

PREA Facility Audit Report: Final

Name of Facility: California State Prison Corcoran

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 04/28/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Julie Ustruck Wetzel	Date of Signature: 04/28/2024

AUDITOR INFORMATION	
Auditor name:	Ustruck Wetzel, Julie
Email:	Julie.UstruckWetzel@wisconsin.gov
Start Date of On-Site Audit:	02/05/2024
End Date of On-Site Audit:	02/08/2024

FACILITY INFORMATION	
Facility name:	California State Prison Corcoran
Facility physical address:	4001 King Avenue, Corcoran, California - 93212
Facility mailing address:	

Primary Contact

Name:	Derek Madsen
Email Address:	Derek.Madsen@cdcr.ca.gov
Telephone Number:	559-992-8800 EXT.

Warden/Jail Administrator/Sheriff/Director	
Name:	Tammy Campbell
Email Address:	Tammy.campbell@cdcr.ca.gov
Telephone Number:	559-992-8800 Ext 550

Facility PREA Compliance Manager	
Name:	Derek Madsen
Email Address:	Derek.Madsen@cdcr.ca.gov
Telephone Number:	O: (559) 992-8800 ext.
Name:	Jimmy Hamilton
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Name:	Juan Salcedo
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Name:	Stephanie Dias
Email Address:	stephanie.dias@cdcr.ca.gov
Telephone Number:	O: (559) 992-8800 ext.

Facility Health Service Administrator On-site	
Name:	Michael Whitaker
Email Address:	Michael.Whitaker@cdcr.ca.gov

Telephone Number:	559-992-8800
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Facility Characteristics	
Designed facility capacity:	3115
Current population of facility:	3556
Average daily population for the past 12 months:	3439
Has the facility been over capacity at any point in the past 12 months?	Yes
Which population(s) does the facility hold?	Males
Age range of population:	40
Facility security levels/inmate custody levels:	2/4
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	2055
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	274
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	100

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

Telephone number:	9163246688
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Agency Chief Executive Officer Information:	
Name:	Ronald Broomfield
Email Address:	Ronald.Broomfield@cdcr.ca.gov
Telephone Number:	916-323-4093

Agency-Wide PREA Coordinator Information			
Name:	Rusty Hickethier	Email Address:	rusty.hickethier@cdcr.ca.gov

Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-02-05
2. End date of the onsite portion of the audit:	2024-02-08

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p>a. Identify the community-based organization(s) or victim advocates with whom you communicated:</p>	<p>On March 10, 2024 using online contact forms, this writer contacted Family Services of Tulare County and Family Healing Center inquiring about their relationship with Corcoran for Sexual Assault Forensic Examinations. Both agencies responded the following day indicating Central Valley Forensic Nursing Specialists, Inc (CVFNS) is the agency providing examinations for Corcoran. CVFNS was copied on one of the responses. A follow up email was sent directly to CVNS on March 11, 2024 with a follow up phone call on March 25, 2024. Requests for an interview were not answered.</p> <p>On January 17, 2024, using the online contact form, this writer contacted Kings Community Action Organization (KCAO), the agency providing advocacy/support services to Corcoran. A response was received on January 17, 2024, indicating an interview was already completed with an auditor. Through correspondence it was determined Auditor Leigha Weber interviewed a Director from KCAO on May 30, 2023 during the SATF PREA Audit. Subsequent emails were sent to KCAO on February 18, 2024 and March 2, 2024 requesting an interview or at a minimum answering several clarifying questions asked in the body of the interview specific to Corcoran. These emails went unanswered. General information gleaned from the May 30, 2023 interview was utilized and referenced in this audit report.</p>
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AUDITED FACILITY INFORMATION

<p>14. Designated facility capacity:</p>	<p>3115</p>
<p>15. Average daily population for the past 12 months:</p>	<p>3439</p>
<p>16. Number of inmate/resident/detainee housing units:</p>	<p>33</p>

<p>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</p>
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Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

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

<p>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</p>	<p>3440</p>
<p>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</p>	<p>229</p>
<p>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</p>	<p>11</p>
<p>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</p>	<p>10</p>
<p>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</p>	<p>177</p>

42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	308
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	14
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	16
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	40
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0

<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>This disability roster provided by CDCR included individuals identified with hearing, speech, vision, and mobility challenges. Many of the individuals experienced more than one of the challenges listed. In addition to the number note above, an addition 138 individuals are noted to have a short term disability or other health condition requiring accommodation.</p> <p>The number of inmates identified by the categories in numbers 42-46 are not inclusive of all inmates at the facility. The documentation provided includes only individuals admitted to Corcoran in the past 12 months. Using the CIQ questionnaire data, 16 individuals identified as Transgender, Intersex, and non-binary. Additional data was gleaned from the PREA Screening with 14 individuals admitted in 2023, identified as LGBTQI. Only three names were on both lists. When selecting inmates who reported sexual abuse at the facility, the PREA Allegations Log and file review was utilized. It was not clear from the documentation how many inmates who reported abuse remained at Corcoran.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>2100</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>52</p>
<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>0</p>

<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>As noted above, Corcoran indicated 100 volunteers on the PAQ, however, documents received listed 52 volunteers. A list of contractors was not reviewed.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>29</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>If "Other," describe:</p>	<p>In addition to housing assignment and race, custody level, program and job assignment were considered to provide for a comprehensive understanding of institution operations.</p>

<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Random inmates were initially selected using the Inmates by Housing Area roster. The roster provides cell/bed number, inmate name CDCR#, race/ethnicity, level, custody, program and job assignment. Initially, two inmates were selected from each housing unit, selecting from the opposite tiers and ensuring a diverse racial population from each housing unit.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Most inmates interviewed were first interviewed using the random inmate interview protocols. 54 inmates were interviewed using the random inmate interview protocols.</p> <p>This auditor selected inmates to be interviewed prior to arriving on site. The list ensured the minimum number of inmates were selected meeting interview protocol criteria. However, 21 individuals refused to be interviewed and another eight were unavailable. Although the list contained more than the minimum number of interviews, additional inmates were randomly selected on site.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>27</p>

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

<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>3</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>5</p>

<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>5</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>6</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corcoran reported that zero inmates were placed into segregated housing for those at risk of sexual victimization. Staff consistently reported this information and no inmates were identified through interview or file review to suspect otherwise. Additionally, inmate interviews did not indicate a common belief or fear of being placed in segregated housing should they report a safety concern.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>Interviews of identified inmates with an LEP need was oversampled. LEP rosters indicates the level of English comprehension, such as "limited, no unknown, or interpreter needed" for a specific language. Inmates of varying comprehension levels, interpreter needs, and languages were selected to test the use of the language line as well as Corcoran's appropriate identification of LEP needs. It should be noted, one inmate sent confidential correspondence, however it was sent after the auditors were on site. As such, this inmate was not interview nor were documents related to him specifically reviewed.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>17</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </p>

<p>If "Other," describe:</p>	<p>Interviews were conducted with uniform (custody) and non-uniform (free) staff assigned to various areas of the institution such as administration, health services, and each housing yard. Additionally, both male and female staff were interviewed.</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>At the beginning of each watch, Corcoran provided a roster of uniform staff on on site, which listed job assignment and rank. One staff from each yard and each shift were selected for interview to ensure a represented sample of staff. Given this attempt to reach staff on all shifts and yards, random staff were primarily uniform custody staff.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>39</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

79. Were you able to interview the PREA Compliance Manager?

Yes

No

NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input checked="" type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No

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

All custody uniform staff interviewed using the random question protocols were also asked to describe their actions as a first responder,

The agency head was interviewed by Auditor Tejuana King on October 4, 2023. This interview was referenced throughout the Corcoran audit report.

The Corcoran Warden was interviewed virtually by this writer on January 22, 2024 using the Warden and Unannounced Rounds interview protocols.

Corcoran does not house anyone under the age of 18 years old and as such, interviews were not conducted with staff supervising youthful inmates or those staff who provide education and programming to youthful inmates.

The PREA Coordinator was interviewed by Tejuana King on October 2, 2024. This interview was referenced throughout the Corcoran audit report.

The PREA Compliance Manager was interviewed virtually by this writer on January 17, 2024 using the PCM, Unannounced Rounds, and Institution PREA Review Committee interview protocols.

The Contract Administrator was interviewed on November 17, 2023 by Auditor Tejuana King. This interview was referenced throughout the Corcoran audit report.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>During the tour, the phone reporting system was tested on two yards. Auditors called the phone number listed near the phones in which an inmate may use to report incidents of sexual abuse or sexual harassments. Auditors left messages, indicating the reason for the call. The following day, the PCM acknowledged both phones calls as the information was passed to the Warden. Auditors also utilized the language line to interpret inmate interviews in Hmong and Spanish. The process was easily navigated and staff were familiar with the process. Additionally during the tour, signage was observed throughout the institution, specifically noting signage near the phones providing inmates reporting information as well as audit notices. During the tour, staff walked auditors through the work change process and the intake process which includes the PREA screening and education. Auditors engaged in informal conversations with staff and inmates. Of note, inmates at Corcoran have tablets which contain PREA and other institution information. Inmates spoke with and showed auditors relevant information on their tablets.</p>
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Documentation Sampling

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

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

While on site, volunteer files were reviewed paying close attention to the application process, background checks, and education. Investigation files were reviewed, log books on all of the housing units were reviewed for unannounced rounds documentation, and education materials.

During the post audit, a number of completed documents were requested, including: PREA Screening, Classification Committee Chrono documenting rescreening, Inmate Education documentation, staff training records, employment applications, background checks, and mental health referrals. The exact numbers of these documents are noted in the body of the audit report.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	9	0	8	1
Staff-on-inmate sexual abuse	26	0	26	0
Total	35	0	34	1

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	8	0	8	0
Staff-on-inmate sexual harassment	86	0	86	0
Total	94	0	94	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

You indicated that you are unable to provide information for one or more of the fields above. Explain why this information could not be provided.

CDCR has the authority to investigate administratively and criminally. The investigation process is essentially one investigation with the outcome being either administrative in nature or referred for criminal charges. Staff sexual abuse investigations are conducted by a central investigation unit outside of the institution. It is not clear how many staff investigations are on track for criminal charges.

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	2	2	3	1
Staff-on-inmate sexual abuse	16	1	1	0
Total	18	3	4	1

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	2	0	6	0
Staff-on-inmate sexual harassment	40	6	11	0
Total	42	6	17	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	11
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	7
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>4</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>16</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>

Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	4
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	12
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The PREA Allegation Log also tracked allegations that after further review did not meet the definition of sexual abuse or sexual harassment. In addition to the investigation outcome numbers noted above, an additional 38 allegations were received and reviewed by investigators and determined not to be PREA related. These investigation files were also reviewed to determine the appropriateness of screening these allegations out.</p> <p>The 38 additional allegations include:</p> <p>Staff on Inmate SA: 8 Staff on Inmate SH: 29 Inmate on Inmate SA: 1 Inmate on Inmate SH: 0</p> <p>Two additional allegations stemming from incidents at other institutions were noted and logged, however it is not clear the nature of the allegations.</p>
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SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:</p>	<p>2</p>
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Non-certified Support Staff

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:</p>	<p>3</p>
<p>AUDITING ARRANGEMENTS AND COMPENSATION</p>	
<p>121. Who paid you to conduct this audit?</p>	<p> <input type="radio"/> The audited facility or its parent agency <input checked="" type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) <input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm) <input type="radio"/> Other </p>
<p>Identify your state/territory or county government employer by name:</p>	<p>Wisconsin Department of Corrections</p>
<p>Was this audit conducted as part of a consortium or circular auditing arrangement?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • 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	
<p>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.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures Department of Corrections and Rehabilitation (CDCR) Department Operations Manual (DOM) Chapter 5, Article 5, Chapter 44 Prison Rape Elimination Act California Code of Regulations Title 15, Section 3401.5 Staff Sexual Misconduct Penal Code of California 3. Documents Prison Rape Elimination Act Implementation correspondence; Memo dated August 13, 2015 - 5 pages

PREA Information for Orientation Handbook - 2 pages

Institution PREA Review Committee blank form - 2 pages,

Email to Institution Wardens dated August 13, 2015 Subject: Prison Rape Elimination Act (PREA) Implementation

California Department of Corrections and Rehabilitation Position Duty Statement - Captain, Adult Institution (PREA); 2 pages

Female Offender Programs & Services/Special Housing Mission Contract Beds Unit Organizational Chart; 5 pages

PREA Compliance Manager spreadsheet

4. Interviews

PREA Coordinator

PREA Compliance Manager (PCM)

5. Tour of the Facility

Findings:

Subsection (a):

California Department of Corrections and Rehabilitation (CDCR) facility California State Prison, Corcoran hereinafter referred to as Corcoran, follows CDCR Department Operations Manual (DOM) Chapter 5, Article 44 - Prison Rape Elimination Act. DOM Articles are further broken down into Sections, with specific sections being identified throughout this report. Prison Rape Elimination Act (PREA) Standards were implemented in CDCR August 13, 2015 with amendments to the DOM and was revised on May 15, 2018 and again May 19, 2020. DOM Chapter 5, Article 44 addresses the CDCR zero tolerance for sexual violence by an offender, staff sexual misconduct, and sexual harassment in institutions, community correctional facilities, conservation camps, and for all offenders under its jurisdiction. Within DOM Chapter 5, Article 44, education, prevention, detection and response protocols are outlined. This includes investigative and disciplinary process.

DOM Chapter 5, Article 44, Section 54040.3 contains definitions of prohibited behavior and includes sexual violence by an offender, sexual harassment by an offender, staff sexual harassment towards an offender and staff sexual misconduct. The definition of staff sexual misconduct includes " Any threatened, coerced, attempted, or completed sexual contact, assault or battery between staff and offenders". The definition also references California Code of Regulations (CCR), Title 15 Section 3401.5 and Penal Code of California Part 1, Title 9, Chapter 5, Section 289.6. Both codes define sexual activity as sexual intercourse, sodomy, oral copulation, any type of sexual penetration, rubbing or touching someone else's

	<p>sexual organs, including their breasts, for sexual gratification, and rubbing or touching him or herself in the presence of another person for sexual gratification.</p> <p>DOM Chapter 5, Article 44 Section 54040.12 states that all allegations of sexual violence, staff, sexual misconduct, and sexual harassment will be investigated. Specifically, DOM Chapter 5, Article 44 addresses inmate Disciplinary Process in Section 54040.15, noting the potential for criminal prosecution and classification determinations. DOM Chapter 5, Article 44 does not specifically address staff discipline, other than to note that staff misconduct is reported to the Hiring Authority. CCR Title 15 Section 3401.5 defines staff sexual misconduct and addresses and notes that the employee is subject to disciplinary action and/or criminal prosecution.</p> <p>Subsection (b):</p> <p>CDCR employs a state-wide PREA Coordinator housed in the Female Offender Programs and Services/Special Housing. The PREA Coordinator is a Captain classification and reports directly to the Correctional Administrator. The PREA Coordinator reports having sufficient time to manage statewide PREA responsibilities and highlights the team designated to address PREA responsibilities. In addition to the PREA Coordinator, PREA Compliance Unit employs two lieutenants and various other staff to support PREA efforts statewide.</p> <p>Subsection (c):</p> <p>CDCR has identified 34 PREA Compliance Managers (PCM) and additional backup PREA Compliance Managers to support PREA initiatives within each institution and the Contract Beds Unit. The PCM position at Corcoran is held by a Correctional Captain, who reports directly to the Chief Deputy Warden. The PCM reports having the time to address PREA responsibilities, despite an extremely busy institution, serving a variety of missions. He describes his specific responsibilities coordinating efforts to meet the PREA standards, and furthered that PREA is the responsibility of all staff. This was evident while on site, as auditors observed and interacted with a team of Corcoran staff, who together ensured all areas of inmate sexual safety were being addressed.</p> <p>Corrective Action: None</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire

2. Policy and Procedures

3. Documents

Standard Agreement between CDCR and WestCare California effective July 1, 2020 through June 30, 2025; 200 pages

Standard Agreement between CDCR and Mental Health Systems effective July 1, 2020 through June 30, 2025; 201 pages

Standard Agreement between CDCR and St. John's Program for Real Change effective July 1, 2021 through June 30, 2026; 202 pages

Standard Agreement between CDCR and Epidaurus DBA Amity Foundation effective Upon Approval through June 30, 2024; 204 pages

Standard Agreement between CDCR and WestCare California effective July 1, 2018 through June 30, 2023; 210 pages

Standard Agreement between CDCR and Los Angeles Centers for Alcohol and Drug Abuse effective July 1, 2018 through June 30, 2023; 208 pages

Standard Agreement between CDCR and Los Angeles Centers for Alcohol and Drug Abuse effective Upon Approval through June 30, 2025; 183 pages

Standard Agreement between CDCR and Butte County Probation Department effective November 1, 2019 through June 30, 2024; 187 pages

Standard Agreement between CDCR and HEALTHRIGHT 360 effective November 1, 2019 through June 30, 2024; 187 pages

Standard Agreement between CDCR and CORECIVIC INC effective November 1, 2019 through June 30, 2024; 187 pages

Standard Agreement between CDCR and Epidaurus DBA Amity Foundation effective November 1, 2019 through June 30, 2024; 187 pages

Standard Agreement between CDCR and Community Education Centers Inc. effective November 1, 2019 through June 30, 2024; 187 pages

Standard Agreement between CDCR and Turning Point of Central California effective November 1, 2019 through June 30, 2024; 187 pages

Memorandum dated February 1, 2022 from PREA Coordinator to PREA Auditors;
Subject: Contracting with other entities for the confinement of inmates - 115.12

CDCR Special Terms and Conditions Exhibit D

CDCR Volunteer/Contractor Informational Sheet Exhibit M

Memorandum dated December 30, 2022 to Male Community Re-Entry Program (MCRP) Providers and Custody to Community Re-Entry Program (CCTRP) Providers

Subject: Compliance to Prison Rape Elimination act (PREA)

Contract Compliance Review Report Prison Rape Elimination Act - CCTRP San Diego dated March 31, 2022

Contract Compliance Review Report Prison Rape Elimination Act - CCTRP San Diego dated May 10, 2023

Contract Compliance Review Report Prison Rape Elimination Act - CCTRP- Santa Fe Springs dated March 30, 2022

Contract Compliance Review Report Prison Rape Elimination Act - CCTRP La Cada Santa Fe Springs dated June 8, 2023

Contract Compliance Review Report Prison Rape Elimination Act - Casa Aurora CCTRP - Bak dated March 9, 2022

Contract Compliance Review Report Prison Rape Elimination Act - Casa Aurora dated May 16, 2023

Contract Compliance Review Report Prison Rape Elimination Act - CCTRP - Stockton dated March 11, 2022

Contract Compliance Review Report Prison Rape Elimination Act - CCTRP - Stockton dated April 20, 2023

Contract Compliance Review Report Prison Rape Elimination Act - Amistad De Los Angeles dated April 19, 2022

Contract Compliance Review Report Prison Rape Elimination Act - Amistad De Los Angeles dated May 17, 2023

Contract Compliance Review Report Prison Rape Elimination Act - Kennemer Center dated December 20, 2022

Contract Compliance Review Report Prison Rape Elimination Act - LA-1MCRP-HR-360 dated April 5, 2022

Contract Compliance Review Report Prison Rape Elimination Act - LA-1 MCRP-HR360 dated June 7, 2023

Contract Compliance Review Report Prison Rape Elimination Act - Tri-County Treatment dated January 10, 2023

PREA Facility Audit Report Final: Boston Avenue Residential Reentry Center dated February 23, 2023

PREA Facility Audit Report Final: The GEO Group dated August 2, 2021

Contract Compliance Review Report Prison Rape Elimination Act - Long Beach MCRP dated June 8, 2023

Contract Compliance Review Report Prison Rape Elimination Act - CCTRP - Sacramento dated March 11, 2022

Contract Compliance Review Report Prison Rape Elimination Act - CCTRP - Sacramento dated April 18, 2023

Contract Compliance Review Report Prison Rape Elimination Act - La Entrada - CCTRPLA dated March 10, 2022

Contract Compliance Review Report Prison Rape Elimination Act - La Entrada dated May 9, 2023

4. Interviews

5. Tour of the Facility

Findings:

Subsection (a):

According to the Pre-Audit Questionnaire (PAQ), CDCR holds thirteen contracts for the placement and care of inmates. Twelve of the contracts in their entirety were included for review. All twelve contracts contain Exhibit D which addresses CDCR's commitment to the PREA standards and the expectation that the contracted agency "adopt and comply with the PREA standards, 28 Code of Federal Regulations (CFR) Part 115 and with the CDCR's Department Operations Manual, Chapter 5, Article 44". Exhibit D further addresses both CDCR staff and outside audit personnel conducting audits to ensure compliance with the PREA standards. Further, Contractors and Volunteers receive CDCR Prison Rape Elimination Policy - Volunteer/Contractor Information Sheet Exhibit M, which details CDCR's PREA policy and expectations.

