CDCR Memorandum Re: PREA Risk Screening – dated August 28, 2017 directs the assigning staff to review the inmate precaution screen to determine if the inmate(s) are identified as being "at risk as a victim" or "at risk as an abuser". If either precaution exists, the custody supervisor is required to review the potential cellmate's precaution screen(s) and case factors to ensure potential victims and potential abusers are not housed together in a cell. The PREA Risk Screening is reassessed within 30 days (generally 14 days) of arrival at MCSP by the Initial Unit Classification Committee. During the committee, the PREA screening is reviewed and considered in all decisions affecting the inmate to include housing, work, education and program assignments. Interviews with the MCSP's PREA Compliance Manager and staff responsible for risk screening coroborate that staff is knowledgeable and aware of their responsibilities to complete 30-day reviews of the PREA risk screening.

This substandard required corrective action as it correlated to corrective action and compliance with Standard 115.41. During the corrective action period and after further review of records, it appeared as though 1) inmate records contained language that read as though the 30-day reviews were occurring on the same day as the initial PREA screening, and 2) 30-day reviews were not being conducted with consistently with all inmates. Through subsequent interviews with the facility and discussion with CDCR headquarters, it was clarified that the 30-day reviews were occurring at the committee hearing date which generally happens fourteen (14) days after admission. These discussions also identified that the facility was doing more initial PREA screenings than the standard calls for. In addition to the initial PREA screening conducted upon arrival to MCSP, another initial PREA screening may subsequently be done any time an inmate is transferred to another unit or facility within MCSP. After further review, the auditor was able to confirm that 30-day reviews were completed after the initial PREA screening that occured when the inmate first arrived at MCSP. Additionally, the auditor reviewed more inmate records during the corrective action period that affirmed that 30-day reviews are occurring consistently. Therefore, MCSP has demonstrated compliance with this substandard.

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, interest and desires, his/her behavior and placement score in keeping with the CDCR and institution's/facility's programs and security missions and public safety. Interview with the CDCR PREA Coordinator confirmed that CDCR has 14 designated transgender institutions and that the institutions were selected as they have more specialized medical and mental health staff that are experienced and able to provide services better in line with the needs of transgender inmates and that the classification and housing process 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 that 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. MCSP is one of 14 designated institutions.

115.42 (e) & (f) - CDCR Memorandum Re: Transgender Biannual Reassessment for Safety in Placement and Programming requires that Correctional Counselors 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 MCSP PREA Compliance Manager and staff responsible for risk screening confirmed that housing and programming assignments are reassessed at least twice a year and that transgender inmates would be able to shower separately from other inmates.

This substandard required corrective action as review of inmates files indicated that biannual reviews for transgender inmates were not occurring on a consistent basis. Through the corrective action period MCSP was able to provide the auditor with documentation of biannual reviews for transgender inmates that was not initially provided prior to the corrective action period. Therefore, MCSP has demonstrated compliance with this substandard.

115.43 **Protective Custody** Auditor Overall Determination: Meets Standard **Auditor Discussion** Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) 1. Chapter 5, Section 54040.6 - Offender Housing 3. California Code of Regulations Title 15 - Article 7. Segregation Housing 4. Interviews with the following: 1. MCSP Warden 2. MCSP PREA Compliance Manager 3. Staff the Supervise Inmates in Segregation Housing 4. Random Inmates in Segregation 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. MCSP Warden confirmed in her interview that the facility does their best to exhaust all means before placing an inmate in involuntary segregation. There were no inmates at high risk for sexual victimization placed in involuntary segregated housing in the last 12 months at MCSP and confirmed by facility list and staff interviews. 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. Interviews with staff who supervise inmates in segregated housing 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.

115.51 Inmate reporting Auditor Overall Determination: Meets Standard **Auditor Discussion** Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP 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 54040.4 – 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. MCSP Inmate Orientation Handbook 8. CDCR PREA Posters (English and Spanish) - "Shine the Light on Sexual Abuse" 9. Review of Inmate Records 10. Interviews with the following: 1. MCSP PREA Compliance Manager 2. MCSP Random Staff 3. MCSP Random inmates 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,

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 third party through a family member. The Inmate Orientation Handbook provided to inmates lists the above. Both interviews with intake staff and random inmates confirmed that they are aware of the various ways to report, to include but not limited to contacting the PREA hotline number, to staff in writing or in person, and on a form 602 (grievance form).