Subsection (b):

Although language is and has been present in the current contracts, formal PREA compliance monitoring began in 2022. PREA compliance monitoring was documented in the PAQ for 9 contracted facilities in 2022 and 10 in 2023 using the Contract Compliance Review Report Prison Rape Elimination Act. This five-page checklist addresses all areas of the PREA standards. Completed forms indicated methods of evaluation and noted areas in which practices were observed or corrective action was made. Additionally, two of the facilities completed formal PREA audits, one in 2021 and one in 2023. According to the contract Administrator, the intent is to have DOJ PREA audits completed for all facilities in January 2024. Based on those audits, CDCR will work with the sites to ensure compliance with the recommendations. As of this writing, audits have not been completed. CDCR provided a tentative schedule for 10 contracted facilities to be audited in April, June and July of this audit year.

Corrective Action: None

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 1, Article 26 CDCR Department Operations Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> Staff Codes for Staff Vacancies 2023 Staffing Plan CSP-Cor California State Prison Corcoran Staffing Plan dated February 28, 2024 Email documenting staffing shortage dated December 11, 2023 Prison Rape Elimination Act (PREA) Annual Data Collection Tool and Staffing Plan Review; blank California Department of Corrections and Rehabilitation In-Service Training (IST) Prison rape Elimination Act (PREA) Participant Workbook Version 2.0 Course Code: 11054378; 62 pages PREA Annual Data Collection Tool and Staffing Plan Review dated January 17, 2024 4. Interviews <ul style="list-style-type: none"> Warden PREA Coordinator PREA Compliance Manager 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44, Section 54040.18 addresses the institutional staffing plan for each facility operated by CDCR. Section 54040.18 requires each facility develop, document and make its best effort to comply with the staffing plan to protect inmates</p>

against sexual abuse. Facilities are required to consider the 11 factors as noted in 28 C.F.R. Part 115 Section 115.13. Further, DOM Chapter 1, Article 26, Section 14090.1 notes that the CDCR utilizes the American Correctional Association (ACA) Manual of Standards for Adult Correctional Institutions for all departmental regulations, policies, and operational procedures.

According to the PAQ, since the last audit, the average daily population is 3439 and the institutional staff plan is designed for the average daily population of 4477. Corcoran operates with a current staffing plan which was recently updated, reflecting the average daily population as of October 31, 2023. The staffing plan includes the 11 factors noted in the 28 C.F.R. Part 115 Section 115.13 and DOM. Both the Warden and PCM discussed the staffing plan and considerations in its development. The Warden addressed actions taken when staffing levels are low, such the use of overtime or program modification.

Subsection (b):

Staffing levels are documented and disseminated for each watch. The information includes the use of overtime to cover vacant positions, positions remaining vacant and what was done to mitigate the remaining vacant positions. Typically these vacancies are generated by staff calling in sick. The Warden is actively involved in staff related discussions and decisions as she reviews the staffing from the day before and regularly meets with personnel to review staffing assignments and recruitment.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.17.1 requires at a minimum, an annual review of the staffing plan. During this annual review, the PREA Coordinator, PCM, and the Program Support Unit assess the staffing plan, the facility's deployment of video monitoring technology, and resources assigned to ensure adherence to the staffing plan. The Prison Rape Elimination Act (PREA) Annual Data Collection Tool and Staffing Plan Review dated January 17, 2024 was submitted and reviewed. The staffing plan review indicated all areas of the staffing plan were considered according to the PREA standards. The current Corcoran staffing plan was updated and includes current average daily population from 2023 and 2022 data for incidents of sexual abuse. The staffing plan is dated February 28, 2024 and is signed by the PCM, the Warden, and the PREA Coordinator.

The PREA Coordinator confirmed his involvement with the annual staffing plan review. If there are staffing issues, facilities reach out to the PREA Coordinator to discuss and evaluate the need and strategies to mitigate staffing issues such as the deployment of monitoring technology or elevating staffing requests.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.4 addresses Security Rounds as a means of identifying and deterring sexual violence, staff sexual misconduct and sexual harassment. A custody supervisor is required to conduct weekly unscheduled security checks. The security checks are documented in the Unit Log Book in red pen and

	<p>indicates date, time, and location in which the security check was completed. By policy, staff are prohibited from alerting other staff of the security rounds unless such announcement is related to a legitimate operational function of the facility.</p> <p>The California Department of Corrections and Rehabilitation In-Service Training (IST) Prison Rape Elimination Act (PREA) Participant Workbook Version 2.0 Course Code: 11054378 consisting of 62 pages was submitted for review. Page 19 confirms that staff are trained regarding security rounds expectations as noted in the DOM.</p> <p>Additionally, 29 log book pages were submitted for review, verifying security rounds are completed on all three watches. They were noted in red ink and identified the staff, date, and time. Examples were provided from various housing units.</p> <p>Furthermore, during the tour, log books on each housing were reviewed, and confirmed regular security rounds being completed on all three watches.</p> <p>Recommendation: 115.13 (d) When updating In-service training for PREA, include in the lesson plan that staff are prohibited from alerting other staff of the security rounds, unless the announcement is related to legitimate operational function of the facility. Although this may be common practice and not specific to PREA, this training is an opportunity to reinforce the expectation.</p> <p>Corrective Action: None</p>
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115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures 3. Documents 4. Interviews <p>Warden</p> <p>PCM</p> <p>Random Staff</p>

	<p>5. Tour of the Facility</p> <p>Findings:</p> <p>Subsection (a):</p> <p>Corcoran does not house any inmate under the age of 18 years old, as noted in the PAQ and confirmed by the Warden, PCM, and random staff.</p> <p>Corrective Action: None</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <p>CDCR Department Operations Manual Chapter 5, Article 19 - Arrest, Search, and Seizure</p> <ol style="list-style-type: none"> 3. Documents <p>Memorandum dated February 8, 2019 subject: Changes in the use of the ADANI CONPASS low dose scanner</p> <p>California Department of Corrections and Rehabilitation In-Service Training (IST) Prison rape Elimination Act (PREA) Participant Workbook Version 2.0 Course Code: 11054378; 62 pages</p> <p>Memorandum dated November 6, 2020 subject: Overview of Senate Bill 132 - Training; 3 pages</p> <p>Memorandum dated September 24, 2019 subject: Policies and procedures related to working with transgender and gender non-conforming inmates; 6 pages</p> <p>CDCR In-Service Training (IST) version 2.0 Working Successfully with Transgender, Intersex, and Non-Binary Inmates Lesson Plan; 78 pages</p>

CDCR In-Service Training (IST) version 2.0 Working Successfully with Transgender, Intersex, and Non-Binary Inmates Lesson Plan; 72 pages

CDCR Overview of Senate Bill 132; 44 slides

Memorandum to Inmates from Warden regarding Prevention From Opposite Gender Viewing for Perforated Steel Cell Doors; dated December 6, 2023

Course Enrollments "Working Successfully with Transgender Inmates 2023 - Online - OJT - 11063366" dated March 18, 2024

4. Interviews

PCM

Random Staff

Random Inmates

5. Tour of the Facility

Findings:

Subsection (a):

According to DOM Chapter 5, Article 19, Section 52050.16.5 cross gender unclothed body searches by correctional staff, other than qualified medical staff, should not be conducted unless an emergency exists. According to the PAQ, in the past year, there have not been any cross-gender strip or body cavity searches at Corcoran.

In February of 2019, a memorandum was issued to Associate Directors in the Division of Adult Institutions, Wardens, PREA Compliance Managers and In-Service Training Managers addressing the use of the Adani Compass Low Dose Scanner. This memorandum directed each institution to ensure that operators of the low dose scanner were of the same gender as the inmate being scanned. It further directed institutions to ensure adequate number of staff certified to use the scanner were on shift. If staff of the opposite gender scanned an inmate, it had to be during exigent circumstances and documented in a Notice of Unusual Occurrence. This memorandum also required local Operations Procedures to be amended to reflect these changes. Within the past year, there has not been a completed Notice of Unusual Occurrence documenting a cross gender search, which is consistent with the report that none have occurred.

Subsection (b):

Corcoran does not house female inmates. However, CDCR DOM Chapter 5, Article 19, Section 52050.16.4 restricts cross-gender pat searches of female inmates absent exigent circumstances.

Subsection (c):

DOM Chapter 5 Articles 19 and 44 both requires a Notice of Unusual Occurrence when a cross-gender strip or visual body cavity search is completed, or a cross gender pat search of female inmates occurs. This is reviewed by a supervisor and routed to the institution's PREA Compliance Manager for review and document retention. According to the PAQ, and verified by the PREA Compliance Manager, in the past year, there has not been a cross gender strip or body cavity search. Training materials confirm staff are trained to document cross gender searches utilizing the Notice of Unusual Occurrence.

Subsection (d):

Corcoran follows DOM Chapter 5, Article 44, Section 54040.4, each institution is required to enable inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Modesty screens are permitted by policy to prevent incidental viewing, except when negatively impacting safety and security.

Corcoran is comprised of six yards, five of which are in use. Yards 3A, 3B, and 3C essentially mirror each other in terms of the number and design of housing units, vocational and program buildings. An opposite gender notice is affixed to the entrance of each housing unit. Each cell is a wet cell containing a toilet and sink, with individual shower stalls on each tier for communal use. Showers face the day room and officer stations. Showers are single stall with a door. Modesty screens are installed on the shower doors in a manner to provide coverage while still ensuring safety, with views of the lower and upper areas into the shower. Housing units in yards 4A and 4B mirror each other. Each yard contains 4 buildings, with two wings of each building, and four halls in each wing. A hallway with offices connects the two wings of each building. An opposite gender notice is affixed to the entrance of each housing unit. Each cell is a wet cell containing a toilet and sink. Some of the cell doors are constructed with perforated steel, allowing full viewing of the inmate. On December 6, 2023, the Warden issued a memorandum permitting inmates to attach a towel to the door when toileting or changing clothes to mitigate opposite gender viewing. Showers on the housing units are common, single stalls. Modesty screens are also installed on these doors, allowing for privacy while showering, yet ensuring safety of those showering. In addition to general population housing, Corcoran contains Segregated Housing Unit (ASU). ASU is designed with eight wings, containing wet cells on each side of the wing and common showers. Further, population resides in CTC, the medical units. These cells are single cells and house inmates with higher medical needs. All housing units utilize monitoring technology and mirrors to enhance supervision. Housing units which mirror each other, also mirror each other in camera and mirror placement. Camera and mirror views still allow inmates privacy when showering, toileting, or changing clothes.

Toilets are located throughout the institution and were particularly noted during the tour. Most toileting facilities appeared to provide adequate privacy with half frosted

windows, half doors, or stalls with half walls. Green mesh material was added to the bars on the R&R holding cells to provide privacy to inmates while using the toilets. Several specific areas to note are the open bay of toilets in the gymnasiums and toilet area on recreation yards. The toilet areas in the gymnasiums are allowed some privacy, but given the layout, not all toilets are afforded the same level of privacy when in use. It is recommended that either privacy curtains are used to allow privacy both in person and on the cameras or set the cameras to pixelate when focusing on people in that area. Additionally, the toilets on the recreation yards are in the open with a short wall. To afford additional privacy, a green mesh curtain was installed. However, due this being outside in the weather, the curtain is sagging and not providing the coverage it once was. Rather than repeated attempts to fix the screen, it is recommended that a more permanent barrier be installed such as a metal sheet or screen.

During the tour, work change areas were observed. In this area, inmates are searched before returning to their yard after work or program. The search is not a full unclothed body search, however, much of the clothing is removed. When this space is in use, signage is utilized to advise staff that the space is in use and not available for entry. Additional camera views were observed for the work change area and were pixelated when in use. Very few supervisors have the ability to remove the pixelated view of the recording should there be a need.

DOM Chapter 5, Article 44, Section 54040.4 also addresses cross gender announcements which, by policy, occur at the beginning of each shift and/or when the status quo within the housing unit changes. Training materials confirm staff are trained in cross gender announcements consistent with policy. During the tour, the cross gender announcement was heard.

Staff who were interviewed confirmed that inmates are able to dress, shower, and use the toilet without being viewed by staff of the opposite gender. Staff noted privacy screens and partitions on showers and urinals. Additionally, all staff indicated that cross gender announcements are made when a female enters the unit. Female staff indicate they make an announcement when entering a unit by yelling a statement such as "female on the tier" or "female staff on the unit". Male staff indicate they also make the announcement when female staff enter and ensure it is logged in the log book.

Inmates consistently reported that they are able to shower, change clothes, and use the toilet without being viewed by staff. Many noted the privacy screens on the shower doors and noted that the only time they may be seen is if staff try to look into the cell or shower area. Just under 60% of inmates confirmed that cross gender announcements are made. Some inmates reported that is sometimes occurs, depending on the staff and the housing unit. Additionally, inmates who use hearing aids, may not hear the announcement.

Subsection (e):

DOM Chapter 5, Article 19, Section 52050.16.7 addresses Unclothed and Clothed Body Searches of Transgender and Intersex Inmates. The process is outlined and

provides clear direction to staff that if staff are unable to determine the genital status of an inmate through medical records or an interview with the inmate, the inmate is placed on single-cell status until a medical evaluation is completed. Submitted training materials verify that staff are trained not to search or physically examine a transgender inmate for the sole purpose of determining the inmate's genital status and provides other options for making the determination. All random staff interviewed acknowledged a policy, or at a minimum, stated they are not allowed to conduct an unclothed search of an inmate to determine genital status. Inmates interviewed confirmed they were not searched for the sole purpose of determining genital status.

Subsection (f):

Corcoran submitted training documents and memorandums for review. These memorandums and training lesson plans and power points consistently contained language outlining how a search should be completed as well as addressing staff professional and respectful communication and conduct. The PAQ indicated that 75% of security staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner. All custody staff interviewed confirmed having completed training to conduct cross gender or transgender clothed searches. Several staff furthered by demonstrating appropriate techniques for clothed body searches. Course Enrollment Training records for Working Successfully with Transgender Inmates 2023 indicates 11 custody staff not on leave have yet to complete the training. It appears that more than 75% of custody staff have completed the training identified to address cross-gender pat down searches and searches of transgender and intersex inmates.

Recommendation: 115.15(d) Ensure proper coverage of all toileting areas in the gymnasiums and the outdoor recreation yards. Some of the toilets in the gymnasium provide adequate privacy, but given the layout and number of toilets, no all are afforded the same privacy. It is recommended that either privacy curtains or screen be installed or pixelate the cameras focusing on the toilets. Additionally, it is recommended that a more permanent barrier be installed in front of the toilet areas on the recreation yards to maintain the integrity of the privacy screen despite various weather conditions. This may be accomplished by a metal sheet or screen and could potentially be fabricated in the institution vocational program at minimal cost..

Recommendation: 115.15(d) To ensure inmates who have a hearing impairment receive notice that female staff are on the unit, it is recommended that lights or other visual sign be installed to visually alert inmates when female staff are on the housing unit.

Corrective Action: None

proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire
2. Policy and Procedures

CDCR Department Operation Manual Chapter 5, Article 44

3. Documents

I Speak Language Identification Guide

Memorandum dated October 6, 2017; Subject: Inmates with disabilities and inmates who are limited English proficient

CDCR Disability Code Definitions

Certified Bilingual Interpreters (Spanish)

Standard Agreement between CDCR and Interpreters Unlimited effective July 1, 2021 through June 30, 2024

CDCR 128-B General Chrono; 26

Classification Committee Chrono; 16

4. Interviews

Agency Head

Random Staff

Inmates

5. Tour of the Facility

Interpreters Unlimited

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.4 addresses Offender Education and lists a number of PREA educational opportunities for inmates, including orientation while in reception center either written or multimedia presentations, PREA brochure, PREA Booklet, posters, and offender handbook. Section 54040.4 also states that provisions

shall be made to ensure effective communication for those not fluent in English, those with low literacy levels, and those with disabilities. Section 54040.4 furthers that offender peer educators may be used to enhance knowledge and understanding of PREA and sexually transmitted diseases.

The language found in Section 54040.4 is reiterated in a memorandum dated October 6, 2017. The memorandum further provides examples of how to provide equal opportunity to participate in and benefit from all aspects of CDCR's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Examples include querying the inmate to determine whether or not assistance is needed to achieve effective communication, or giving priority to the inmate's primary means of communication, such as sign language interpreter or auxiliary communication aid.

The agency head confirmed that California uses the Clark Remedial Plan to accommodate individuals with a developmental disability. Staff provide accommodations for anyone with a disability or is limited English proficient. CDCR has the option to use interpreters, provide staff assistance, sign language interpreters, and bilingual materials. This accommodation is also known as "effective communication" and is used "when interacting with those who are identified as developmentally disabled, have mental health concerns, have a less than 4th grade reading level, have physical disabilities or language other than English. It is a process of asking open ended questions to ensure the individual has the information. Staff then document how they determined and addressed the communication gap.

Subsection (b):

DOM Chapter 5, Article 44, Section 54040.4 also requires written and verbal communications be available in English and Spanish. During the tour of Corcoran, auditors reviewed the Orientation Handbook in both English and Spanish. Additionally, postings throughout the institution were available in both languages, as well as Hmong.

A copy of the I-Speak Card was submitted through the PAQ. Institutions maintain a list of staff who are bilingual and are able to serve as in interpreter. If staff are not available, interpreter services are available by phone through Interpreters Unlimited. The Standard Agreement between CDCR and Interpreters Unlimited was reviewed and confirmed the relationship between both organizations. The interpretation services were utilized during the audit for Spanish and Hmong languages. The process to obtain services was easily navigated and accommodated the needs of the interview.

Twelve inmates were interviewed who were identified with a cognitive or physical disability or limited English language. All but one inmate indicated they received information about sexual abuse and sexual harassment in a manner they were able to understand. The one who indicated he did not, clarified that he did not receive anything, however acknowledged there are signs posted "everywhere". Inmates identified accommodations such as written format, materials written in Spanish, English, and Hmong and going to staff if they needed something explained. CDCR 128-B General Chrono documents the receipt of PREA education and Effective Communication. Completed examples were submitted for review and indicated efforts

made to ensure the individual received the information. Additionally, during initial and annual classification reviews, effective communication is addressed with each inmate. Classification Review Chronos were submitted for review. If there was not a need for effective communication, a note as to why was included, such as the reading or education level attained. In the same manner, when effective communication was a concern, the communication accommodation was indicated, such as, " using simple words and phrases", "able to repeat conversation in his own words", and "providing concise details....using simple English" . The comments appeared individualized and responsive to the inmate's needs.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.7 mirrors language 28 CFR 115.16 (c) and Section 54040.12 further reiterates the standard specific to investigations; "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 investigation."

According to the PAQ, during the past year, no inmate has been used to interpret for another inmate regarding a PREA related incident. Staff consistently reported they would use other staff to interpret or utilize the language line interpreter service. Staff who were unsure, indicated they would call a supervisor. Inmates who are limited in English were indicated they would tell staff or use the phone numbers posted on the wall. No one stated they would go to another inmate.

Corrective Action: None

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 3, Article 6 - Appointments</p> <p>CDCR Department Operations Manual Chapter 3, Article 7 - Personnel Identification Cards</p> <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <ol style="list-style-type: none"> 3. Documents

Hiring Guide for Managers and Supervisors - Phase 6 Selecting Candidates 5 pages

CDCR 1951 Supplemental Application For All CDCR Employees; blank form

CDCR 1951 Supplemental Application For all CDCR Employees; 15 completed

CDCR 2164 Live Scan Response; blank form

CDCR 2164 Live Scan Response; 15 completed

Personnel Information Bulletin dated September 16, 2016

Memorandum dated July 14, 2017; Subject: Completion of Background Checks Under the Prison Rape Elimination Policy

Memorandum dated October 6, 2017; Subject: Hiring and promotion decisions

CDCR Special Terms and Conditions Exhibit D

Memorandum dated February 26, 2016; Subject: Personnel Identification Card Issuance

STD 678 Examination / Employment Application; State of California Application Instructions and State of California Application

4. Interviews

Staff Services Manager (Human Resources)

5. Tour of the Facility

Findings:

Subsection (a):

According to DOM Chapter 3, Article 6, Section 31060.3 the agency Secretary is the appointing authority for civil service positions in CDCR with delegated authority to include Undersecretaries, Assistant Secretaries, Directors, Deputy Directors, Assistant Directors, Wardens, RPAs and General Manager, CALPIA. This section specifically references 28 CFR Part 15, Standard 115.17 in that "hiring authorities shall not hire or promote anyone who may have contact with inmates, who:

- has engaged in sexual violence, or staff sexual misconduct of an inmate in a prison, jail, lockup, community confinement facility, juvenile facility or other institutions;
- 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;

- has been civilly or administratively adjudicated to have engaged in the activity described immediately above."

This language is mirrored on the CDCR 1951 Supplemental Application for All CDCR Employees, which all applicants seeking employment must complete and sign. The employee is informed that all of the information is considered during the selection process.

The Hiring Guide for Managers and Supervisors, Phase 6: Selecting Candidates was submitted in the PAQ. This document was revised in October 2022 and consists of five pages. This provides a step by step procedure for conducting reference checks, reviews, making hiring recommendations and document retention. The procedure includes what to do when a candidate previously worked at a correctional facility and includes asking the prior institutional employer if the candidate, while employed at the institution or facility, was the candidate investigated for sexual abuse and the allegations substantiated. The previous employer is also asked if the candidate resigned from employment prior to the completion of an investigation of sexual abuse. If the answer to either question is yes, the direction to the hiring manager is to stop the hiring process as the candidate is no longer eligible for hire.

DOM Chapter 5, Article 44 defines "staff" as including volunteers and independent contractors to an institution.

Subsection (b):

DOM Chapter 3, Article 6, Section 31060.3 also requires hiring authorities to consider substantiated incidents of sexual harassment in all hiring decisions. This language is also found on the CDCR 1951 Supplemental Application For All CDCR Employees, which all applicants are required to complete. The Staff Services Manager confirmed that Corcoran considers incidents of sexual harassment when making decisions to hire or promote. This is information asked of previous institutions for transfer candidates and is a part of the hire package for all candidates.

Subsection (c):

A criminal records check is a requirement for employment with CDCR.

Prior to hiring employees who may have contact with inmates, all prior institutional employers are contacted to learn if the candidate was involved in a substantiated incident of sexual abuse or if the candidate resigned during an investigation. If the candidate answers affirmatively to having been the subject of a substantiated allegation of sexual abuse or having resigned during a pending investigation of sexual abuse prior to the investigation conclusion, then according to The Hiring Guide for Managers and Supervisors, Phase 6, the hiring manager is to stop the hiring process as the candidate is no longer eligible for hire.

In 2017, CDCR issued a memo to CDCR Background Investigators outlining PREA standard requirements and how CDCR resolved to follow the standard. This included completing a criminal background records check before hiring new employees and

making best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or resignation during a pending investigation of an allegation of sexual abuse. These requirements are formalized in DOM Section 31060.16 updated in 2021. Additionally, form 2025 Employment Reference Questionnaire was amended to include questions about substantiated incidents of sexual abuse and resignation during an investigation.

The CDCR 1951 Supplemental Application For All CDCR Employees is completed by all applicants, including candidates who transfer classification or are seeking promotion as noted in the Personnel Information Bulletin dated September 16, 2016. Section D of the CDCR 1951, includes a section for applicants to list all previous correctional institution employers for whom they have previously worked.

The Staff Services Manager confirmed that criminal background checks are conducted on new staff, transfer, and those being considered for promotion. CDCR utilizes the Live Scan System. According to the PAQ, 556 people who have contact with inmates were hired during the past year. Auditors were provided the completed CDCR 1951 for 15 new staff, including healthcare, non-custody, custody, and contracted staff. All of the applicants answered "no" to the questions asked in Section D - Compliance with the Federal Prison Rape Elimination Act as noted in 115.17 a & b.

Subsection (d):

DOM Section 31060.16 Criminal Records Check was submitted for review. The policy specifically requires a background check for employment with CDCR and Section 31060.16.1 specifically identifies contractors and subcontractors as being mandated for Live Scan. This process was confirmed with the Staff Services Manager. The Special Terms and Conditions included with Contractor Bids includes PREA language which includes zero tolerance for sexual misconduct and requirements for contractors to refrain from assigning employees to position in which they may have contact with an inmate if they have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, been convicted of engaging or attempting to engage in sexual activity in the community by force or implied threats of force or coercion or if the victim did not consent or was unable to consent or refuse or has been civilly or administratively adjudicated to have engaged in the activity described. The contractor is notified a criminal background check will be completed for each contracted employee.

The PAQ indicates Corcoran had 6 contracts for services where criminal background record checks were conducted on all staff who may have contact with inmates.

Subsection (e):

DOM Section 31060.16 requires all employees to have a criminal records check completed. DOM Chapter 3, Article 7 contains the policy for Personnel Identification Cards. The Personnel Identification cards are issued to employees, contractors, consultants, volunteers, advisory group members and Department retirees. Cards are issued after a criminal records check is complete. According to the memorandum issued February 26, 2016 with the Subject Personnel Identification Card Issuance, the

CDCR employee Personnel Identification Card expires after five years. The Live Scan system is one which provides real time notification if an employee is arrested, thereby making subsequent criminal background checks unnecessary. Contractor Personnel Identification cards expire at the completion of a project or five years from the date of issue. Prior to receiving a new card, the contractor is required to complete a background check. The Live Scan and background check process was confirmed with the Staff Services Manager and documentation was submitted and reviewed to further verify the process.

Subsection (f):

Using the CDCR 1951, applicants are asked about prior incidents of sexual abuse in a confined setting, if they had been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or civilly or administratively found to have engaged in said behavior. All new employees and those seeking promotion complete this form. The Staff Services Manager confirmed these questions are asked on the employment forms.

Additionally, employees have a duty to disclose such misconduct. This is a noted requirement on the CDCR 1951.

Subsection (g):

When completing an Examination / Employment Application for the State of California, the applicant certifies with a signature; "I certify under penalty of perjury that the information I have entered on this application is true and complete to the best of my knowledge. I further understand that any false, incomplete, or incorrect statements may result in my disqualification from the examination process or dismissal from employment with the State of California. I authorize the employers and educational institutions identified on this application to release any information they may have concerning my employment or education to the State of California." Additionally, the CDCR 1951 Supplemental Application for All CDCR Employees specifically states above the applicant signature line; "Furthermore, I understand and agree that if material facts are later discovered which are inconsistent with or differ from the facts I furnished before beginning employment, I may be rejected on probation and/or disciplined, up to and including dismissal from State service." Completed CDCR 1951s all contained the applicants signature certifying the application contains truthful information and if facts are later discovered inconsistent with what is contained in the application, the employee may be disciplined.

According to DOM Chapter 3, Section 33030.19 Employee Disciplinary Matrix E.8, "Falsification of application or omission of information for employment or promotion when it materially affects acceptance or rejection for employment or promotion, is grounds for dismissal".

Subsection (h):

In addition to Live Scan criminal records checks, institutions contact previous institutions in which the applicant was employed. According to Staff Services

	<p>Manager, previous institutions in which a candidate was employed is contacted specific to PREA related questions. An example of this process was submitted and reviewed.</p> <p>Corrective Action: None</p>
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115.18 Upgrades to facilities and technologies	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures 3. Documents 4. Interviews <p>Agency Head</p> <p>Warden</p> <ol style="list-style-type: none"> 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p> <p>According to the PAQ, Corcoran has not acquired new facility or made any substantial modifications. The Warden clarified Corcoran recently opened a new medical clinical. In addition to considering the age and health needs of the population, the Institution also considered sexual safety of the population when planning the clinic. Warden explained she, the PCM, and PREA Sergeant toured the area to ensure line sight and PREA was considered.</p> <p>According to the Agency Head, when a CDCR facility is designing, acquiring, or planning substantial modifications, facilities consider the use of direct line of sight. Also considered are windows in office doors and ensuring doors are hung not to create a blind spot when open. While reviewing the space, they also consider how to mitigate blind spots with cameras and mirrors while balancing inmate privacy. When considering physical plant modifications, CDCR also considers staffing levels to</p>

	<p>ensure safety and security.</p> <p>Subsection (b):</p> <p>According to the PAQ, in 2021 Corcoran installed AVSS/BWC System. Corcoran has approximately 991 cameras throughout the facility. According to the head of CDCR, CDCR currently has a project to fund camera systems in all of their prisons and to upgrade needed monitoring technology. The camera footage will be utilized for investigative purposes for all sexual abuse and sexual harassment allegations.</p> <p>According to the Agency Head, CDCR has a project in place to fund camera systems in all CDCR prisons. This project will upgrade video surveillance and add cameras to current systems. This information will be used during the investigative process for all sexual abuse and sexual harassment allegations.</p> <p>Video surveillance technology and mirrors were observed throughout the institution, leaving very few areas a safety concern. All of the housing units, program areas, education, visiting rooms, and hallways were well covered. Additionally, every officer and sergeant who has direct contact with inmates has a body worn camera.</p> <p>Recommendation: Several areas during the tour were noted as benefiting from additional monitoring technology or mirrors as resources become available. The carpentry area in 3A, 3B Canteen and 3C Canteen are equipped with monitoring technology. However, due to the stacking of items and use of tall shelves, blind spots are created. Additionally, the dry/cold storage hallway in the main kitchen would benefit from a camera. This would capture who is entering the dry and cold storage areas and monitor the length of time in these areas, should an allegation come forward. Finally, CTC medical building is limited in the areas covered by monitoring technology. Noting this is a hospital setting, it is, however, an area housing some of the more vulnerable inmate patients. Current monitoring technology captures who is visiting each patient wing, but does not consistently capture patient doors.</p> <p>Corrective Action: None</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed:
	1. Pre-Audit Questionnaire

2. Policy and Procedures

CDCR Department Operations Manual Chapter 5, Article 44

California Department of Corrections and Rehabilitation California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1

3. Documents

Memorandum dated October 6, 2017; Subject: Evidence protocol and forensic medical examinations

Memorandum dated October 17, 2018; Subject: Sexual Assault Kit Processing

PREA: Initial Contact Guide; 2 pages

PREA: Custody Supervisor Checklist; 2 pages

PREA: Transportation Guide; 2 pages

CDCR Watch Command Notification Checklist

(PREA) Institution, DAPO, CST, and AIU Responsibilities All Staff-on-Offender Prison Rape Elimination act (PREA) Allegations, dated January 1, 2023

National Protocol for Sexual Assault Medical Forensic Examinations; dated April 13, 2013; 144 pages

CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators, Participant Workbook; Version 1.0, LDI Stand Alone BET ID 11057915

Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Participant Workbook; Version 1.0

California Correctional Health Care Services memorandum dated February 22, 2019

Standard Agreement between CDCR and Kings Community Action Organization; December 1, 2019 2021 through June 30, 2024; 21 pages

Kings Community Action Organization public website

4. Interviews

PREA Compliance Manager

Staff

Advocacy Agency

5. Tour of the Facility

Findings:

Subsection (a):

Corcoran is responsible for investigating allegations of sexual abuse. DOM Chapter 5, Article 44, Section 54040.8.1 addresses crime scene preservation and evidence under custody supervisor responsibilities. The custody supervisor is responsible to ensure a perimeter is established and an officer is posted to keep persons out of the crime scene area. Investigative Services Unit (ISU) staff or trained personnel are responsible for evidence collection. DNA evidence from the body is collected by a Sexual Assault Nurse Examiner (SANE) at a SART location.

A memorandum dated October 6, 2017 addresses sexual abuse investigations as it relates to potential evidence identification, preservation, collection and evidence processing based on institution procedure. Subsequently, a memorandum dated October 17, 2018 addresses sexual assault kit processing and provides direction regarding the processing of collected evidence. The memo reminds staff that every allegation of sexual violence and staff sexual misconduct are investigated by a locally designated investigator trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct. When collection of DNA related evidence from the body is necessary, this is to be completed by a Sexual Assault Nurse Examiner.

To ensure evidence is preserved and collected, checklists have been developed and provided to staff based on their area of responsibility in responding to a sexual assault. Specific checklists are provided to custody supervisors, first responders, and transportation staff outlining protocols for evidence preservation and collection. All three checklists remind staff to request, to the best of their ability, that the alleged victim does not shower, brush teeth, use the restroom or consume liquids. The checklist is specific to remind staff to ensure the suspect does not engage in those activities. The transportation Guide checklist list further provides step by step direction to preserve potential evidence should the victim or suspect need to change clothing prior to leaving the facility. Finally, the Watch Commander Notification Checklist also addresses notifications and what to do prior to transportation to the hospital.

Random staff who have the potential to serve as first responders were familiar with their responsibilities to preserve evidence. Staff talked about separating the victim and suspect and the concern of not destroying usable evidence by showering, eating, drinking or using the bathroom.

Subsection (b):

Corcoran does not house juvenile offenders as noted in the PAQ and 115.14.

CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Participant Workbook and corresponding Power Point was submitted for review. The training incorporates information from: The Peace Officers Standard and Training Guidelines on Adult/Adolescent Sexual Assault Investigations, PREA Resource

Center, National Council on Crime and Delinquency, United States Department of Justice, and National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents Patient 2012. The Basic Investigators training incorporates issues presented in the National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents such as victim centered care, informed consent, and confidentiality.

Subsection (c):

DOM Section 54040.9 indicates that victims of sexual assault are taken to a designated outside hospital or on-site location for forensic medical exams to be completed by a sexual assault nurse examiner. According to Chapter 4, Article 1 of the California Department of Corrections and Rehabilitation California Correctional Health Care Services Health Care Department Operations Manual, there is no cost to the alleged victim for treatment services related to sexual abuse or assault.

According to the PCM, Corcoran is in the process of establishing an MOU for sexual assault examinations with the Central Valley Forensic Nursing Specialists and Visalia SART. Family Services of Tulare County in Visalia directed auditors to Central Valley Forensic Nursing Specialists for information related to Corcoran.

The PAQ indicates that six forensic examinations occurred during the past year. Investigation files noted when sexual assault examiners were contacted prior to transport or when inmates were taken for an examination.

Subsection (d):

Inmates at Corcoran receive victim advocacy services from Kings Community Action Organization (KCAO). According to the Standard Agreement and Memorandum of Understanding, support services include a hotline number, confidential written correspondence, and in person crisis counseling. This relationship is formalized through a Memorandum of Understanding dated December 1, 2019 and is valid through June 30, 2024. The KCAO public website notes they provide Sexual Assault Advocates and Sexual Assault Forensic Examinations to prisoners in Kings County, including California State Prison - Corcoran.

According to DOM Section Chapter 5, Article 44, alleged victims of sexual assault have the right to have an advocate present during the medical examination, investigatory process and subsequent emotional support services. DOM Chapter 5, Article 44, Section 54040.19, requires institutions to provide victims mailing addresses and phone numbers for outside rape crisis organizations, victim advocacy groups and immigrant service agencies. Posters at Corcoran in English, Spanish, and Hmong are displayed for inmates informing them how to contact the Kings Community Action Organization either by the hotline number or confidential written correspondence. Additionally, the Rape Crisis phone number is posted by the phones.

According to DOM Section 54040.8.1 and the Watch Commander Notification Checklist, the Watch Commander, when a victim is sent to the outside hospital in response to a sexual assault, the Watch Commander contacts the rape crisis center to

request a victim advocate be dispatched.

According to the PCM, KCAO provides emotional support services and crisis intervention, including accompaniment to the sexual assault forensic examinations. This was confirmed by the KCAO public website and an interview with a Director from KCAO.

Subsection (e):

Victim Advocate is defined in DOM Section 54040.3 as someone employed by a Rape Crisis Center or a designated employee who has been certified by a rape crisis center and is trained in counseling of sexual assault victims. The definition further requires an employee to be a psychiatrist, psychologist, licensed clinical social worker, psychiatric mental health registered nurse, or staff person with a master's degree in counseling or have completed 40 hours of specialized training and is supervised by a staff member as previously noted.

According to DOM Section 54040.8.1 and the Watch Commander Notification Checklist, if a victim advocate is not available, designated, trained staff from the facility respond to the hospital to serve as the victim advocate and support person for the examination. Corcoran does not maintain a list of staff identified as victim advocates.