115.51(c) - (d) - California Code of Regulations, Title 15, Section 3401.5 requires that any employee who observes, or receives information from any source concerning sexual misconduct, shall immediately report the information or incident directly to the institution head, unit supervisor or highest ranking official on duty, show shall then immediately notify the Office of Internal Affairs. Interviews with staff confirmed that staff knew of the various ways to report privately. Interviews with staff confirmed that they would report it through their chain of command.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department Operations Manual (DOM)
 - 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. Sexual Abuse/Assault Prevention and Intervention inmate pamphlet
- 5. MCSP grievances alleging sexual abuse or staff sexual misconduct
- 6. MCSP PREA Investigation files
- 7. Interviews with the following:
 - 1. MCSP Warden
 - 2. MCSP Grievance Coordinator

115.52(a) – The agency is not exempt from this standard as it has an appeals process to address inmate grievances regarding sexual abuse. California Code of Regulations, Title 15 – Article 8 states a grievance in whole or part containing allegations of sexual violence or staff sexual misconduct shall be processed as an emergency appeal. As an emergency appeal, the appeal is immediately reviewed by the Hiring Authority or designee and processed directly at the second level of review.

115.52(b)-(c) – California Code of Regulations, Title 15 – Article 8 states that there shall be no time limits for allegations of sexual violence of staff sexual misconduct. While the department maintains the right to defend against an inmate lawsuit on the grounds of the applicable statute of limitations, a time limit shall not be imposed upon when an appellant may file such a grievance. Further, Article 8, Section 3084.7 states that appeal responses shall not be reviewed and approved by a staff person who participate in the event of the decision being appealed. The Sexual Abuse/Assault Prevention and Intervention pamphlet that is provided to all inmates upon reception, informs inmates that appeals relating to the reporting of employee sexual misconduct will go directly to the Warden or Superintendent for immediate review and action.

115.52(d) - California Code of Regulations, Title 15 – Article 8, Section 3084.8 (pg.79) states that appeal time limits indicates that the first and second level responses have a time limit of 30 days, third level responses have 60 days. If an exceptional delay prevents completion of the review within specified time limits, the inmate shall be provided an explanation of the reasons for the delay and the estimated completion date. 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. MCSP reported to have had two (2) grievances filed that alleged sexual abuse in the last 12 months. Grievances alleging sexual harassment and sexual abuse were reviewed and grievances reached final decision within 90 days. Grievance records were reviewed which confirmed all grievances reached final decision within 90 days and did not require an extension.

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. A review of MCSP PREA Investigations files confirmed that all allegations of sexual misconduct are investigated, to include those received via 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 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. MCSP had twenty-two (22) emergency grievances alleging 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. MCSP had three (3) instances in the past 12 months of inmates filing grievances alleging sexual abuse in bad faith. PREA investigation files and disciplinary reports were reviewed and demonstrate proof of practice

for this standard.

115.53 Inmate access to outside confidential support services Auditor Overall Determination: Meets Standard

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department Operations Manual (DOM) Chapter 5
 - 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. MCSP Inmate Orientation Handbook
- 6. CDCR "Shine the Light on Sexual Abuse" Posters
- 7. PREA Information for Orientation Handbook
- 8. Memorandum of Understanding between MCSP and Operation Care
- 9. Interviews with the following:

Auditor Discussion

- 1. MCSP Random Inmates
- 2. MCSP Inmates who Reported Sexual Abuse

115.53(a) - CDCR DOM, Section 54040.8.2- requires that victims of rape, unlawful sexual intercourse with person under 18, rape of spouse, sodomy, oral copulation, forcible acts of sexual penetration have a right under PC 264.2 and PC 679.04 to victim advocate and victim support person for both the medical examination and investigatory interview. MCSP provides access to victim advocates for emotional support services related to sexual abuse through the local rape crisis center, Operation Care. Inmates are informed of these services and the contact information (phone and mailing address) of Operation Care through the inmate handbook and the CDCR/MCSP "Sexual Abuse/Assault Prevention and Intervention" pamphlet, and the MCSP Additional Services of Sexual Abuse poster. The audit team tested the inmate phone system to contact Operation Care, as listed on the posters throughout the facility. All calls were processed successfully.