Subsection (f):

The responsibility of investigating all administrative and criminal allegations of sexual abuse lies with CDCR. This was confirmed during the interview with the investigators and PREA Compliance Manager. Additionally, a flow chart was submitted for review, indicating how staff-on-offender allegations are initially logged and investigated. This confirms that allegations of staff sexual misconduct are investigated by Office of Internal Affairs and Investigative Unit (AIU). Further, file review of investigations supported the noted investigative responsibilities and processes.

Subsection (g):

The responsibility of investigating all administrative and criminal allegations of sexual abuse lies with CDCR.

Subsection (h):

Corcoran does not utilize staff to conduct sexual assault examinations but utilizes qualified providers from Central Valley Forensic Nursing Specialists.

Corrective Action: None

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire

2. Policy and Procedures

CDCR Department Operations Manual Chapter 1, Article 35

CDCR Department Operations Manual Chapter 3, Article 14

CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

Institution, DAP, CST, and AIU Responsibilities All Staff-on-Offender Prison Rape Elimination Act (PREA) Allegations flowchart

Memorandum dated October 6, 2017; Subject: Policies to ensure referrals of allegations for investigations

CDCR PREA Annual Report - Calendar Year 2020 and Calendar Year 2021

PREA Investigation Tracking

4. Interviews

Agency Head

Investigators

5. Tour of the Facility

Findings:

Subsection (a) & (b):

CDCR custody staff are sworn law enforcement with the authority to conduct administrative and criminal investigations.

According to DOM Chapter 5, Article 44, Section 54040.12, all allegations of sexual violence, staff sexual misconduct, and sexual harassment are investigated and documented in writing. This section provides detailed processes for investigating allegations and continues to Sections 54040.12.1 through 54040.12.5. All allegations are referred to and initially investigated by the LDI, Locally Designated Investigator. This process is also confirmed on the Institution, DAP, CST, and AIU Responsibilities All Staff-on-Offender Prison Rape Elimination Act (PREA) Allegations flowchart.

The head of CDCR confirmed the zero tolerance policy for sexual abuse or sexual harassment and as such, all allegations are investigated and documented. Received allegations are forwarded to a Locally Designated Investigator (LDI) for initial inquiry. If the allegation involves staff misconduct, the investigation is forwarded to the Office of Internal Affairs.

DOM Chapter 3, Article 35, Section 31130.6 notes that the Office of Internal Affairs (OIA) Assistant Secretary has been given the authority to investigate allegations of employee misconduct by the Secretary of the Department pursuant to Government Code Section 11182. DOM Chapter 1, Article 35 identifies OIA as the department entity with the authority to investigate allegations of employee misconduct. It is in Chapter 3, Article 14 that states every allegation of employee misconduct in CDCR "be promptly reported, objectively reviewed, and investigated when appropriate".

In a review of the CDCR public website, the Department Operations Manual is available in its entirety. As previously noted, the DOM includes PREA and investigation policies and procedures. The DOM is found on the website under Regulations and Policy > Department Operations Manual.

In a memorandum dated October 6, 2017, all investigations of sexual abuse and sexual harassment are conducted by Institution Investigative Services Unit (ISU). When allegations of inmate-on-inmate sexual violence and harassment are found to be substantiated, Investigative Services Unit collaborates with the District Attorney's Office to determine prosecution. If allegations of sexual abuse or sexual harassment by staff are found to have potentially occurred after a preliminary investigation by the institution's Investigative Services Unit, the case is referred to the Office of Internal Affairs (OIA) within CDCR who has the authority to investigate staff misconduct allegations. OIA completes the investigation and works with the District Attorney to determine prosecution. This memo is supported by DOM Chapter 3 and Chapter 5.

The CDCR PREA Annual Report - Calendar Year 2020 and CDCR PREA Annual Report - Calendar Year 2021 was submitted and reviewed. The Annual Report breaks down types of allegations and further provides numbers of substantiated, unsubstantiated, unfounded, and ongoing investigations.

The PAQ indicates there were 130 reports of sexual abuse or sexual harassment in the past year, with 3 being referred for administrative investigation and none being referred for criminal investigation. While onsite, ISU provided tracking documentation of all investigations assigned to ISU and OIA. According to the investigation spreadsheet provided on site, in 2023, there were 131 investigations of sexual abuse and sexual harassment at Corcoran. During this time, one investigation of inmate on inmate sexual abuse was substantiated and referred to the District Attorney for criminal charges. It should be noted, of the 131 reports, after initial review and follow up by investigators, 38 reports did not meet the definition of sexual abuse or sexual harassment as defined by the PREA standards. Corcoran investigators and investigation files, confirmed that all inmates alleging an incident of sexual abuse, sexual harassment, or staff sexual misconduct are initially queried by LDI in ISU to gain basic information within 24 hours of the allegation being known to staff. Inmate

	<p>on inmate allegations are subsequently investigated by ISU staff. Staff on inmate allegations are forwarded to OIA for a thorough investigation.</p> <p>According to the investigation tracking sheet, 56 of 75 investigations remain open with OIA and 4 of 16 remain open with ISU. While on site, it was brought to auditor's attention that several investigations were pending closure with the Hiring Authority.</p> <p>Subsections (c) & (d):</p> <p>These subsections do not apply, as CDCR has the authority to and conducts administrative and criminal investigations.</p> <p>Corrective Action: None</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <ol style="list-style-type: none"> 3. Documents <p>CDCR In-Service Training Prison Rape Elimination Act (PREA) Version 2.1 and 3.0 BET Code 11054378;</p> <p>Instructor Text CDCR On-The-Job Training (OJT) Prison Rape Elimination Act (PREA) Version 2.0 BET 11053499;</p> <p>Participant Module CDCR In-Service Training Inmate/Staff Interaction Version 2.1 BET Code 11053211; Instructor Text</p> <p>Course Enrollments negative report; Prison Rape Elimination Act (PREA) OJT - 11053499; 2022 and 2023</p> <ol style="list-style-type: none"> 4. Interviews <p>In Service Training Manager</p> <p>Random Staff</p>

5. Tour of the Facility

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.4 addresses staff PREA training. Policy requires all staff, including employees, volunteers, and contractors receive training related to prevention, detection, response and investigation of sexual violence, staff sexual misconduct, and sexual harassment. Training is conducted during new employee orientation, annual training, and is included in the Correctional Training Academy. DOM specifies training to include: gender specific training based on the offender population at the assigned institution, how to conduct cross-gender pat-down searches, transgender pat-down searches and unclothed body cavity searches, conducting searches in a professional, respectful manner, and in the least intrusive manner possible consistent with security needs, how to communicate professionally with inmates including those who identify as Lesbian, Gay, Bi-sexual, Transgender, Intersex, and Gender Non-Conforming.

In-Service Training Prison Rape Elimination Act (PREA) Version 3.0 BET Code 11054378 was developed for all staff and updated in October 2022. This training address: zero tolerance policy; how staff fulfill their responsibilities to prevent, detect, report, and respond to sexual abuse and sexual harassment; dynamics of sexual abuse and sexual harassment in confinement; common reactions; how to detect and respond to signs of threatened and actual sexual abuse; professional relationships; professional communication, noting lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. Although training talks about the zero tolerance standard and notes the priority of preventing sexual violence, staff sexual misconduct and sexual harassment, training does not specifically address inmate rights. In-Service Training Prison Rape Elimination Act (PREA) Version 2.0 BET Code 11054378 was also reviewed in part. The highlighted topics include the zero tolerance policy, how to respond to sexual abuse and sexual harassment, and retaliation. Training provides an overview of relevant laws informing policies and procedure but do not go into specific laws regarding mandatory reporting to outside authorities. Staff are simply trained to report to a supervisor. Staff with the responsibility to notify outside agencies, are provided training and direction.

On-The-Job Training (OJT) Prison Rape Elimination Act (PREA) Version 2.0 BET 11053499 was developed as a refresher course and covers the zero tolerance policy, how to respond to sexual abuse and sexual harassment, retaliation and communication. Inmate/Staff Interaction BET Code 11053211 focus on Inappropriate relationships.

The random staff interviewed all confirmed they received training specific to PREA, specifically noting annual training in LMS. They identified training topics as noted in this standard.

	<p>Subsection (b):</p> <p>According to DOM Section 54040.4, training is gender specific based on the offender population at the assigned institution. New and transfer staff to Corcoran participate in orientation for new staff which addresses dynamics working with a male population.</p> <p>Subsection (c):</p> <p>DOM 54040.4 addresses new employee orientation training and annual training.</p> <p>The 2021, 2022, and 2023 training plans for institution custody and non-custody was submitted and reviewed. Additionally, the 2023 training plan for headquarter staff was submitted. The training plans indicate that all institution staff are required to complete one hour On-the-Job Prison Rape Elimination Act training, course code 11053499. Headquarter custody staff are also required to complete the same training.</p> <p>Course Enrollments negative report for Prison Rape Elimination Act (PREA) 2023 OJT - 11053499 was submitted. The In Service Training Manager explained that 2055 staff were enrolled in PREA LMS (On line) training for 2023 with 1930 or 94% completing the training. It should be noted, of the 125 people not completing training in 2023, 96 are on long term or extended leave. The remaining 29 staff were assigned training in October.</p> <p>Subsection (d):</p> <p>Upon completion of PREA training through the LMS system, staff electronically sign the PREA Knowledge Review confirming an understanding of the training content. Since training is completed electronically, the system tracks participants training progress and completion. This information can be queried and populated into a report.</p> <p>Corrective Action: None</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p>

CDCR Department Operations Manual Chapter 10, Article 9

3. Documents

CDCR On-The-Job Training (OJT) Prison Rape Elimination Act (PREA) Version 2.0 BET 11053499; Participant Module

Memorandum dated October 6, 2017; Subject: Volunteer and Contractor Training

Volunteer Groups Contact List 2023

CDCR 2301 PREA Policy Information For Volunteers and Contractors Part A and Part B

CDCR 844 Training Participation Sign-in Sheet

4. Interviews

Volunteer Coordinator (CRM)

Volunteers

5. Tour of the Facility

Volunteer File Review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.4 includes volunteers and contractors with all staff when requiring training related to prevention, detection, response, and investigation of inmate sexual violence, staff sexual misconduct, and sexual harassment. DOM Chapter 10, Article 9, Section 101090.7 Volunteer Orientation, requires volunteers to complete orientation prior to an assignment as a volunteer. DOM also states that the Community Resource Manager in conjunction with In-Service Training provides PREA on-the job training courses for self-study.

A memorandum was issued on October 6, 2017 regarding volunteer and contractor training. This memorandum references standard 115.32 and requires volunteers and contractors complete one hour of training in regards to Inmate/Staff interaction in addition to other training based on positions which have little to no custody staff supervision.

The CDCR In-Service Training Prison Rape Elimination Act Version 2.0 participant Module was submitted for review. This is the same training module completed by custody and non-custody institution staff and provided to volunteers and contractors.

According to the Pre-Audit Questionnaire, Corcoran has 274 volunteers and contractors who have contact with inmates and have received the PREA In-Service Training. A list of 53 active volunteers was submitted on site. Six volunteers were

contact and three volunteers were interviewed by phone. They described the process for being approved to volunteer at Corcoran. Within that process is the completion of PREA training prior to volunteering and then annually, thereafter. PREA training includes the volunteer's responsibilities to inmate sexual safety, such behaviors when interacting with inmates, what to look for, and reporting suspicions or knowledge of sexual abuse or sexual harassment.

Subsection (b):

In a memorandum dated October 6, 2017 regarding volunteer and contractor training, all volunteer and contract staff are to receive one hour of mandatory training in regards to Inmate/Staff Interaction. The memorandum further states "Although all volunteer/contract staff are required to complete the same training, specific staff.....are mandated by institutions to complete more extensive training based on their level of contact with inmates." This memorandum essentially identifies the minimum amount of training with additional required training depending on the volunteer/contractor's role within the institution. According to the training plan for institution staff submitted in the OAS for 115.31, On-The-Job Training (OJT) Prison Rape Elimination Act (PREA) Version 2.0 BET 11053499 is scheduled for one hour.

The volunteers described the training they received pertaining to PREA. They confirmed training included the CDCR zero tolerance policy for sexual abuse and sexual harassment and how to report if they became aware of such an incident.

Subsection (c):

DOM Chapter 10, Article 9, Section 101090.6.2 addresses the volunteer application and the CDCR form 2301, PREA Policy Information for Volunteers and Contractors.

According to the Community Resource Manager, all volunteers and contractors receive the PREA training. PREA training is conducted on line and is required annually. Upon completion of training, the volunteer signs a training acknowledgement and sends the completed form to the institution. Six volunteer files were reviewed and all six contained documentation confirming the volunteer completed PREA training. Additionally, the CDCR 2301 PREA Policy Information for Volunteers and Contractors Part A and Part B were viewed in the files. The CDCR 2301 outlines the PREA policy including CDCR's zero tolerance for sexual abuse and sexual harassment, prohibited behaviors, reporting, and basic first responder duties. Additionally, CDCR 2301 Part B specifically asks volunteers the same questions asked of candidates for employment regarding previous behavior of sexual abuse or sexual harassment. The volunteer's signature is affixed to both Section A and Section B acknowledging the information.

Corrective Action: None

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire

2. Policy and Procedures

CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

Sexual Abuse/Assault Prevention and Intervention; English and Spanish

PREA Information for Orientation Handbook; English and Spanish

Sexual Violence Awareness Brochure; English and Spanish

Senate Bill 132 Brochure; English and Spanish

CDCR-128-B Completed PREA Education; Blank form

CDCR-128-B Completed PREA Education; 26 completed

Shine the Light on Sexual Abuse; English and Spanish

4. Interviews

Custody and Non-Custody Staff providing inmate education

Inmates

5. Tour of the Facility

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.4 addresses offender education. Offender PREA Education is to include verbal and written information specific to prevention/ intervention; reporting; and treatment and counseling. According to Section 54040.4, initial PREA offender orientation is provided in the reception centers either in writing or multi-media presentation on a weekly basis. PREA posters which contain reporting numbers are to be posted in designated locations throughout the institution. Additionally, the PREA Brochure entitled "Sexual Violence Awareness" and the PREA booklet entitled "Sexual Abuse/Assault - Prevention and Intervention" is to be distributed during initial processing in reception centers. These brochures and handbooks discuss zero tolerance and the Department position regarding sexual abuse, harassment, and staff sexual misconduct and the commitment to investigate

all allegations. Inmate are further provided guidance on what to should they experience sexual abuse sexual harassment, or staff sexual misconduct and options for reporting the incident.

Senate Bill 132, "The Transgender Respect, Agency, and Dignity Act" brochure discusses how the bill directly effects transgender individuals in a confined setting, including frequently asked questions. There is also a PREA reporting section with contact information for the Office of Internal Affairs and OIG PREA Ombudsperson.

According to the PAQ, 3423 inmates were admitted to Corcoran during the past year, and all received PREA information during intake.

Corcoran is not a reception center. However, while in Receiving and Release (R & R), inmates are provided PREA education. During the tour, the orientation handbook containing PREA information was readily available and the PREA video was being shown.

Subsection (b):

According to the PAQ, 2439 inmates were admitted to Corcoran during the past 12 months and received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. According to R&R staff, all inmates receive PREA Education while in R&R in the form of the Orientation Handbook and video. Additionally, within 14 days of reception, Correctional Counselors review the Department's zero tolerance policy and how to report incidents of sexual abuse and sexual harassment.

Subsection (c):

According to the PAQ, all inmates at Corcoran have received PREA education.

Most inmates interviewed recalled receiving PREA education, many noting this occurred during R&R or noting the PREA video. Several inmates could not recall PREA Education, despite having signed the Receipt of Inmate PREA Education.

Subsection (d):

DOM Section 54040.4 states "Appropriate provisions shall be made to ensure effective communication for offenders not fluent in English, those with low literacy and those with disabilities". DOM also allows for institutions to utilize offender peer education to enhance inmate knowledge and understanding of PREA and sexually transmitted diseases. The Orientation Handbook is available in both Spanish and English. The Sexual Abuse/Assault Prevention and Intervention, Sexual Violence Awareness Brochure, and the Senate Bill 132 Brochure are available in Spanish and English. CDCR also utilizes Effective Communication as noted in 115.16. Completed CDCR 128-B Receipt of Inmate PREA Education forms include a section "Ensure Effective Communication. This section requires the staff to be aware of inmate limitations and gives staff the option to check a box indicating the inmate "has a TABE score of 4.0 or higher, can read and write, and understands PREA material

given" or "Effective Communication (EC) is required". If EC is required, the staff checks a disability code, what accommodation was made, if the inmate asked questions, and if the inmate summed information. According to the submitted CDCR 128-B Inmate PREA Education forms, Effective Communication was addressed for each inmate. Additionally, the PREA video shown in R&R and the institution is available in Spanish or English, as well as subtitles and American Sign Language.

Subsection (e):

DOM Section 54040.4 further requires PREA offender education to be documented on form CDCR 128-B, Receipt of Inmate PREA Education in which the inmate signs the form indicating they received the training. This form is then scanned into the Electronic Records Management System. The CDCR 128-B includes the following training:

- Video "What You Need to Know" (Available in English, Spanish, Hmong) and;
- Given Information Brochure on PREA with reporting information and;
- Received Inmate Orientation Handbook with reporting information and;
- Opposite Gender Announcement was explained.

During the tour a supervisor covering R&R was interviewed. A follow up interview was also conducted with the regular R&R Sergeant. The supervisors explained the intake process. All inmates are shown the PREA video and receive a copy of the Orientation Handbook. The supervisor meets with the inmate in a confidential setting to complete the initial PREA Risk Screen. The inmate then signs the CDCR 128-B Receipt of Inmate PREA Education. The CDCR 128-B is forwarded to records and is scanned into the Electronic Records Management System.

26 of 30 requested CDCR 128-B Receipt of Inmate PREA Education forms were submitted. Of the completed forms received, most inmates received education during R&R and were shown the video, received a handbook and received an explanation of the opposite gender announcement. It appeared that when custody staff not regularly assigned to R&R provided education, it was simply in the form of the handbook. Four inmates received education from their Correctional Counselor rather than R&R. Correctional Counselors provide a PREA brochure and review the opposite gender announcement. It should be noted, that reviews of the Classification Committee Chrono also note the Correctional Counselors review PREA education during the pre-hearing conference.

Subsection (f):

Shine the Light on Sexual Abuse Poster in English and in Spanish were submitted for review. The Shine the Light on Sexual Abuse informs inmates that CDCR has a zero tolerance policy and provides several ways in which an inmate may report sexual abuse, sexual harassment, or retaliation; such as the Office of Internal Affairs, tell any staff member, and have a family or friend contact the institution. Contact information for the Office of the Inspector General is also noted and provides an address and

	<p>phone number. During the tour of Corcoran, PREA posters were visible on all housing units and throughout common areas of the institution, such as in education, chapel, program areas, kitchen, and visiting areas. Additionally, inmates cited the posters as a means in which they received PREA information or where they would go to receive needed PREA information</p> <p>Recommendation: Ensure PREA education is standardized regardless of who is providing the education and ensure all inmates receive and acknowledge PREA education. This may require additional supervisory or PCM oversight through random or monthly audits of completed CDCR 128-B Receipt of Inmate PREA Education.</p> <p>Corrective Action: None</p>
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115.34 Specialized training: Investigations	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 3. Documents CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Version 1.0; BET 11055853 and 11057915; Participant Workbook and Training Power Point Course Enrollments; 4 4. Interviews Investigators 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p>

	<p>Corcoran follows CDCR DOM Chapter 5, Article 44, Section 54040.4 Education and Prevention, which states, "All employees who are assigned to investigate sexual violence and/or staff sexual misconduct will receive specialized training per PC Section 13516 (c)". Additionally, Section 54040.3 defines Locally Designated Investigator (LDI) as "The Investigative Services Unit Investigator or designated Institutional staff who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct".</p> <p>Two Corcoran investigators were interviewed and confirmed having completed the training specific to conducting sexual abuse investigations.</p> <p>Subsection (b):</p> <p>CDCR Specialized PREA Training for Locally Designated Investigators Power Point and Participant Workbook were submitted in their entirety for review. Based on these documents, training included interviewing techniques, the use of Miranda and Garrity warnings, evidence collection, and the criteria and evidence required to substantiate a case. Both investigators reported the training included topics as noted in this standard, addressing in detail interviewing techniques specific to victims, evidence collections, and roles and responsibilities for investigators.</p> <p>Subsection (c):</p> <p>According to DOM Section 54040.4, it is the responsibility of the PCM to ensure employees investigating incidents of sexual violence or staff sexual misconduct are properly trained. Staff training is documented on the CDCR 844, Training Participation Sign in Sheet.</p> <p>According to the PAQ, there are 15 specially trained PREA investigators at Corcoran. Course Enrollments for Basic Investigators Course and PREA Locally Designated Investigator Course Enrollments report was submitted. The PREA Locally Designated Investigator report lists 16 Corcoran staff who have completed PREA Locally Designated Investigator training. Additionally, the completion report for PREA Locally Designated Investigator - OCS - IST 11057915 for investigators assigned to OIA was also submitted. 953 investigators assigned to OIA completed specialized training for PREA investigators.</p> <p>Corrective Action: None</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed:

1. Pre-Audit Questionnaire

2. Policy and Procedures

CDCR Department Operations Manual Chapter 5, Article 44

CDCR Department Operations Manual Chapter 3, Article 18 General Training

3. Documents

Memorandum dated August 9, 2017; Subject: Prison Rape Elimination Act - Specialized Training for Medical and Mental Health Staff

CDCR On-The-Job Training Prison Rape Elimination Act Policy Specialized Training for Medical and Mental Health Staff 3.0 Course Code: 11057450; Lesson Cover Sheet

Course Enrollments - Prison Rape Elimination Act (PREA) - Specialized Training Online - HCS - OJT - 11057450

4. Interviews

Medical and Mental Health Staff

5. Tour of the Facility

Findings:

Subsection (a):

DOM Chapter 3, Article 18, Section 32010.10.1 makes it a condition of employment that all employees complete training required for their job classification/position. DOM Section 54040.4 specifically addresses PREA Training. It states that all staff "receive instruction related to the prevention, detection, response, and investigation of offender sexual violence, staff sexual misconduct, and sexual harassment". DOM further states that "training will be conducted during new employee orientation, annual training and in the curriculum of the Correctional Training Academy".

According to the PAQ, 440 Medical and Mental Health Staff regularly work at Corcoran with 98% having completed training. In a memorandum dated August 9, 2017 to California Correctional Health Care Services Executive Staff, Regional Health Care Executives, and Chief Executive Officers from the Director of Health Care Policy and Administration, directs all Medical and Mental Health staff practitioners to receive specialized PREA training in addition to the training provided to all staff. The CDCR On-The-Job Training Prison Rape Elimination Act Specialized Training for Medical and Mental Health Staff Lesson Plan Cover Sheet was submitted for review. The training includes:

- Signs of Sexual Abuse and Sexual Harassment
- Preservation of Evidence

	<ul style="list-style-type: none"> • Professional Behavior • Reporting <p>Four permanent staff working in Medical and Mental Health Care were interviewed. All staff confirmed completing PREA training however, they did not recall PREA training specific to those working in Medical and Mental Health areas. They all reported completing in LMS and believed it to be the general training completed by all staff. Training records indicate that Medical and Mental Health Care staff are assigned and complete specialized training. Despite not recalling specialized PREA training, Medical and Mental Health Care staff were aware of their responsibilities in terms of responding to incidents of sexual abuse and sexual harassment, preservation of evidence and how and to whom incidents are reported.</p> <p>Subsection (b):</p> <p>Staff at Corcoran do not conduct forensic medical examinations, as confirmed by on site medical staff. These are completed at an outside medical facility.</p> <p>Subsection (c):</p> <p>At the completion of the specialized Medical and Mental Health Staff On-The-Job Training, participants are required to complete a Training Acknowledgement Form. By signing the Training Acknowledgement Form, staff acknowledge they have received, read, understood and agreed to the policies and procedures as defined in the training. CDCR submitted training spreadsheet identifying staff who have not yet completed training, as well as verification that named staff completed specialized training.</p> <p>Subsection (d):</p> <p>In addition to the CDCR 2301 completed by contracted staff, Medical and Mental Health Staff who are also contractors complete training required for all employees.</p> <p>Corrective Action: None</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: <ul style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures

CDCR Department Operations Manual Chapter 5, Article 44

California Code of Regulation Title 15 Section 3269 Inmate Housing Assignments

3. Documents

California Penal Code Section 667.5(c) "violent felony" definition

Instructions for Completion of the PREA screening Tool

Memorandum dated August 28, 2017, Subject: Prison rape Elimination Act Risk Screening

Memorandum dated September 29, 2017, Subject: Prison Rape Elimination Act Risk Screening - Correctional Counselor Responsibilities

Memorandum dated April 3, 2023, Subject: Prison Rape Elimination Act Risk Re-Screening - Correctional Counselor Responsibilities

PREA Screening Blank

PREA Screening Job Aid and Instruction 2017 and 2023

PREA Screening form access; screenshot

Classification Committee Chronos; 75

PREA Risk Screening; 83

Memorandum from PCM dated April 12, 2024 Subject: Proof of Practice for PREA Screening Audit

CDCR 844 Training Participation Sign-In Sheet PREA Training; 23

4. Interviews

PREA Coordinator

PREA Compliance Manager

Correctional Counselor

R&R Sergeant

5. Tour of the Facility

Findings:

Subsection (a):

Department Operations Manual is relatively silent on PREA Screening. DOM Section Chapter 5, Article 44, Section 54040.6 addresses Offender Housing in relation to the

PREA Screen. "Offenders at high risk for sexual victimization, as identified on the PREA Screening form, shall not be placed in segregation housing unless an assessment of all available alternatives has been completed...". Offenders at high risk for sexual victimization must have a housing reassessment within 24 hours of placement into segregated housing. Additionally, the process for review and evaluation for single cell status includes the completion of a PREA Screen.

A memorandum dated August 28, 2017 to Associate Directors, Wardens, and PREA Compliance Managers regarding Prison Rape Elimination Act Risk Screening - addresses the lack of direction and language in the DOM. This memorandum formalizes the process in that inmates are assessed during intake and upon transfer to another institution. It is the responsibility of the custody supervisor conducting the Initial Housing Review in Receiving and Release to complete the screening during the intake process. The memorandum dated September 29, 2017 reiterated the screening requirement and identifies the process to screen inmates incarcerated at the time of implementation and the language to document the screening. The memorandum dated April 3, 2023, addresses the re-screening process and timeframes.

Included for review was the PREA Screening Instructions with screen shots of the screening tool and directions how to complete the form electronically and how to navigate through the questions.

Also submitted for review, was California Penal Code Section 667.5(c) defining "violent felony", which may be referenced to answer questions on the PREA Screening tool.

Subsection (b):

According to California Code of Regulation Title 15 Section 3269 Inmate Housing Assignments, a designated custody supervisor is responsible for screening inmates for appropriate housing assignment upon the inmate's arrival to the institution. The following are factors considered: documented reports that the inmate intimidated, threatened, forced, and/or harassed a cell mate for sex, documentation that the inmate had been the victim of sexual assault, the inmate was found guilty as a perpetrator in an act of physical abuse, sexual abuse, sodomy, or other act of force against a cell mate.

The memorandum dated August 28, 2017 does not specify a time frame. It is implied that the PREA Screening occurs the same day of arrival, as it is completed prior to a housing assignment. At this time process is aligned with the expectations of the standard, however, given the lack of formal direction in either policy or memorandum, this practice could change in the future, causing non-compliance.

At Corcoran, the assessment is completed during Receiving and Release (R & R) prior to the inmate being assigned housing. Staff responsible for screening inmates during intake confirmed the screening process. Everyone admitted to Corcoran is processed through R & R and is screened the day of entry.

According to the PAQ, 2962 individuals were admitted to Corcoran during the past year and remained at Corcoran longer than 72 hours. According to the PAQ, all were screened for risk of victimization or abusiveness.

Over half of the inmates interviewed confirmed they were asked questions from the PREA Screening when they first arrived to Corcoran. Initial PREA Screenings were reviewed, including screenings of those who could not recall screening questions. Three of 38 individuals reviewed did not receive an initial screen. All other individuals were screened on the date of arrival. Document review confirms Corcoran is substantially following procedures set by CDCR, in line with the PREA standards by conducting initial PREA Screens on inmates at the time of receiving.

Subsection (c):

Corcoran utilizes the PREA Screening tool. This screening tool was implemented in August 2017, as noted in a memorandum to Associate Directors, Wardens and PREA Compliance Managers. In September 2017, further direction was provided to ensure inmates who had previously been through intake were screened for risk of victimization and abusiveness. In the same memorandum to Associate Directors of the Division of Adult Institutions, Wardens and PREA Compliance Managers, direction was provided for subsequent reviews and documentation. In July 2020 the tool was modified to better assess for risk of victimization. This modification was announced on July 23, 2020 in a memorandum to Associate Directors, Wardens, Prison Rape Elimination Act Compliance Managers and Chief Executive Officers. These memorandums, in conjunction with the PREA Screening Instructions, ensures the PREA Screening is administered consistently to all inmates.

The PREA Screening consists of fifteen standard questions asked of all inmates. Eleven questions are objective, in that they are written in a manner which does not elicit the screeners opinion but addresses information which may be obtained or validated through inmate records. The four remaining questions are appropriately subjective and in line with the 115.41(d). These questions require the inmate to respond according to self-assessment and their perception of themselves and unconfirmed incidents. Additionally, questions are weighted and the scoring methods to determine final risk levels are prescribed.

Subsection (d):

The PREA Screening tool considers nine of the ten criteria as noted in this standard. CDCR does not consider whether an inmate is detained solely for civil immigration purposes as a risk factor, as CDCR does not house individuals solely for immigration. Criteria seven of the standard asks whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. Question seven on the PREA Screening asks "Do you consider yourself or have you ever been perceived by others to be Lesbian, Gay, Bi-Sexual, Transgender, Intersex, or Gender Non-Conforming?" The wording of the question does not explicitly ask for the screener's perception whether the inmate is gender non-conforming. On April 27, 2022, an email was sent from the PREA Office to all PREA Compliance Managers regarding compliance with 115.41. The email reminds all staff conducting PREA Screening

(related to 115.41(c)) to ensure they are using the current tool and following the instructions properly. The instructions contain directions that question seven should be answered "yes" if the inmate identifies as LGBTI or has been perceived to be LGBTI, or if the custody supervisor (person conducting the screening) perceives the inmate to be transgender. This was a change from previous direction and does not change the wording of the question. However, Corcoran staff administering the PREA Screening do not answer according to their perception, but solely on what is reported by the inmate. During the post audit period, training was provided to Lieutenants and Sergeants regarding the screening process specifically as it relates to the raters perception of the inmate as transgender.

Subsection (e):

The CDCR PREA Screening tool includes criteria set forth in the standards. The PREA Screening assesses for history of sexual violence in a correctional setting, prior convictions for sex offenses in a non-correctional setting, convictions for non-sexual violent offenses in a non-correctional setting within five years, and guilty finding for non-sexual violent offenses in a correctional setting within five years.

Subsection (f):

A memorandum dated September 29, 2017 provides a process for "subsequent Reviews" in which the Correctional Counselor reviews the file and if there is new information that is related to PREA victimization or abusiveness towards other inmates, then it is reviewed during Unit Classification Committee. If the new information changes the "at risk" designation then a new PREA Screening form is completed.

According to the PAQ, 2439 inmate were admitted to Corcoran within the past 12 months whose length of stay in the facility was for 30 days or more and were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.

According to the staff, within 14 days of intake, the inmate is seen by Classification Committee. The committee looks at the screening tool, and the inmate is asked if there are additional concerns. According to a Corrections Counselor, the PREA Screening tool is reviewed and the inmate is asked if there is any new information. If there is new information a new screening is completed. PREA concerns are reviewed during Committee Classification and is documented on the Classification Committee Chrono. 26 Classification Committee Chronos were submitted. At each classification, the inmate is asked if there are additional PREA or safety concerns. Five of the Classification Committee Chronos indicated the inmate was seen ahead of the committee review by a Corrections Counselor, at which time the risk screen was reviewed and the inmate had an opportunity to provide additional information. Interviews confirmed that all inmates meet with their Corrections Counselor in a private setting prior to the hearing at which time inmates are asked about PREA concerns. fifteen Classification Committee Chronos noted the chairperson also reviewed the risk screen and provided the inmate an opportunity to provide additional

information regarding his sexual safety as it relates to housing, programming and work. Documentation reviewed indicates the Classification Committee meets within 14 days, thereby meeting the time frame of this standard. Initially, 30 individual inmate records were reviewed and six did not appear to have been provided the opportunity for reassessment, according to the documentation or lack of documentation. During the post audit, an additional 46 PREA Screening and 48 Classification Committee Chronos for inmates received at Corcoran during post audit time frame were requested and received. Documentation indicated that all of the inmates were administered the PREA Screening which was subsequently reviewed with the inmate during the pre-committee interview and addressed during committee. PREA concerns and follow up conversations with the inmate were documented on the Classification Committee Chrono.

Subsection (g):

DOM Section 54040.7 Screening for Appropriate Placement requires "the inmate's risk level be reassessed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness". Corcoran investigators substantiated one incident of sexual abuse warranting an additional screening. Additional screening for substantiated incidents is the responsibility of the investigator. Follow up PREA Screening was confirmed for victim. Follow up screening for the suspect was not completed, as he is temporarily held by another agency.

Subsection (h):

DOM Section 54040.6 forbids inmate discipline when the inmate refuses to answer or not completely disclose information related to: mental, physical, or development disabilities; sexual orientation, sexual victimization, or perception of vulnerability. Staff interviewed confirmed that inmates would not be disciplined for refusing to answer or not completely disclosing information. One screener noted, most questions have a drop down option for no response

Subsection (i):

The PREA Coordinator confirmed that the risk assessment is kept in the SOMS system and access is determined by classification. Staff who need the information would have access. For instance staff involved with making housing assignments or classification decisions would be privy to information. However, security and medical who do not have a need for the information, would not have the access. The PREA Coordinator furthered that the system tracks the log in information of each staff. According to the PCM and a Corrections Counselor, all staff have access to the system which houses the assessment. However, based on classification there are different levels of accessibility. For instance, Corrections Counselors have the ability to make changes, look up information, and print from the system. Whereas custody staff may only view certain files.

	<p>Recommendation: 115.41(b): It is recommended that the PREA Screening and Re-Screening practices as outlined in memorandums be formalized in the Department Operations Manual Chapter 5, Article 44.</p> <p>Recommendation: 115.41(d) Change the wording of Section A question #7, separating the inmate's self report identifying as LGBTQ and the rater's perception if the inmate appears gender nonconforming. The separation will strengthen the assessment and be clearer to the rater to ensure the assessment remains in line with standard 115.41.</p> <p>Corrective Action: None</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 5, Article 44 CDCR Department Operations Manual Chapter 6, Article 5 Classification Process DCR Department Operations Manual Chapter 6, Article 12 Treatment Categories California Code of Regulations, Title 15, Article 10 Classification 3. Documents <ul style="list-style-type: none"> California Penal Code Section 667.5(c) defines "violent felony" CDCR's compliance with 115.42; 5 pages Letter dated October 6, 2017, Use of Screening Information PREA Screening Instructions, 4 pages Memorandum dated September 29, 2017; Subject: Prison Rape Elimination Act Risk Screening - Correctional Counselor Responsibilities CDCR 128-MH5; Blank Form CDC 128-B Transgender Biannual Assessment - PREA

Senate Bill 132 Brochure; English and Spanish

Memorandum dated November 6, 2020; Overview of Senate Bill 132- Training

Memorandum dated August 25, 2017; Subject: Transgender Biannual Reassessment for Safety in Placement and Programming

4. Interviews

PREA Compliance Manager

Classification Staff

Inmates

5. Tour of the Facility

Findings:

Subsection (a) & (b):

DOM Chapter 5, Article 44, Section 54040.6 addresses Offender Housing in relation to the PREA Screen. "Offenders at high risk for sexual victimization, as identified on the PREA Screening Form, shall not be placed in segregation housing unless an assessment of all available alternatives has been completed...". Offenders at high risk for sexual victimization must have a housing reassessment within 24 hours of placement into segregated housing. Additionally, the process for review and evaluation for single cell status includes the completion of a PREA Screen.

A memorandum dated September 29, 2017 to Associate Directors, Wardens, and PREA Compliance Managers regarding Prison Rape Elimination Act Risk Screening - Correctional Counselor Responsibilities also reiterates that the information gathered from the PREA Screening tool is to be used when assigning inmate housing and work/program assignments. A memorandum dated October 6, 2017 further details the use of PREA Screening information. The memo indicates that the PREA Screening Form is conducted within 14 days of arrival at an institution for all inmates by the Initial Classification Committee. The memo quotes DOM Chapter 6, Article 5, Section 62010.8.3 Initial Classification Committee members, functions, and responsibilities. The memo also references Title 15, Article 10, Classification. Neither DOM 62010.8.3 or Title 15 references the PREA Screen. DOM does task this committee with initiating programs which may include educational, vocational training, work program, and privilege group designation.

DOM Chapter 5, Article 44, Section 54040.7 states that if during the initial intake screen or any other time during confinement with CDCR, an inmate reports having experienced sexual victimization or previously perpetrated sexual abuse whether in an institutional setting or in the community, staff shall refer the inmate to mental health. In a memorandum dated October 24, 2018 to Associate Directors, Wardens, PREA Compliance Managers, and Chief Executive Officer the mental health referral

was further explained as it relates to the PREA Screening tool implemented in August 2017. If there is a "yes" answer to specific questions, the security supervisor completing the screening will be prompted to complete a CDCR Form 128-MH5, a referral to mental health.

According to the R & R Sergeant tasked with completing the Initial PREA Screening, the tool is designed to prompt the rater to ask the inmate if they would like a mental health referral. If the inmate answers affirmatively, a referral is completed using the 128 - MH5 and is emailed to the Mental Health Supervisors. According to a Mental Health Supervisor, these referrals are sent to a supervisor distribution list and whoever is assigned to the inmate's yard will process the request.