CDCR/MCSP has established a way to inform inmates through the PREA Informational Sheet for Orientation Handbook that services from Operation Care will maintain confidentiality as required by state and federal laws for Sexual Assault Counselors. Additionally, if inmates chose to write to Operation Care, they are informed that the envelope must state: "EVID. CODE 1035.4 PRIVLEGED COMMUNICATION" so that it is treated as confidential mail. Inmate interviews acknowledge that inmates are aware of the services, or at least where to find the information to contact them, should they feel the need for them. Inmates who reported sexual abuse affirmed through interviews that they were informed about support services available to them and also knew where they could find the contact information should they choose to receive further services.

115.53(b) – CDCR/MCSP has established a way to inform inmates through the PREA Informational Sheet for Orientation Handbook that the telephone calls from the inmate telephone system are recorded and if PREA allegations are identified on this system, it will be referred to appropriate staff for inquiry and investigation. Interviews with inmates noted that they overall felt that the information they shared would be confidential but also noted that they understood that if it 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/MCSP has a Memorandum of Understanding (MOU) with Operation Care 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 Operation Care is listed in the Inmate Orientation Handbook, and in the Sexual Violence Awareness brochures provided to inmates. The auditor conducted email correspondence with the Operation Care center staff who confirmed that they are presently providing emotional support services related to sexual abuse and victim advocate services to inmates at MCSP.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ)
	2. CDCR, DOM, Section 54040.7.3 – Notification via Third Party Reporting of Sexual Violence or Sexual Harassement Against an Offender
	3. CDCR Agency web page
	4. CDCR PREA Posters - "Shine the Light on Sexual Abuse"
	5. MCSP Sexual Abuse/Assault Prevention and Intervention inmate pamphlet
	6. CDCR PREA Orientation Handbook Handout
	7. Interviews with the following:
	1. MCSP Random inmates
	2. MCSP Random staff
	115.54(a) - The CDCR website: provides a method to receive third-party reports of inmate sexual abuse or sexual
	harassment. The website outlines ways that visitors, inmate family members or associates, and other community members
	can privately report sexual abuse or sexual harassment. Additionally, PREA posters are posted throughout the facility, to
	include visitation areas, which provide information on how to report sexual abuse or sexual harassment. The website
	information was verified and during interviews with staff and inmates it was confirmed that they had knowledge of the
	information and website.

115.61 Staff and agency reporting duties Auditor Overall Determination: Meets Standard **Auditor Discussion** Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) 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. CDCR Health Care Services Policy, Chapter 16, 1.16.1 4. CDCR Memorandum Re: Standard 115.61 - Date 01/27/20 5. MCSP PREA Investigation Files 6. Interviews with the following: 1. MCSP Warden 2. MCSP Medical and mental health staff 3. MCSP Random inmates 4. MCSP Random staff 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 appropriate staff. CDCR DOM, Section 54040.8 outlines the expectations of staff to ensure that reporting of information is done in a confidential manner and that incident-specific information shall be treated as confidential,

and disclosure made only to employees who have a "need to know" and to other entities as permitted or requested by law. All staff interviews confirmed that all staff are aware of the agency's policy for reporting any information related to an inmate sexual abuse and compliance with this substandard.

115.61(c) - CDCR Health Care Services Policy, Chapter 16, 1.16.1 requires that providers report allegations of sexual violence, staff sexual misconduct, and sexual harassment to include informing patients of the provider's duty to report, and the limitation of confidentiality, at the initiation of services. Interviews with MCSP medical and mental health staff confirmed that they inform patients on their duty to report and limitations of confidentiality.