The PREA Compliance Manager confirmed that the PREA Screening occurs at R & R. If concerns are noted, the Sergeant will inform ISU. Additionally, at R & R this information is used to determine single cell status, pat down preference, and other housing decisions. Sexual safety is also reviewed during initial and annual Classification Committee as confirmed in interviews with staff and documentation. According to the Classification Committee Chronos, during the Unit Classification Committee initial and annual review, the inmate's housing, program, and education assignments are reviewed to determine continued appropriateness based on safety and PREA concerns.

Subsection (c) & (g):

Based on DOM Chapter 6, Section 62080.14, inmates who have been diagnosed as transgender or intersex are referred to classification committee for review to determine appropriate institutional placement and housing assignment. Fourteen institutions are identified as having the necessary medical and mental health services available to appropriately serve the transgender and intersex population. However, based on other case factors, inmates identifying as transgender or intersex may be placed at another institution. Corcoran is not identified as one of the institutions with appropriate medical and mental health services to support transgender and intersex individuals and as such, most individuals identifying as transgender or intersex are transferred out.

In a memorandum dated November 6, 2020 to Associate Directors, Wardens, Prison Rape Elimination Compliance Managers, In-Service Training Lieutenants, Senate Bill 132 required CDCR to ask inmates during initial intake and classification of their gender identity and house transgender, intersex, non-binary inmates in a facility designated for men or women based on individual preference, after review and approval. This is reflected in the PREA Screening tool as well as documented in Classification Chronos.

Senate Bill 132 brochure written in English and Spanish was submitted for review. The brochure shares with inmates the requirement to be evaluated twice per year to check for safety in placement and programming. The brochure provides a Frequently Asked Questions with addresses housing requests, accommodations, and searches.

According to the PREA Compliance Manager and Classification staff, Corcoran does

not house inmates identifying as transgender or intersex. Once an individual identifies as transgender or intersex the inmate is transferred to an institution better equipped to meet their needs. This assertion is supported by inmate rosters identifying transgender or intersex individuals. Documentation indicated one individual identifying as female, not permanently housed at Corcoran. Inmates identified as LGBTQI who were interviewed denied being placed in a housing area based on their identification.

Subsection (d):

In a memorandum dated August 25, 2017 to Associate Directors, Wardens, PREA Compliance Managers, Classification and Parole Representatives, CDCR implemented biannual reviews for each person identified as transgender or intersex. Twice a year, The PREA Compliance Managers receive a list of inmates identified transgender or intersex known to the Department. If the inmate is scheduled for a classification review during that review period, the inmate will be assessed during the pre-committee review. If the inmate is not scheduled for classification, during the review period, the assigned Correctional Counselor will conduct a Transgender Biannual Assessment - PREA and complete a CDCR Form 128-B.

Given Corcoran does not house inmates who identify as transgender or intersex, staff were not clear on how often a person is reviewed for safety. Most staff indicated it was during their annual review. One supervisor did acknowledge a six-month review should an individual remain at Corcoran.

Subsection (e):

Both the PREA Compliance Manager and the Classification staff confirmed the inmate's own views regarding their safety is considered when assigning housing and programming placements. Inmates consistently reported they were asked their views regarding safety. Safety was consistently addressed with the inmate during Classification Committee reviews.

Subsection (f):

The PREA Compliance Manager reported that inmates identified as transgender and intersex are able to shower separately from others. Each housing unit provides single stall showers in which the screen doors have added privacy screening on a portion of the door, blocking full view of the inmate. Inmates confirmed they are able to shower without other inmates.

Corrective Action: None

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire

2. Policy and Procedures

CDCR Department Operations Manual Chapter 5, Article 44

California Code of Regulations Title 15, Article 7

3. Documents

4. Interviews

Warden

Segregated Housing Staff

Inmates

5. Tour of the Facility

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.6 prohibits the placement of inmates at high risk for sexual victimization as identified on the PREA Screening to be placed in segregated housing. Segregated housing may only be used when an assessment of all available alternatives has been completed and deemed not available. If an inmate is placed in segregated housing, a housing assessment is completed immediately or within 24 hours of placement. The inmate is issued an Administrative Segregation Placement notice explaining the reason for segregation. DOM Section 54040.7 prohibits the custody supervisor from automatically placing an inmate who has been the victim of sexual violence or victimization into administrative segregation. The custody supervisor should discuss housing alternatives with the inmate and consider housing the inmate with someone who has compatible house needs or placing in single cell status.

According to the Pre- Audit Questionnaire, during the past year, zero inmates have been placed into involuntary segregation pending an assessment.

The Warden reported that administrative segregation may be used to ensure a person's safety. However, if a person alleges an incident of sexual abuse or sexual harassment and there is a safety concern administrative segregation is not used, the person will immediately be single celled. Staff also have the option to move people between yards to address safety.

Subsection (b):

Title 15 Article 7 Segregation Housing addresses Administrative Segregations for an investigation related to being the victim of a PREA incident e.g. sexual abuse, staff sexual misconduct, sexual harassment. Policy instructs that if placement is related to a PREA incident, the inmate is afforded all programs, privileges and education. If these are restricted, staff are required to document: the opportunities that have been limited; the length of time of the limitation; and the reasons for such limitations.

Subsection (c):

If the continued placement is deemed necessary to keep the inmate separate from likely abusers, the inmate will appear before the Institution Classification Committee (ICC) to discuss housing needs. This placement should not exceed 30 days. DOM Section 54040.6 and 54040.14.1 outline in detail the review steps and documentation which are to occur when an inmate at high risk or victim of sexual abuse are placed in segregation.

According to the Pre-Audit Questionnaire, during the past year, zero inmates at risk of sexual victimization were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement.

Subsection (d):

The housing assessment is documented on the Administrative Segregation Notice, explaining the reason for segregation. The inmate's CDCR Form 114-A Inmate Isolation Segregation Record documents the assessment for ongoing safety concerns. The assigned supervisor is responsible for reviewing the incident and documenting observations on a CDCR Form 128-B General Chrono. The inmate receives the Administrative Segregation Placement Notice.

Subsection (e):

According to DOM Chapter 5, Article 44, Section 54040.14.1, the custody supervisor is required to conduct assessments every thirty days from the date the inmate is initially placed in non-disciplinary segregation. These assessments are documented on the CDCR Form 114-A. When the custody supervisor determines non-disciplinary segregation is no longer necessary, the supervisor submits CDCR Form 128-B requesting the inmate receive a housing review before Initial Classification Committee.

According to staff working in segregation, inmates placed in segregated housing for protection have Administrative Segregation Unit (ASU) programming based on the yard or status they were in prior to ASU placement. For example, if an inmate is participating in college courses, staff will work with education staff to provide booklets or homework to work on, but they would not be able to attend class.

Additionally, they would not be able to continue in their work assignment, as work assignments are based on the yard, however they would still earn release credits. Inmates in ASU for safety for a sexual abuse or harassment concern may stay in ASU

	<p>while the investigation is pending. However, they are seen by initial committee within 14 days of placement and then regularly assessed thereafter.</p> <p>One inmate who alleged sexual victimization and was placed in administrative segregation was interviewed. By his own detail of events, the placement in administrative segregation was not due to sexual victimization, but other behavior the inmate engaged in. All other inmates who reported sexual victimization reported being separated from the abuser, without the use of administrative segregation.</p> <p>Corrective Action: None</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 5, Article 44 California Code of Regulations Title 15 Section 3401.5 3. Documents <ul style="list-style-type: none"> Sexual Abuse/Assault Prevention and Intervention pamphlet; English and Spanish Sexual Violence Awareness pamphlet; English and Spanish PREA Information For Orientation Handbook; English and Spanish Shine the Light on Sexual Abuse poster; English and Spanish CDCR-128-B Receipt of Inmate PREA Education PREA Confidential Correspondence with Rape Crisis Center; mailroom notice Prison Rape Elimination Act (PREA) On-the-Job Training Module, Prison Rape Elimination act (PREA) version 2.0; BET ID 11053499 CDCR Public Website web inquiry 4. Interviews <ul style="list-style-type: none"> Office of the Inspector General (OIG)

PCM

Random Staff

Inmates

5. Tour of the Facility

Findings:

Subsection (a) & (b):

Offender reporting is addressed in two sections of the DOM. DOM Chapter 5, Article 44, Section 54040.4 Offender Education describes how an inmate receives the information. While in reception center, inmates receive written or multi-media presentations offered in both English and Spanish. Inmates are given a brochure entitled "Sexual Violence Awareness" and a booklet entitled "Sexual Abuse/Assault - Prevention and Intervention". Additionally, PREA information is posted throughout the facility, as observed during the tour. DOM Chapter 5, Article 44, Section 54040.7 Detection, Notification, and Reporting addresses how inmates may report. Inmates may report violations to the PREA policy directly to any staff member verbally or in writing, utilizing the Inmate Appeals Process, through the sexual assault hotline or through third party. The policy states "an offender may report sexual violence, staff sexual misconduct, or sexual harassment that occurs under the jurisdiction of the CDCR to any staff."

The PREA pamphlet "Sexual Violence Awareness" and the pamphlet "Sexual Abuse/ Assault Prevention & Intervention" both in English and Spanish were submitted for review. The pamphlets instruct individuals who were sexually assaulted to report to a staff member immediately. They also provide the option to write or call to report incidents of sexual violence and sexual harassment and provides address and phone number for the Office of Internal Affairs and the OIG PREA Ombudsperson Office of Inspector General. Inmates are informed that the inmate will reach an answering machine and will need to leave a message. Those answering machines are checked once per day. Further, they provide the address and phone number for the Kings Community Action Organization and the address for Just Detention International. According to the brochures, the OIG PREA Ombudsperson will keep the inmate's name anonymous, should this be requested. The Sexual Abuse/ Assault Prevention & Intervention" brochure and PREA Orientation Handbook also provides inmates the option to file an Inmate/Parolee Grievance using the CDCR Form 602.

The PREA Information for Orientation Handbook was submitted for review in both English and Spanish, and was available on site. The Orientation handbook is provided to each individual during R & R. Page 23 of the Handbook is dedicated to reporting an incident and provides a variety of ways a person may report an incident of sexual violence, staff sexual misconduct, or sexual harassment. Individuals are encouraged to report to any staff, including volunteers and contractors. Individuals may report

anonymously. Phone numbers and addresses are provided for the CDCR Office of Internal Affairs and Office of the Inspector General PREA Ombudsperson Anonymous Reporting Information. Further, inmates are reminded that the information is also posted throughout the institution. Finally, the Orientation Handbook provides contact information for the Kings Community Action Organization.

The PREA Poster "Shine the Light on Sexual Abuse" was also submitted for review. The poster provides direction to individuals who have been the victim of sexual assault, threatened with sexual assault, has been sexually harassed, or has experienced retaliation for reporting an incident of sexual assault or harassment. Inmates may report by telling any staff member, using the confidential telephone or address noted on the poster, or have a family member or friend contact the institution to make the report. The poster further includes phone numbers and addresses to the CDCR Internal Affairs and the Office of the Inspector General PREA Ombudsperson. The poster was observed during the on-site tour on housing units and in common areas.

Inmates writing to the Kings Community Action Organization note on the envelope "Evid. Code 1035.4" which identifies the post as confidential or privileged communication. This mail will not be read by CDCR staff and is only opened in the presence of the addressee. This information is provided to the inmate in the Orientation Handbook.

The CDCR-128B is utilized to acknowledge receipt of the PREA Video, brochure, orientation handbook, and received an explanation of the Opposite Gender Announcement. This form confirms that the inmate has been provided the various ways in which to report sexual abuse, staff sexual misconduct, sexual harassment or retaliation. Completed CDCR-128B forms consistently demonstrated that inmate's receive information needed to report an incident of sexual abuse or sexual harassment.

Corcoran does not house anyone solely for civil immigration. However, DOM does note that offenders being retained solely for civil immigration may contact consular officials or Department of Homeland Security.

The PREA Compliance Manager confirmed inmates may report sexual abuse or sexual harassment to OIG PREA Ombudsperson and friends or family outside of the institution. He referenced the posters displayed throughout the institution providing phone numbers to report. Staff consistently acknowledged that inmates may report incidents to any staff either in person or in writing, using the 602 grievance process, or calling the phone numbers listed on the posters. Similarly, inmates consistently answered that they would report to a Correctional Officer, filing a 602, or calling a number as noted on the PREA posters. Additionally, inmates were confident their family could report an incident to the institution on their behalf.

During a previous CDCR audit in June 2023, utilizing the link on the CDCR public website, this auditor contacted OIG to confirm the process of reporting an incident of sexual harassment or sexual abuse. OIG confirmed the process and further explained that when OIG receives a report of a PREA incident, through mail, 1-800 number and

web inquiries, they immediately notify the Warden and PCM. While on site at Corcoran, using the inmate phones in the same manner as an inmate, two calls were made to OIG. Both calls were acknowledged by OIG within 24 hours by forwarding the call information to the Warden and the PCM.

Subsection (c):

According to DOM Chapter 5, Article 44, Section 54040.7, inmates may report violations to the PREA policy directly to any staff member verbally or in writing, utilizing the Inmate appeals Process, through the hotline or through a third party. Inmates are informed in the PREA Information for Orientation Handbook, that they may remain anonymous when reporting. When staff learn an offender is being or has been the victim of sexual violence, staff sexual misconduct or sexual harassment, they have a duty to immediately and confidentially report to the appropriate supervisor.

In reviewing the PREA In-Service lesson plan, all staff are trained to immediately report to their supervisor any information that indicates an offender is being or has been the victim of sexual violence, staff sexual misconduct or sexual harassment. After reporting, staff are to immediately document the reported information.

All staff acknowledged that incidents may be made verbally, in writing, anonymously and through third party. Staff also consistently noted they would take the report, ensure the inmate's safety and contact a supervisor or ISU.

Most inmates knew they could report an incident of sexual abuse or sexual harassment in person or in writing. For those who were not confident how to report, they noted they could find the information either on the posters or information available on their tablets.

Subsection (d):

California Code of Regulations Title 15, Section 3401.5. Staff Sexual Misconduct encompasses staff, volunteer, agent, or individual working on behalf of the Department of Corrections and Rehabilitation. By policy, any employee who observes or receives information from any source concerning staff sexual misconduct or staff sexual harassment shall immediately report the information or incident directly to the hiring authority, unit supervisor, or highest-ranking official on duty. Additionally, DOM Chapter 5, Article 44, Section 54040.7 requires staff to report immediately and confidentially to the appropriate supervisor any information indicating an inmate may be the victim of sexual violence, staff sexual misconduct or sexual harassment. Training documents confirmed that staff are trained to report immediately and confidentially.

All of the staff confirmed that they are able to report privately and confidentially, noting this is done directly with a supervisor or utilizing a hotline phone number.

Corrective Action: None

115.52	Exhaustion of administrative remedies
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <hr/> <p data-bbox="256 344 544 378">Evidence Reviewed:</p> <ol data-bbox="256 412 639 524" style="list-style-type: none"> <li data-bbox="256 412 639 445">1. Pre-Audit Questionnaire <li data-bbox="256 479 616 512">2. Policy and Procedures <p data-bbox="256 557 1254 591">California Code of Regulations Title 15, Article 8. Inmate Sexual Safety</p> <p data-bbox="256 636 1477 703">California Code of Regulations Title 15, Article 1. Administrative Remedies for Inmates and Parolees</p> <p data-bbox="256 748 1007 781">Department Operations Manual Chapter 5, Article 44</p> <ol data-bbox="256 815 464 848" style="list-style-type: none"> <li data-bbox="256 815 464 848">3. Documents <p data-bbox="256 893 544 927">PREA Allegation Log</p> <ol data-bbox="256 960 448 994" style="list-style-type: none"> <li data-bbox="256 960 448 994">4. Interviews <p data-bbox="256 1039 671 1072">Staff who process grievances</p> <p data-bbox="256 1106 376 1140">Inmates</p> <ol data-bbox="256 1173 560 1207" style="list-style-type: none"> <li data-bbox="256 1173 560 1207">5. Tour of the Facility <p data-bbox="256 1319 384 1352">Findings:</p> <p data-bbox="256 1397 472 1431">Subsection (a):</p> <p data-bbox="256 1464 1469 1711">The administrative procedure to address allegations of sexual violence or staff sexual misconduct is addressed in California Code of Regulations (CCR) Title 15, Division 3, Chapter 1, Article 8 Inmate Sexual Safety. Section 3084 specifically addresses "Inmate-on-Inmate Sexual Violence, Staff-on-Inmate Sexual Misconduct, and Sexual Harassment of Inmates. This section provides further direction in processing a grievance which contains in whole or in part such allegations.</p> <p data-bbox="256 1744 472 1778">Subsection (b):</p> <p data-bbox="256 1823 1477 2069">CCR Title 15, Division 3, Chapter 1, Article 8 Inmate, Section 3084 states the inmate is not required to use any informal grievance process, or otherwise attempt to resolve with staff, an alleged incident of inmate-on-inmate sexual violence or staff-on inmate sexual misconduct. Subsection (c) Staff-on-Inmate Sexual Conduct and Subsection (d) Inmate-on-Inmate Sexual Violence, specifically identifies no time limits for these allegations.</p>

Subsection (c):

The formal grievance process is outlined in CCR Title 15, Division 3, Chapter 1, Article 1 Administrative Remedies for Inmates and Parolees. Section 3481 subsection (c) allows a claimant to choose to informally resolve a claim, but does not require a claimant to first attempt to resolve the claim informally. Section 3483 Grievance Review subsection (f) states that any individual whose personal interaction or is part of the claim, is excluded from participating in the grievance processes. This section continues by providing several examples of instances in which the individual in question would not participate, such as being interviewed regarding the claim, serving as the reviewing authority, or participating on the committee to discuss the claim.

Subsection (d):

According to the PAQ, within the past year, 83 grievances filed alleged sexual abuse. Of those grievances, 77 allegations reached a final decision within 90 days of being filed and 0 required an extension. It is not clear the status of the remaining grievances. This is supported by CCR Title 15, Division 3, Chapter 1, Article 1, Section 3483 Subsection (g) in which all grievances receive a written response within 60 calendar days after receipt of the grievance. However, Section (a) states that at least one official will assess each written grievance within one business day of receipt to determine if it contains information concerning sexual abuse, including acts of sexual misconduct as defined by the federal Prison rape Elimination Act and the California Sexual Abuse in Detention Elimination act. If a grievance contains allegations of sexual abuse, the official shall immediately take appropriate action as required by laws and regulations. The official ensures the claimant is notified of the department's course of action within five business days. CCR is silent regarding time limit extensions for processing a grievance. The appeal process is addressed in Sections 3484 and 3485 and requires a decision within 60 days. If the Department is unable to respond within 60 calendar days, the grievance level decision serves as the final decision and exhaustion of the administrative remedies. Any individual with personal involvement with the claim is excluded from participating in the appeal process.

Subsection (e):

Both DOM Chapter 5, Article 44, Section 54040.7.2 addresses third party reporting of staff misconduct, sexual violence or sexual harassment. According to CCR Title 15, Division 3, Chapter 1, Article 1, Section 3481; Subsection (g), claimants who request assistance due to disability, lack of literacy, or need for translation services, or if staff detect a need for assistance staff may provide accommodations and utilize effective communication techniques as required by the Americans with Disabilities Act. Section 3084 also allows an inmate to submit a Grievance on behalf of another inmate only if the grievance contains an allegation of inmate-on-inmate sexual violence, staff-on-inmate sexual misconduct or sexual harassment. According to the PAQ, zero inmates declined to move forward with a request for administrative remedy filed by a third party. Additionally, posters viewed during the tour informed inmates of reporting options, including third party resources such as OIG, Internal Affairs, staff, family, or

friends.

Subsection (f):

CCR Title 15, Division 3, Chapter 1, Article 1, Section 3483; Subsection (a) requires at least one person in each Office of Grievance to assess each written grievance within one business day of receipt to determine if it contains information concerning an imminent risk to personal safety including sexual abuse or sexual misconduct as defined by the federal Prison Rape Elimination Act. If the grievance contains such information the "official shall immediately take appropriate action as required by all applicable laws and regulations". According to CCR Title 15, Division 3, Chapter 1, Article 8, Section 3084, an initial response is provided to the inmate within 48 hours. Additionally, an initial risk assessment is completed and documented within 48 hours with a completed risk assessment being completed within five calendar days. Upon completion of the risk assessment, the findings are documented and if the finding confirms the inmate is at substantial risk, the documentation also includes immediate corrective action.

According to the PAQ, 0 emergency grievances were received alleging substantial risk of sexual abuse was received at Corcoran.

Subsection (g):

DOM Chapter 5, Article 44, Section 54040.15.1 allows for an inmate to be charged with "making a false report of a crime", if after an investigation into sexual violence or staff sexual misconduct, it is determined with evidence that the inmate knowingly made a false report. If an allegation is deemed unsubstantiated or unfounded based on a lack of evidence, that does not constitute a false report.

According to the PAQ, during the past year, zero allegations resulted in discipline for filing a false report. Staff confirmed that multiple unfounded grievances may result in the inmate receiving a Rules Violation Report (RVR).

According to a Correctional Counselor tasked with processing grievances, 602s are collected from each mailbox every business day. They are reviewed the same day, logged and assigned a number. If the grievance contains PREA related concerns, the grievance is forwarded to ISU. If there appears to be imminent risk, it is also forwarded to the facility where the inmate is housed. An acknowledgment letter is provided to the inmate within 72 hours. All grievances go through CST for review. If the grievance contains allegations against staff, the incident is investigated by OIA. The grievance will be labeled as PREA and closed. CST reviews grievances within 72 hours of receipt. Ultimately, when an allegation of sexual abuse, sexual harassment or sexual misconduct is received through a grievance, the grievance is closed and the investigation into the allegation is initiated following the process and requirements as noted in DOM and the Federal Prison Rape Elimination Act in terms of investigation and inmate notification.

In a review of PREA Allegation Log, investigations have been initiated through reports using the 602 grievance process. Additionally, inmates were confident in utilizing the

	<p>602 process to report an incident of sexual abuse or sexual harassment.</p> <p>Corrective Action: None</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> PREA Confidential Correspondence with Rape Crisis Centers Mailroom notice PREA Information for Orientation Handbook; English and Spanish Sexual Abuse/Assault Prevention and Intervention pamphlet; English and Spanish Sexual Violence Awareness pamphlet; English and Spanish Inmate Orientation Manual 4. Interviews <ul style="list-style-type: none"> Random Inmates Inmates who reported Sexual Abuse 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44, Section 54040.8.2 provides victims of alleged sexual violence or staff sexual misconduct the right to a victim advocate or victim support person for forensic medical examinations and the investigatory interview.</p> <p>Corcoran has partnered with the Kings Community Action Organization to provide</p>

advocacy and support services. Inmates at Corcoran are provided the address and phone number for the Kings community Action Organization, via the Sexual Violence Awareness and the Sexual Abuse/Assault Prevention and Intervention pamphlets, and the Inmate Orientation Manual. Inmates may call the hotline phone number utilizing the inmate phones, or they may write to them at the address provided. Additionally, the address for Just Detention is also provided to the inmate population

Inmates were inconsistent with the knowledge of available support services, however those who reported sexual abuse were aware of and knowledgeable of available services. Some inmates who were unclear of available services, referenced the posters as a source for more information.

Subsection (b):

The Inmate Orientation Handbook is provided to all inmates in Receiving & Release. The four page PREA information section of the Inmate Orientation Manual is a CDCR standard format and provides comprehensive PREA information, including a section on privacy.

According to the Inmate Orientation Manual, written correspondence between an inmate and a rape crisis center advocate or OIG/OIA is confidential. The outside of the envelope must state "Evid. Code 1035.4 Confidential/Privileged Communication" to be processed in this manner. To remind mailroom staff how to process confidential written correspondence with sexual assault services, reminder information is posted in the mailroom. The standard reminder and attached list of PREA Rape Crisis Centers was submitted for review. Incoming mail from an identified rape crisis center is not read by Corcoran staff but only opened in the presence of the addressee.

The Inmate Orientation Manual also addresses in person or virtual visits with a rape crisis advocate. These meetings will be arranged to occur in a setting which is private and confidential as possible.

Additionally, telephone calls placed on the inmate phone system to the local rape crisis center or OIA/OIG is non-recorded, secure, and private. Inmates are not required to use their pin for the call to be placed.

Finally, when a report of sexual abuse or harassment is received in any format, it will be handled with an appropriate degree of confidentiality. This section furthers that the report will be referred to applicable staff and if the report involves abuse of a child, elder, or dependent adult, the report will be forwarded to authorities according to mandatory reporting laws.

Subsection (c):

Corcoran has entered into an agreement with the Kings Community Action Organization to provide emotional support services and accompaniment to sexual assault forensic examinations and investigation interviews. The Standard Agreement with attached Memorandum of Understanding (MOU) between Corcoran and the Kings Community Action Organization was submitted in the OAS. The agreement began

	<p>December 5, 2019 and remains in place through June 30, 2024. The MOU defines the roles and responsibilities of each entity. Kings Community Action Organization agrees to work with Corcoran to provide inmate victims access to outside victim advocates related to sexual abuse. The MOU defines Victim Advocate Services to include emotional support, crisis intervention, information, and referrals including but not limited to during the forensic examination and investigative interview. The MOU further specifies that Kings Community Action Organization will respond to incarcerated victims via toll-free, non-recorded, non-monitored calls using the inmate phone system; confidential written correspondence; in person crisis counseling; and telephone calls to the agency through a chaplain, counselor, psychologist, or ISU staff.</p> <p>Corrective Action: None</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 5, Article 44 California Code of Regulations Title 15, Article 2 3. Documents <ul style="list-style-type: none"> CDCR public website CDCR public website PREA Reporting Information Inmate Orientation Manual 4. Interviews <ul style="list-style-type: none"> Office of Inspector General Office of Internal Affairs Inmates 5. Tour of the Facility

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.7.2 and 54040.7.2 addresses third party reports on behalf of inmates. Third party is defined as inmates, family, friends, attorneys, or outside advocates. Reports may also be received from personnel from other agencies or institutions. Title 15, Article 2, Section 3391 addresses citizen complaints and how CDCR staff should handle those reports.

Inmates are informed via the PREA section in the Inmate Orientation Manual that one way to report allegations of sexual violence, staff sexual misconduct, or sexual harassment is to tell a family member or friend who can report on the inmate's behalf.

How to report an incident of sexual abuse, staff sexual misconduct, or sexual harassment is available on the CDCR public Website by searching "PREA" or "PREA Reporting Information". The home page did not contain a link directly to the PREA reporting page, however it was accessible through "about CDCR" - Division of Adult Institutions (DAI). The left side of the page contains Prison Rape Elimination Act (PREA) and clicking this link will give the viewer an option for Reporting Information. The PREA Reporting Information provides several ways in which a person may make a report. They may use the facility locator to contact the facility directly. A person may contact the Office of Internal Affairs by region using the address or phone number listed. However, the website does not provide guidance which region an institution belongs. Based on previous audits completed by this auditor, this auditor has confirmed if an allegation is made to an Office of Internal Affairs regional office in which the institution is not assigned, the report will be forwarded to the correct office and the institution where the alleged abuse, harassment or misconduct occurred. The final option for reporting is calling or mailing the Office of the Inspector General (OIG) PREA Ombudsperson. The Office of the Inspector General also provides a link to directly report misconduct or retaliation electronically. On June 17, 2023, for a prior CDCR audit, this auditor contacted OIG electronically, using the link on the public website. A response was received by email within two business days. The staff from OIG indicated that they immediately contact the Warden and PCM of the institution in which an allegation of sexual abuse or sexual harassment is made.

Most inmates interviewed were aware that someone outside of Corcoran could report sexual abuse or sexual harassment on their behalf.

Recommendation: Under the Family and Friends tab on the CDCR website, add a link to "PREA Reporting Information" under "Who to Contact" to report an incident of sexual abuse, sexual harassment, or retaliation.

	Corrective Action: None
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 5, Article 44 CDCR Department Operations Manual Chapter 3, Article 22 3. Documents <ul style="list-style-type: none"> On-the-Job Training Module Prison Rape Elimination act (PREA) version 2.0 BET ID: 11053499; Participant Module and Power Point Slides CDCR 2305 Protection Against Retaliation (PAR) - Staff; blank form 4. Interviews <ul style="list-style-type: none"> Warden PREA Coordinator Investigators Medical and Mental Health Providers Random Staff 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44, Section 54040.7 requires all CDCR staff to report immediately and confidentially to a supervisor if they have information that indicates an inmate is being or has been the victim of sexual violence, staff sexual misconduct or sexual harassment. Policy provides specific direction to staff regarding the manner in which to report, to whom, and follow up documentation. Article 44 is silent as to requiring staff to report immediately any staff neglect or violation of responsibilities</p>

that may have contributed to an incident or retaliation or retaliation against inmates or staff who reported such an incident. However, DOM Chapter 3, Article 22, Section 33030.3.1 - Code of Conduct expects staff to report misconduct or any other unethical or illegal activity and cooperate fully with any investigation.

DOM Chapter 5, Article 44, Section 54040.13 addresses retaliation monitoring. The PCM or designee monitors the conduct and treatment of inmates or employees who report sexual violence or staff sexual misconduct and the victim to ensure there are no changes that may suggest retaliation. If retaliation is indicated, the assigned supervisor notifies the PCM who is responsible for remedying the retaliation. Retaliation monitoring for staff is documented using the CDCR 2305 Protection against Retaliation (PAR) - Staff.

On-the-Job PREA Training Module and Power Point were submitted for review. This training is required of all staff. During this module, staff are trained that it is their responsibility to report "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". Training also includes CDCR's prohibition of retaliatory measures against employees or offenders and further defines retaliatory behavior as coercion, threats of punishment, or any other activities intended to discourage or prevent staff or offenders from reporting incidents or cooperating with investigations of incidents.

Staff consistently reported that they would report any knowledge or suspicion of any incidents of sexual abuse or sexual harassment to a supervisor.

Subsection (b):

DOM Chapter 5, Article 44, Section 54040.8 requires staff to "maintain professional behavior when interacting with an alleged victim of sexual violence or staff sexual misconduct". Additionally, staff are reminded that the information is to be treated as confidential and "disclosure made only to employees who have a "need to know" and to other persons and entities as permitted by law". Training documents confirm staff are trained in this expectation. Staff consistently reported they would immediately tell a supervisor and staff who needed to know such as ISU or medical.

Subsection (c):

Mental Health and Medical Health providers at Corcoran acknowledged their responsibility to immediately report to a custody supervisor should they become aware of an inmate being the victim of sexual abuse, sexual harassment, or sexual misconduct. Medical and Mental Health staff confirmed they disclose limitations of confidentiality and their duty to report for incidents such as sexual abuse, sexual harassment, and suicide concerns.

Subsection (d):

Corcoran does not house individuals under 18 years of age, as previously noted. When a report is made on behalf of a vulnerable adult, response is the same and

	<p>efforts are made to ensure the individual's needs are met.</p> <p>Subsection (e):</p> <p>DOM Chapter 5, Article 44 addresses the routing of allegations to the Locally Designated Investigator in Section 54040.7.2 and 54040.7.3 when a third party reports sexual abuse and sexual harassment by staff and by inmate, respectively. Section 54040.7.4 addresses the process of notification from other facilities and includes the assignment of the allegation for investigation. Section 54040.12 Investigation states "all allegations of sexual violence, staff sexual misconduct, and sexual harassment" are to be investigated. The Warden confirmed that all allegations are investigated. According to the investigators, all allegations of sexual abuse and sexual harassment are investigated. Third party and anonymous reports are investigated in the same manner as all other reports.</p> <p>Corrective Action: None</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <ol style="list-style-type: none"> 3. Documents 4. Interviews <p>Agency Head</p> <p>Warden</p> <p>Random Staff</p> <ol style="list-style-type: none"> 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p>

	<p>DOM Chapter 5, Article 44, Section 54040.7 requires staff to immediately report to the appropriate supervisor any information that indicates an inmate is being or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment. This section continues that any staff member with significant concern that an inmate may be subject to sexual victimization should immediately notify a custody supervisor. DOM reminds staff of their responsibility to protect people in their custody, assist them, and refer them to medical and mental health for evaluation.</p> <p>The Agency Head reiterated that all staff are responsible for reporting immediately and confidentially to a supervisor when they learn someone is at a substantial risk of sexual abuse. Staff have a responsibility to assist the individual with medical and mental health evaluation. The supervisor is tasked with conducting the screen to ensure safe housing.</p> <p>The Warden confirmed that staff ensure the safety of those at higher risk for sexual victimization. Staff listen to their concerns and may use single cell as an option to protect inmates.</p> <p>Staff who have regular contact with inmates consistently reported they would remove the inmate from the situation, gather more information and notify a supervisor. Additionally, they noted the use of single cell or a change in housing assignment as a means to protect an inmate at risk. Staff further reported this would happen immediately.</p> <p>According to the PAQ, Corcoran had zero inmates in the past twelve months who were at a substantial risk of imminent sexual abuse.</p> <p>Corrective Action: None</p>
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115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <ol style="list-style-type: none"> 3. Documents <p>PREA Investigation Log</p>

Warden to Warden Notifications; 4

4. Interviews

Agency Head

Warden

5. Tour of the Facility

Findings:

Subsection (a):

According to DOM Chapter 5, Article 44, Section 54040.7.4 when an institution receives an allegation that an inmate was sexually abused while at another facility, the hiring authority of the facility receiving the allegation notifies the hiring authority of the facility where the abuse occurred or appropriate office of the agency where the alleged abuse occurred.

At Corcoran, the hiring authority rests with the Warden. The Warden confirmed that she notifies the hiring authority of the other facility when an allegation is received at Corcoran. Typically, the PREA Sergeant notifies the Warden with a synopsis of the allegation and she in turn emails the the Warden of the facility where the incident occurred.

The PAQ indicated 9 allegations of sexual abuse or sexual harassment of inmates housed at another facility were received by Corcoran staff. According to investigation tracking, over the past year, investigations have been initiated for allegations of sexual abuse or sexual harassment having occurred at another institution and being reported by inmates housed at Corcoran. Two email notifications made by Corcoran and two email notifications received by Corcoran were submitted for review.

Subsection (b):

DOM Section 54040.7.4 dictates that the initial notification must be provided as soon as possible, but no later than 72 hours after receiving the allegation. Notifications were consistently made on the same day the report was received at the institution. It should be noted, that when the Corcoran Warden received a report, it was immediately forwarded to ISU and acknowledged.

Subsection (c):

According to DOM Section 54040.7.4, the notification may be made by telephone or electronic mail and followed up with a written summary of the alleged victim's statement. Additionally, the facility where the abuse was reported is responsible for completing the SSV-IA form. The facility in which the alleged incident occurred is responsible for conducting the investigation and the Institutional PREA Review Committee. According to the PREA Investigation Log, the incidents reported at

	<p>Corcoran were the responsibility of Corcoran to investigate. In the same manner, incidents occurring at Corcoran, yet reported at another institution, is the investigative responsibility of and assigned investigation numbers of the institution receiving the report.</p> <p>Subsection (d):</p> <p>According to DOM Section 54040.7.4, the facility in which the alleged incident occurred is responsible for conducting the investigation and the Institutional PREA Review Committee. The Agency Head confirmed the practice in which the Hiring Authority where the allegation is received contacts the Hiring Authority where the incident occurred. This typically involves a phone call followed by an email within 24 hours.</p> <p>Corrective Action: None</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <ol style="list-style-type: none"> 3. Documents <p>Initial Contact Guide (PREA)</p> <p>Custody Supervisor Checklist (PREA)</p> <p>In-Service Training - Prison Rape Elimination Act (PREA) Version 3.0 Course Code: 11054378; Instructor Text</p> <p>Investigation Files</p> <ol style="list-style-type: none"> 4. Interviews <p>Random Staff</p> <p>Inmates who reported sexual abuse</p> <ol style="list-style-type: none"> 5. Tour of the Facility

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.8 speaks specifically to the initial contact between CDCR staff with victims of sexual violence or staff sexual misconduct. Specifically, the victim should be taken to a private location and asked not to shower, remove clothing without custody supervision, use the restroom facilities, or consume any liquids.

The Initial Contact Guide (PREA) Section 1 includes requesting the victim and ensuring the suspect not shower, brush teeth, remove clothing without custody supervision, use restroom facilities, or consume any liquids. Section 2 provides staff with further guidance which includes assess immediate medical and custody needs, contact supervisor, take the victim to a secure location; and seek assistance to secure the crime scene. Section 3 Initial Contact with Suspect specifically say "Ensure no contact with the victim".

The Custody Supervisor Checklist (PREA) mirrors the Initial Contact Guide (PREA) which includes requests of the victim and requirements of the suspect. The supervisor is responsible to ensure the crime scene is secured, ensure no visual or physical contact occurs between the victim and suspect, ensure medical assessment / triage is initiated, and designate an evidence officer to collect and process evidence.

Custody staff were asked to describe their responsibilities when being the first person alerted to an incident of sexual assault. Staff were aware of their first responder duties, consistently noting they would separate the alleged victim and alleged abuser, they would contact a supervisor, and take steps to preserve evidence.

The PAQ indicated 38 sexual assault incidents were reported at Corcoran within the past 12 months and all were within 72 hours of the assault. According to the PAQ, staff responded appropriately according to their first responder responsibilities. Investigation file review and inmates who reported sexual abuse confirmed that staff acted immediately upon learning of an incident of sexual abuse, consistently noting separation of alleged victim and abuser.