115.61(d) - MCSP does not house inmates under that age of 18. Current litigation against CDCR regarding vulnerable adults which resulted in the remedial plans and the State of California – Health and Human Services Agency, there is no requirement for CDCR to report to state of local services agency such as Adult Protective Services. It should be noted that CDCR Investigators are classified as Peace Officers and receive specialized training in conducting sexual abuse investigations of all person 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. Interview with the MCSP Warden confirmed this practice at MCSP. Review of MCSP PREA investigations completed during the audit period confirmed compliance with this substandard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP 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. Interviews with the following:
	CDCR Director of Adult Institutions
	2. MCSP Warden
	3. MCSPRandom staff
	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 is no available alternative means of separation from likely abusers.
	MCSP reported on the PAQ to have eight (8) instances in the past 12 months of determining that an inmate was at risk of imminent sexual abuse. CDCR Director of Adult Institutions and MCSP Warden both confirmed in interviews that housing alternatives are always available to ensure protection of inmates at risk of imminent sexual abuse. Some of the alternatives considered would be moving the inmate to a different housing unit, single cell placements, and recommending a transfer to a different facility if deemed necessary. Based on staff interviews, it was evident that staff is aware of their responsibility to protect inmates in their care and that any perceived threat of harm including sexual abuse would result in immediate reporting and preventative action by staff.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ)
	2. CDCR Policy - Department Operations Manual (DOM)
	1. Chapter 5, Section 54040.7.4 - Notification from/to Other Confinement Facilties
	3. MCSP PREA Investigation Files
	4. Interviews with the following:
	CDCR Director of Adult Insitutions
	2. MCSP Warden
	3. MCSP Investigation Staff
	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 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 12 months preceeding the audit, MCSP received six (6) allegations of an inmates being sexually abused while confined at another confinement facility. MCSP ISU were assigned the investigations and investigation files reviewed by the auditor confirmed that MCSP completes an investigation report and documentation of notification to the other confinement facility.
	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 according with DOM Section 54040.12. Upon completion, a closure report shall be returned to the institution where the alleged incident was reported. In the 12 months preceding the audit, MCSP received thirteen (13) allegations of sexual abuse occurring at MCSP from other facilities. PREA investigation file reviews and interviews with staff

confirmed the practice.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ)
	2. CDCR Policy – Department Operations Manual (DOM)
	1. Chapter 5, Section 54040.8 – Response
	CDCR PREA Initial Contact Guide CDCR Custody Supervisor PREA Checklist
	CDCR Custody Supervisor PREA Checklist MCSP PREA Investigation Files
	6. Interviews with the following:
	1. MCSP Random staff
	MCSP Staff and non-security first responders
	3. MCSP Inmates who reported sexual abuse
	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 for watch commanders
	to follow in these incidents and is currently in use. The CDCR Custody Supervisor PREA checklist clearly outlines the steps
	and covers items (1) through (4) in this substandard. It should be noted that the CDCR Custody Supervisor PREA checklist is
	a tool that is provided to staff to assist them in ensuring that they follow all necessary steps when responding to a PREA
	allegation, and is not required to be completed per policy. Interviews with security and non-security staff and review of MCSP
	PREA investigation files confirmed that staff is aware of the policy, procedures and their responsibilities as a first responder

to a PREA incident.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ)
	CDCR Policy – Department Operations Manual (DOM) Chapter 5, Section 54040.8 – Response
	3. CDCR CCHCS, Chapter 16, 1.15.2 – Prison Rape Elimination Act Procedure
	4. MCSP Supplement to CDCR DOM Section 54040 –Revised August 20205. Interviews with the following:
	 MCSP Warden MCSP Random Staff
	115.65(a) – MCSP Supplement to CDCR DOM Section 54040 outlines and addresses MCSP's institutional plan to responding to incident and coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership, required by PREA standard 115.65. MCSP Supplement to CDCR DOM Section 54040.3 is reviewed annually by the MCSP PREA Compliance Manager and was last reviewed in August 2020. Interviews with MCSP Warden and facility staff confirmed that staff is aware of the coordinated response in place at MCSP.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ)
	2. California Correctional Peace Officers Association Bargaining Unit 6 Agreement
	3. Interviews with the following:
	CDCR Director of Adult Institutions
	115.66(a) - CDCR Collective Bargaining Agreement (CBA) for Unit 6 contract is effective July 3, 2020 through July 2, 2022.
	The CBA does not limit management's ability to remove alleged staff sexual abusers from contact with any inmates pending
	the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The CBA section
	4.01: Management Rights, states that management has the authority to hire, transfer, promote and demote employees as the
	employer may determine to be necessary for the orderly, efficient, and economical operation of CDCR. Interview with the
	CDCR Director of Adult Institutions confirmed that involuntary actions related to the removal and reassignment of staff is within their authority
	within their authority

Agency protection against retaliation Auditor Overall Determination: Meets Standard Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP 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. MCSP PREA Investigation Files
- 6. Interviews with the following:
 - 1. CDCR Director of Adult Institutions
 - 2. MCSP Warden
 - 3. MCSP PREA Compliance Manager
 - 4. MCPS 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 MCSP PREA Compliance Manager and MCSP 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.

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 Code of Regulations, Title 15, Section 3401.5. Interviews with CDCR Director of Adult Institutions and MCSP Warden affirm the zero-tolerance for retaliation.

This standard required corrective action as review of MCSP PREA investigation files indentified that PARs are not being done consistently as several files that were reviewed were missing PARs. MCSP provided refresher training to all Locally Designated Investigators (LDIs) on the standard requirement and provided training verification (CDCR 844). MCSP provided that the auditor with documentation of completed CDCR 2304 - Protection Against Retaliation (PAR) forms as requested during the corrective action period as verification of proof of practice. MCSP has demonstrated compliance with this standard.

115.68 Post-allegation protective custody Auditor Overall Determination: Meets Standard **Auditor Discussion** Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP Completed Pre-Audit Questionnaire (PAQ) 2. California Code of Regulations - Title 15 1. Article 7 – Segregation Housing 3. CDCR Policy - Department Operations Manual (DOM) 1. Chapter 5, Section 54040.6 - Offender Housing 4. Interviews with the following: 1. MCSP Warden 2. MCSP Staff the Supervise Inmates in Segregated Housing 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

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.

MCSP reported no instances of involuntary non-disciplinary segregation to protect and inmate who is alleged to have suffered sexual abuse in the 12 months preceding the audit. Interview with the MCSP Warden confirmed they do not place inmates who have alleged to have suffered sexual abuse in involuntary segregation. Interviews with staff who supervise inmates in segregated housing confirmed that access to programs, privileges and education are done through reivews with the inmates assigned counselors.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP 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. MCSP PREA investigation files
- 8. Interviews with the following:
 - 1. CDCR PREA Coordinator
 - 2. MCSP Warden
 - 3. MCSP PREA Compliance Manager
 - 4. MCSP Investigative Staff
 - 5. MCSP Inmates who reported sexual abuse

CDCR DOM section 54040.1 states that CDCR has Locally Designated Investigators (LDI) who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct. MCSP 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 AOD can be made.

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

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. 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 charge. Review of PREA investigation files and interviews with the CDCR PREA Coordinator and MCSP Investigation staff affirmed that this process was being followed and that when quality of evidence appears to support criminal prosecution, the agency conducts compelled interviews only after consulting with prosecutors.

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 of offer of reward shall be used to induce any person to take a polygraph examination. Interviews with MCSP 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 MCSP Investigation staff and inmates who reported sexual abuse confirmed that MCSP 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 MCSP Investigation staff affirmed that thorough investigations are done and that all pertinent information such a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings is gathered and documented, to include an effort to determine whether staff actions or failures of actions contributed to the abuse. This includes statements, staff rosters, 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. In the past 12 months, MCSP did not have any completed investigations of sexual abuse that were referred for prosecution. Investigation files were reviewed and confirmed that investigations include an effort to determine whether staff actions or failures to act may have contributed to the abuse, description of physical and testimonial evidence, reasoning behind credibility of statements, and investigative facts and findings.

115.71(i) – CDCR DOM, Section 54040.20, PREA Data Storage and Destruction (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(I) - CDCR/MCSP 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
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ)
	2. CDCR Policy – Department Operations Manual (DOM)
	1. Chapter 3, Section 33030.13.1 – Investigative Findings
	Chapter 3, Section 33030.17 – Applying the Employee Disciplinary Matrix MOSE RESA Investigation Files
	3. MCSP PREA Investigation Files 4. Interviews with the following:
	MCSP Investigative Staff
	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. In order 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 MCSP Investigative staff confirmed the same level of standard in substantiating a sexual harassment or sexual abuse allegation.

115.73 Reporting to inmates Auditor Overall Determination: Meets Standard Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department Operations Manual (DOM)
 - 1. Chapter 5. Section 54040.8.1 Custody Supervisor Responsibilities
 - 2. Chapter 5, Section 54040.12.5 Reporting to Offenders
- 3. CDCR/MCSP Memo Re: PREA CDCR 128B Notifications Dated November 20, 2020
- 4. Review of PREA investigation files
- 5. Interviews with the following:
 - 1. MCSP Warden
 - 2. MCSP PREA Compliance Manager
 - 3. MCSP Investigative Staff
 - 4. MCSP Inmates who reported sexual abuse

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. Interviews with the MCSP PREA Compliance Manager and MCSP 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.

This standard required corrective action as review of the MCSP PREA Investigation Files and interviews with inmates who reported sexual abuse indicate that while MCSP does have a policy in place, practice and documentation to the alleged victim in written notification of the findings as described in DOM Section 54040.12.5 was not occurring on a consistent basis as several files that were reviewed did not have verification of notification to the alleged victim. It should be noted that MCSP had previously identified this as an issue and as a result implemented changes as noted on per CDCR/MCSP Memo Re: PREA CDCR 128B Notifications - Dated November 20, 2020, which requires ISU to obtain the inmate's (alleged victim) signature on a CDCR-128B Informational Chrono to verify the inmate(s) notification of the investigation.

MCSP provided refresher training to all Locally Designated Investigators (LDIs) on the standard requirement and provided training verification (CDCR 844). MCSP provided that the auditor with documentation of completed CDCR-128B General Chrono forms as requested during the corrective action period as verification of proof of practice of inmate notification being completed. MCSP has demonstrated compliance with this standard.

115.76 Disciplinary sanctions for staff Auditor Overall Determination: Meets Standard Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP 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. MCSP PREA Investigation Files
- 5. Interviews with the following:
 - 1. CDCR Director of Adult Institutions
 - 2. CDCR PREA Coordinator
 - 3. MCSP Warden
 - 4. MCSP PREA Compliance Manager
 - 5. MCSP 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, 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, contractor 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, MCSP reported one (1) incident in which a staff member violated agency sexual harassment policy and was disciplined for. In the past 12 months, there have been no employees, volunteer, contractor, or individuals working on behalf of CDCR that were terminated for violating agency sexual abuse or sexual harassment policies at MCSP. MCSP PREA Investigative files were reviewed by the auditor and interviews with CDCR and MCSP leadership affirm compliance with this standard.

115.77 Corrective action for contractors and volunteers Auditor Overall Determination: Meets Standard **Auditor Discussion** Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy - Department Operations Manual (DOM) 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: 1. MCSP Warden 115.77(a) - CDCR DOM, Section 54040.12.4, Reporting to Outside Agencies for Contractors (pg.477) states that any contractor or volunteers who engages in staff sexual misconduct shall be prohibited from contact with the offenders and shall be reported to relevant licensing body by the hiring authority or designee. Further, CDCR Contractor Bid/Agreement (Exhibit D) provision (59) informs the contractor that any contract employee who engages in sexual abuse of an inmate shall be prohibited from contact with inmates and shall be subject to administrative and/or criminal investigation including possible referral to the District Attorney, unless the activity was clearly not criminal, and shall be subject to reporting to relevant licensing bodies. The agreement also states that by signing the contract they agree to all provisions and shall abide by the laws, rules and regulations governing conduct in associating with prison inmates or wards. 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 security and safety of the volunteer, employees, public, or inmates. Termination can be carried out in an expeditious manner if there is evidence of volunteer misconduct that includes acts of inappropriate familiarity with inmates, parolees, participating in

behavior either on or off duty that is of such nature that it may cause discredit to CDCR or its services.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP 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. MCSP PREA Investigative Files
- 5. MCSP Inmate disciplinary sanctions report
- 6. Interviews with the following:
 - 1. MCSP Warden
 - 2. MCSP 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 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 was one (1) administrative findings of inmate-on-inmate sexual abuse and three (3) administrative findings of inmate-on-inmate sexual abuse at MCSP within the past 12 months. There were no criminal findings of inmate-on-inmate sexual abuse at MCSP within the past 12 months. A review of the PREA investigations was completed by the auditor.

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 MCSP Warden and mental health staff affirmed that MSP 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 MCSP's mental health staff confirmed that MCSP 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 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. MCSP had no instances of 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. MCSP had three (3) instances of taking disciplinary action against an inmate for making a false report within the last 12 months. Disciplinary reports for these three instances were reviewed by the auditor.

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. MCSP 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

Policy, Materials, Interviews and Other Evidence Reviewed:

- 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
- 2. CDCR Policy Department Operations Manual (DOM)
 - 1. Chapter 5, Section 54040.7 Referral for Mental Health Screening
- 3. CCHCS PREA Health Care Guidelines
- 4. CDCR PREA Screening Form
- 5. CDCR Memorandum Re: Standard 115.81(d)1 Dated December 5, 2017
- 6. CDCR PREA Authorization to Release Information Form (CDCR 7552)
- 7. CDCR Informed Consent for Mental Health Care Form (CDCR MH-7448)
- 8. Review of MCSP PREA related mental health referrals
- 9. Interviews with the following:
 - 1. MCSP Staff Responsible for Risk Screening
 - 2. MCSP Inmates who Disclosed Sexual Victimization at Risk Screening
 - 3. MCSP Mental health staff

115.81(a) –(d) – CDCR DOM, Section 54040.7, Referral for Mental Health Screening (pg. 474) states that 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 were 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 be immediately be offered a follow-up meeting with a mental health practitioner.

This substandard required corrective action as review of PREA related mental health referrals and interviews with inmates who disclosed previous sexual abuse or previously perpetrating sexual abuse indicate that referrals are not occurring consistently. MCSP provided refresher training to all facility Correctional Lieutenants on the standard requirement and provided training verification (CDCR 844). MCSP provided that the auditor with documentation of completed Initial PREA screening forms and CDCR-MH5 Mental Health Referral Chronos as requested during the corrective action period as verification of proof of practice. MCSP has demonstrated compliance with this standard.

CCHCS PREA Health Care Guidelines outline the mental health referral process. Referrals to mental health may be made on an Emergent, Urgent, or Routine Basis. Emergent referrals are seen immediately, Urgent referrals are seen within 24 hours and a Routine referral are seen within five working days. All referrals are made on the CDCR-MH5 Mental Health Referral Chrono and forwarded to the mental health office. Emergent and Urgent referrals should also be made by phone to facilitate a timely response. Interviews with mental health staff and reviews of mental health referrals confirmed that these guidelines are in practice. Interviews with staff also 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	

- Policy, Materials, Interviews and Other Evidence Reviewed:
 - 1. MCSP Completed Pre-Audit Questionnaire (PAQ)
 - 2. CDCR Policy Department Operations Manual (DOM)
 - 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)
 - 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:
 - 1. MCSP Medical and mental health staf
 - 2. MCSP Inmates who reported sexual abuse
 - 3. MCSP Security staff and non-security staff first responders

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.

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.

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.

115.82 (d) – CCHCS Volume 1. Chapter 10 indicates that there will be no copayment charge to the inmate if the health care service(s) are to be considered treatment services relating to sexual abuse or assault. Interviews with medical staff and inmates who reported sexual abuse confirmed that there is no copayment charge to the inmate.

15.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ)
	2. CDCR Policy – Department Operations Manual (DOM)
	1. Chapter 5, Section 54040.10 – Return to Triage and Treatment Area
	3. CCHCS Volume 1 Governance and Administration
	1. Chapter 10 – Copayment Program Policy
	2. Chapter 16 – PREA Procedures
	4. Interviews with the following:
	MCSP Medical and mental health staff
	MSP Inmates who reported sexual abuse
	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
	all inmates who have been victims of sexual abuse in any institution. CDCR provides follow-up medical and mental health
	services to include treatment plans and when necessary referrals for continued care when transferred or placed in other
	facilities. Further, this includes follow-up testing for sexually transmitted infections/diseases (STI/STD), and HIV. Interviews
	with medical, mental health staff and inmates who reported sexual abuse confirm that is in practice at MCSP. MCSP is a
	male facility, therefore 115.83(d) and 115.83(e) are not applicable. CDCR agency policy does states that victims of vaginal
	penetration are offered pregnancy tests among other STD testing, treatment and relevant information.
	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.

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.

Auditor Overall Determination: Meets Standard Auditor Discussion Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy – Department Operations Manual (DOM) 1. Chapter 5, Section 54040.17 – Institutional PREA Review Committee 3. MCSP PREA Investigation Files 4. Interviews with the following: 1. MCSP Warden 2. MCSP 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 committee consist of institutional staff chaired by the respective Institution Head tasked with reviewing these PREA related incidents. The IPRC generally consist of the Hiring Authority or designee, PREA Compliance Manager, In-Service Training Manager, Health Care Clinician, Mental Health Clinician and 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. Interview with the MCSP Warden, MCSP PREA Compliance Manager, who are part of the IPRC, and review of completed MCSP IPRC forms verified the practice with this standard.

115.87 **Data collection** Auditor Overall Determination: Meets Standard **Auditor Discussion** Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy – Department Operations Manual (DOM) 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 2019 4. Survey of Sexual Victimization Form (SSV-IA) 5. Interviews with the following: 1. CDCR PREA Coordinator 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. CDCR DOM Section 54040.19 further states that the Office of Internal Affairs maintains records of investigations into

CDCR DOM Section 54040.19 further states that the Office of Internal Affairs maintains records of investigations into allegations of staff/offender sexual misconduct, and will report by case number, the type of sexual misconduct, subcategory; whether the allegations were sustained; and whether a DA referral was made. CDCR shall aggregate the incident-based data at least annually. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the SSV conducted by the Federal Department of Justice. CDCR shall maintain, review, and collect data as needed from all available documents including incident reports, investigation files, and PREA incident reviews. CDCR shall also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of inmates. Upon request, the agency shall provide all such data from the previous calendar year to the federal Department of Justice no later than June 30. The most recent annual report available is for Calendar Year 2019. The annual report can be found at: https://www.cdcr.ca.gov/prea/wp-content/uploads/sites/186/2020/07/Annu al-Report-2019.pdf. This report includes a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse.

115.88 Data review for corrective action Auditor Overall Determination: Meets Standard Auditor Discussion Policy, Materials, Interviews and Other Evidence Reviewed: 1. MCSP Completed Pre-Audit Questionnaire (PAQ) 2. CDCR Policy – Department Operations Manual (DOM)

- 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 2019
- 4. Interviews with the following:
 - 1. CDCR Director of Adult Institutions
 - 2. CDCR PREA Coordinator
 - 3. MCSP PREA Compliance Manager

115.88(a) – CDCR DOM, Section 54040.17, requires CDCR 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. 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.

Completed SSV-IA forms were reviewed and interviews with the CDCR Director of Adult Institutions, CDCR PREA Coordinator, and MCSP'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 MCSP 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.

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 Institutions stated that she approves the annual reports and CDCR PREA Coordinator confirmed that personal identifiers are redacted from reports.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed:
	MCSP Completed Pre-Audit Questionnaire (PAQ)
	2. CDCR Policy – Department Operations Manual (DOM)
	1. Chapter 5, Section 54040.20 PREA Data Storage and Destruction
	3. CDCR Agency PREA website
	4. CDCR PREA Annual Report – Calendar Year 2019
	5. Interviews with the following:
	CDCR Director of Adult Institutions
	2. CDCR PREA Coordinator
	3. MCSP PREA Compliance Manager
	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.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	CDCR has in previous years submitted Governor Assurances of Intention to Adopt and Achieve Full Compliance with the standards. CDCR is currently working to ensure that one third of their facilities are audited in the first 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. It should be noted that due to health and safety concerns relating to the COVID-19 pandemic, any housing units that were under isolation or quarentine were not physically toured while onsite. However, the auditor was provided photos of the areas requested for review. While onsite at MCSP, the audit team was provided with access to, and the ability to observe, all others areas of the facility. The auditor received copies of all requested documents and was permitted to conduct private interviews with staff and inmates. Inmate were permitted to send confidential correspondence to the auditor. This standard is rated as a "meets standard".

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

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
.15.14 (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
l15.14 (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
L15.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

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

.15.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
L5.16 (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
l15.17 (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
l15.17 (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
.15.17 (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
.15.17 (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.)	na
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.)	na
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
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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
l15.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
l15.32 (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
l15.32 (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
15.32 (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
l15.33 (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
15.33 (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

L15.33 (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
15.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
15.33 (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
15.34 (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
15.34 (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
15.34 (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
l15.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
l15.35 (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
L15.35 (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
l15.41 (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
L15.41 (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	

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
l15.41 (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
L15.41 (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
L15.41 (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 degree, 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 degree, 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 degree, 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
L15.43 (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
L15.43 (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
Table 2	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	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
.15.52 (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
L15.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
2 - 1	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	yes
	necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	

115.61 (c)	Staff and agency reporting duties		
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes	
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes	
15.61 (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	
15.61 (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	
15.62 (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	
l15.63 (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	
.15.63 (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	
L15.63 (c)	Reporting to other confinement facilities		
	Does the agency document that it has provided such notification?	yes	
.15.63 (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	
15.64 (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 (I)	Criminal and administrative agency investigations		
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes	

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
.15.73 (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
L15.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
.15.73 (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
.15.73 (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
L15.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
l15.76 (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
L15.76 (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	
L15.82 (d)	Access to emergency medical and mental health services		
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes	
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes	
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes	
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes	
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na	
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na	
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes	
L15.83 (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	
L15.83 (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	
L15.88 (d)	Data review for corrective action		
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes	
115.89 (a)	Data storage, publication, and destruction		
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes	
115.89 (b)	Data storage, publication, and destruction		
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes	
115.89 (c)	Data storage, publication, and destruction		
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes	
115.89 (d)	Data storage, publication, and destruction		
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes	
115.401 (a)	Frequency and scope of audits		
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes	

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