Subsection (b):

DOM Chapter 5, Article 44, Section 54040.8 addresses first responder expectations. Direction for all staff is to take the alleged victim to a private area and request the victim not shower, remove clothing without custody supervision, use the restroom facilities, and/or consume any liquids. This section also references the Initial Contact Guide available to assist staff. The Initial Contact Guide (PREA) instructs non-custody staff to notify the custody supervisor of the area for assistance in responding to situations. Although policy does not explicitly direct staff to contact security staff, policy directs employees to the Initial Contact Guide (PREA) which provides the direction. Non-custody staff interviewed indicated they would either immediately

	<p>notify custody staff and ISU or immediately tell their supervisor.</p> <p>According to the In-Service Training - PREA Instructor Text, all staff are trained to report immediately and confidentially to the appropriate supervisor. Immediately after reporting to the supervisor, the employee is expected to document the information that was reported. The incident is then reported to the hiring authority via the watch commander. First responder duties are addressed during In-Service Training - PREA.</p> <p>The PAQ indicated zero allegations of sexual assault were first reported to non-custody staff. Non-custody staff were also aware of their first responder duties, notably keeping the alleged victim separate and safe and notifying a supervisor. Additionally, staff were cognizant of preserving evidence by asking the victim not to do anything to destroy evidence such as using the bathroom, drinking, washing, or changing clothes.</p> <p>Corrective Action: None</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 3. Documents Memorandum to all Staff dated September 23, 2020, Subject: Department Operations Manual Supplement 54040.1 - Prison Rape Elimination Act; 20 pages with attachments Memorandum to all Staff dated December 26, 2023, Subject: 54040.2 Prison Rape Elimination act DOM; Operations Manual Supplement with Attachments A-J 4. Interviews 5. Tour of the Facility

	<p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44 ensures all staff responds appropriately to incidents of alleged sexual violence or staff sexual misconduct against inmates. The coordinated response plan submitted by Corcoran, addresses education and prevention; detection, notification, and reporting; first responder responsibilities, custody supervisor responsibilities; crime scene preservation and evidence collection; victim advocate; transportation responsibilities; forensic medical examinations; mental health responsibilities; and investigation.</p> <p>The Warden confirmed Corcoran has a plan to respond to incidents of sexual abuse. Noting specifically, that ISU is immediately notified and responds regardless of the time of day.</p> <p>The staffing plan was updated on December 26, 2023 and all staff were notified through memorandum. Attached to the Coordinated Response Plan are attachments A through J consisting of Watch Commander Checklist, Initial Staff Contact Checklist, Custody Supervisor Checklist, Transportation Checklist , Procedure for Examining Team, Medical Checklist, Custody Response to Victim - Post trauma, and Investigative Services unit. The Operations Manual Supplement and attachments is a comprehensive plan for staff to follow. However, the supplements contained language instructing staff to "Ensure victim/suspect, to the best of your ability, does not: Shower, remove clothing without medical supervision, use the restroom facilities, consume any liquid". During post audit, Corcoran updated the language and notified staff to request the alleged victim and ensure the alleged abuser not take steps to destroy evidence.</p> <p>Corrective Action: None</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures 3. Documents

Agreement Between State of California and Union of American Physicians and Dentists Covering Bargaining Unit 16 Physicians, Dentists, and Podiatrists effective July 1, 2020 through July 1, 2022; 140 pages

Agreement Between the State of California and California association of Psychiatric Technicians (CAPT) covering Bargaining Unit 18 Psychiatric Technicians Effective January 2, 2019 through July 1, 2022; 164 pages

Agreement Between State of California and California Peace Officers Association Bargaining Unit 6 Covering Bargaining Unit 6 Corrections Effective July 3, 2020 through July 2, 2023; 250 pages

Agreement Between the State of California and the Professional Engineers in California Government Covering Bargaining Unit 9 Professional Engineers Effective July 1, 2020 through July 1, 2023; 155 pages

Agreement Between the State of California and CAL Fire Local 2881 covering Bargaining Unit 8 Firefighters Effective January 1, 2017 through July 1, 2021; 154 pages

Agreement Between the State of California and International Union of Operating Engineers (IUOE) covering Bargaining Unit 12 Craft and Maintenance effective July 1, 2021 through June 30, 2023; 199 pages

Agreement Between State of California and Service Employees International Union (SEIU) - Local 1000 covering Bargaining Units 1,3,4,11,14,15,17, 20, and 21 Master Agreement effective January 2, 2020 through June 30, 2023; 915 pages

4. Interviews

Agency Head

5. Tour of the Facility

Findings:

Subsection (a):

According to the Agency Head, CDCR has entered into or renewed collective bargaining or other agreements. All agreements allow CDCR to remove alleged staff sexual abusers from contact with any inmate pending an investigation.

The Agreements between the State of California and the California Peace Officers Association, State of California and California association of Psychiatric Technicians (CAPT) covering Bargaining Unit 18 Psychiatric Technicians, State of California and Union of American Physicians and Dentist, State of California and CAL Fire Local 2881, State of California and International Union of Operating Engineers (IUOE) covering Bargaining Unit 12 Craft and Maintenance, State of California and the Professional Engineers in California Government Covering Bargaining Unit 9 Professional

	<p>Engineers, and California and Service Employees International Union (SEIU) - Local 1000 were submitted in their entirety. General language is included in the agreements acknowledging the rights of management or the State. The rights to terminate or otherwise relieve employees from duty for lack of work or other legitimate reasons; to suspend, discharge or discipline employees is only noted in the agreements between the State of California and the California Peace Officers Association and State of California and CAL Fire Local 2881. State of California and Union of American Physicians and Dentist, State of California and International Union of Operating Engineers (IUOE) covering Bargaining Unit 12 Craft and Maintenance, and the State of California and Union of American Physicians and Dentist are not as inclusive and provide management the rights to determine the procedures and standards of selection for employment and promotion, layoff, assignment, scheduling and training. The State of California and California association of Psychiatric Technicians (CAPT) covering Bargaining Unit 18 Psychiatric Technicians does not include language as noted above, nor does the contract language limit the agency's ability to remove alleged staff sexual abusers form contact with inmates pending an investigation. Thus, allowing CDCR to protect inmates from staff abusers.</p> <p>Corrective Action: None</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 5, Article 44 California Code of Regulations Chapter 1, Article 2 3. Documents <ul style="list-style-type: none"> CDCR 2304 Protection Against Retaliation (PAR) - Inmate; blank form CDCR 2305 - Protection Against Retaliation (PAR) - Staff; blank form Investigation Files; completed CDCR 2304 4. Interviews <ul style="list-style-type: none"> Agency Head

Warden

Inmates

5. Tour of the Facility

Findings:

Subsection (a):

Retaliation is addressed in California Code of Regulations, Title 15, Division 3, Chapter 1, Subchapter 5, Article 2; Section 3401.5 Staff Sexual Misconduct. Both staff and inmate protections are addressed in this section. Specifically, retaliation against employees who report incidents of staff sexual misconduct "shall not be tolerated and shall result in disciplinary action and / or criminal prosecution". Similarly, retaliation against inmates or parolees who report incidents of staff sexual misconduct "shall not be tolerated and shall result in disciplinary action and / or criminal prosecution".

DOM Chapter 5, Article 44, Section 54040.13 addresses retaliation monitoring of inmates and employees who report sexual violence or staff sexual misconduct. DOM assigns the institutional PCM the task of monitoring for retaliation and further allows the PCM to delegate monitoring to staff assigned to the Investigative Services Unit or Supervisory staff. The Agency Head reiterated the no tolerance policy for retaliation and furthered that staff may face penalties, up to termination, for participating in retaliation. He described the retaliation monitoring process and documentation, and identified housing changes as a means to protect inmates. Corcoran follows department policy as noted above. Corcoran has assigned retaliation monitoring to staff from the Investigative Services Unit. The Warden confirmed ways in which inmates may report retaliation to Corcoran staff. If retaliation is suspected, Corcoran will follow up with an investigation and disciplinary actions as appropriate.

Subsection (b):

Protection measures are addressed in Title 15. Inmate victims who report incidents of staff sexual misconduct or cooperate with a staff sexual misconduct investigation may have a housing change or transfer, removal of the alleged staff from contact with the victims, and emotional support services for inmates who fear retaliation for reporting staff sexual misconduct, sexual harassment, or for cooperating with an investigation. The most common protection measure identified by staff and inmates is housing changes and the use of single cell housing. Corcoran has the ability to move inmates within the institution between buildings and yards or may transfer an inmate to another prison. Additionally, Corcoran has the ability to redirect staff.

Subsection (c):

According to DOM Chapter 5, Article 44, Section 54040.13 following an allegation of sexual violence or staff sexual misconduct, monitoring for retaliation occurs for at least 90 days and may continue beyond 90 days if the initial monitoring indicates a

continuing need. If retaliation is suspected, the PCM is required to act promptly to remedy the retaliation. According to the CDCR 2304 Protection Against Retaliation (PAR) - Inmate, monitoring includes a review of disciplinary reports, program changes, housing changes and an interview of the inmate. Monitoring occurs every 15 days for 90 days. According to completed PAR - Inmates, retaliation monitoring includes a review of disciplinary reports, housing changes and program or job changes every 15 days, and interview with the inmate. Retaliation Monitoring does occur for 90 days as evidenced in the investigation file review and staff interviews.

Retaliation monitoring is also available for staff and is documented on the CDCR 2305 Protections Against Retaliation (PAR) - Staff. As with inmate retaliation monitoring, monitoring consists of checks every 15 days of post reassignment, offering emotional support through employee assistance, removal of the alleged staff abuser from contact with the victim, and facility transfer. Retaliation monitoring of staff also takes place for 90 days.

Subsection (d):

Copies of the blank CDCR 2304 and CDCR 2305 were submitted and reviewed. The forms require documentation every 15 days. Investigative files were reviewed on site which included completed CDCR 2304 forms. The monitoring included documentation review every 15 days with sporadic inmate interviews.

Subsection (e):

California Code of Regulations, Title 15, Division 3, Chapter 1, Subchapter 5, Article 2; Section 3401.5 notes that protection measures are available for staff or inmates who fear retaliation for reporting staff sexual misconduct or sexual harassment or for cooperating with investigations. According to the Warden, when retaliation is suspected, the allegation is investigated and documented, and steps are taken to keep people separate.

Subsection (f):

DOM Section 54040.13 terminates the Department's obligation to monitor if the investigation determines the allegation was unfounded. This was consistent with documentation in the investigation file review.

Recommendation: 115.67 (d): Documentation review is consistently completed every 15 days to identify any changes or concerns that may indicate retaliation. Monitors should include more regular face to face status checks to allow the inmate an opportunity to voice concerns about their safety and an opportunity for monitors to interact with the inmate to identify changes in communication, demeanor, or appearance which may be indicative of further abuse or retaliation.

Corrective Action: None

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 California Code of Regulations Chapter 1, Article 7 3. Documents 4. Interviews Warden Random Staff Segregation Staff Inmates 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p> <p>California Code of Regulations, Title 15, Division 3, Chapter 1, Subchapter 4, Article 7; Section 3335 addresses administrative segregation and its use for non-disciplinary purposes. If an inmate is placed in segregated housing related to being a victim of a PREA related incident, the inmate is afforded the same programs and privileges as if in general population. The inmate may remain in Non-Disciplinary Segregation only until an alternative means of separation from the abuser may be arranged. Every 30 days, the custody supervisor reviews and determines if segregation is necessary. Reviews are documented in the General Chrono.</p> <p>According DOM Chapter 5, Article 44, Section 54040.14.1, victims of a PREA related incident may be removed from general population and placed on Non-Disciplinary Segregation status for ongoing safety concerns. The custody supervisor is responsible for reviewing the incident, documenting his or her observation and attending the initial ICC to provide input into the final decision on retention or release from Non-Disciplinary Segregation. The custody supervisor is required to conduct assessment every thirty days from the date the inmate is placed on Non-Disciplinary Segregation</p>

	<p>status.</p> <p>According to the PAQ, zero inmates who alleged to have suffered sexual abuse were held in Non-Disciplinary Segregation status.</p> <p>Investigation file review did not indicate alleged victims were placed in administrative segregated status in response to an allegation of sexual abuse or sexual harassment. It should be noted that only one inmate interviewed discussed fear of reporting an incident of sexual abuse or sexual harassment, out of fear of being placed in administrative segregation. No other inmate expressed belief they would be placed in administrative segregation for reporting or acknowledging a safety concern. Additionally, staff did not identify the use of administrative segregation as a response to address inmate safety.</p> <p>Warden indicated that administrative segregation may be used to address safety, however this is not utilized for PREA safety. If there are sexual safety concerns, inmates are immediately assigned a single cell. If safety concerns continue, inmates may be transferred to other yards. Staff supervising inmates in segregation talked about housing inmates pending an investigation. Inmates in segregation are reviewed by committee within 14 days of placement and regularly thereafter.</p> <p>Corrective Action: None</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 3, Article 14 CDCR Department Operations Manual Chapter 5, Article 44 California Code of Regulations 3. Documents <ul style="list-style-type: none"> CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Participant Workbook Version 1.0 BIC BET ID 11055853 (LDI Standalone: 11057915)

CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Lesson Plan Version 1.0 BIC BET ID 11055853

PREA Records Retention Schedule

Investigation Files

LDI Training Roster and completion certificate

Course Enrollments for Basic Locally Designated Investigators - OCS - 11055853

Course Enrollments for PREA - Locally Designated Investigators - OCS IST - 11057915

PREA Allegation Log

4. Interviews

PREA Coordinator

Warden

PCM

Investigators

Inmates

5. Tour of the Facility

Findings:

Subsection (a):

Corcoran conducts both administrative and criminal investigations. DOM Chapter 5, Article 44, Section 54040.12 requires all allegations of sexual violence, staff sexual misconduct, and sexual harassment be investigated. Policy requires allegations of staff on inmate sexual misconduct to be immediately reported to the Watch Commander and Hiring Authority who will assign an investigator. Likewise, allegations of inmate on inmate sexual abuse or harassment is required to be immediately reported to the Watch Commander who notifies Investigative Services Unit who will commence an investigation. Section 54040.7.2 and 540.7.3 outlines the handling of allegations of misconduct, sexual violence or sexual harassment received from a third party by staff or inmate respectively and includes who is responsible for the investigation. DOM Chapter 3, Article 14 addresses Internal Affairs Investigations. Policy requires every allegation of staff misconduct be promptly reported, objectively reviewed, and investigated when appropriate. Section 31140.14 supports the requirement that allegations of staff misconduct must be investigated promptly. Complaints against staff and inmates are investigated utilizing standard investigatory procedures.

Third party reports are addressed in DOM 54040.7.2 and describes the process in which an inquiry and investigation occur. Training materials mirror policy for addressing third party reports.

According to the CDCR PREA Training for Locally Designated Investigators Participant Workbook, investigators are trained to investigate allegations of sexual violence, staff sexual misconduct, and sexual harassment promptly, thoroughly, and objectively.

The Corcoran investigators confirmed that investigations into sexual abuse and sexual harassment are immediately investigated. Third party and anonymous reports are processed the same as any other PREA concern. Investigation file review confirmed that investigations are assigned and started on the day the allegation is received by staff. When an allegation is received, the information is immediately referred to ISU and in turn, ISU completes an initial inquiry or interview. Investigations are thorough and documented upon completion. Investigations assigned to OIA are not completed as promptly as those conducted by Corcoran investigators.

Subsection (b):

LDIs assigned to Corcoran and OIA who are assigned to investigate sexual abuse allegations have received specialized training as noted in 115.34. This is consistent with DOM Chapter 5, Article 44, Section 54040.4 and submitted training materials. Both investigators reported completing specialized training and confirmed by training records.

Subsection (c):

According to the Specialized PREA Training for Locally Designated Investigators (LDI) Participant Workbook, investigators are trained to gather direct and circumstantial evidence, including physical and DNA evidence; interview victims, suspects when inmate on inmate allegations, and witnesses; and review prior complaints and reports of sexual abuse. PREA Investigators described various evidence collected during an investigation such as physical evidence from the scene, clothing, video and interviews of witnesses, suspect, and victim. Additionally, investigators consider previous reports and mental health history. Interview and evidence summaries housed in the investigation files were reviewed while on site at Corcoran.

Subsection (d):

DOM Chapter 3 Article 14, Section 31140.21 addresses Administrative Investigations. The prosecuting agency shall be consulted prior to any compelled subject interview when criminal charges or court proceedings are pending. Investigators are trained that when criminal charges are possible, they should not compel an interview. They are directed to contact OIA and consult with the District Attorney. Investigators confirmed that they discuss the case with the District Attorney's office prior to conducting a compelled interview. Investigators report a good rapport with the District Attorney's Office and confer with them prior to referring the case for prosecution.

Subsection (e):

Specialized PREA Training for Locally Designated Investigators (LDI) Participant Workbook and Lesson Plan confirms investigators are trained to assess the reliability of the victim, suspect, and witness on an individual basis rather than the individual's status as an inmate or staff. According to DOM Chapter 5, Article 44, investigators are required to address the reasoning behind a credibility assessment in their investigation documentation.

The Corcoran investigators indicated that all persons involved are credible until they are proven otherwise. Investigators conduct thorough investigations regardless of the allegation. Although CDCR has a variety of tools, polygraphs are not utilized for an investigation into sexual misconduct, sexual abuse, or sexual harassment.

Inmates who reported sexual abuse at Corcoran confirmed they were not asked nor required to take a polygraph test as part of the sexual abuse investigation.

Subsection (f):

According to DOM Chapter 3, Article 14, Section 31140.21, administrative investigations are conducted for allegations of staff misconduct which are in violation of policy, procedure, or law.

According to DOM Chapter 5, Article 44, Section 54040.12, the investigator should determine whether staff actions or failures to act contributed to the sexual abuse incident. This requirement is noted under the heading of Staff on Offender and is silent for Offender on Offender allegations. However, investigators confirmed that during an investigation they consider staff actions or staff failure to act.

DOM Chapter 5, Article 44, Section 54040.12 directs investigators of sexual abuse, staff sexual misconduct, and sexual harassment to document in writing the investigation. For investigations involving staff misconduct, the investigation is documented in a Confidential Memorandum which includes: 1. a description of the physical and testimonial evidence; 2. the reasoning behind credibility assessments; 3. the investigative facts and findings. Offender on Offender investigations follow standard investigative procedures. Credibility of an alleged victim, suspect, or witness must be determined based on fact and evidence rather than an individual status.

Training materials confirm investigators are trained to assess the reliability of the victim, suspect and witnesses on an individual basis rather than an individual's status as inmate or staff in all sexual abuse, sexual harassment and staff sexual misconduct investigations.

Investigation files reviewed confirmed that staff actions or failures to act are considered and identified in all investigations and credibility assessments are completed based on the evidence. According to one investigator, if the investigation determines staff may have failed to do their duty, investigators will recommend administrative review.

Corcoran investigators also confirmed a report is compiled at the conclusion of each

investigation. Confidential Memorandums were reviewed while on site. These contain a summary of the investigation, a review of the evidence and how it led to the outcome of the investigation.

Subsection (g):

DOM Chapter 3, Article 14, Section 31140.20 requires a criminal investigation be conducted for all allegations of employee misconduct when there is reason to believe the employee committed a violation of criminal law. The investigators identify and document the potential criminal violation and the facts and evidence represented in support of the complaint. As noted in Subsection (f), allegations of sexual violence, staff sexual misconduct and sexual harassment are investigated, and the findings documented in writing. According to the investigators, the entire investigation is documented.

Subsection (h):

DOM Chapter 3, Article 14, Section 31140.20 states that if probable cause exists to believe a crime was committed by an employee, the investigation is referred to the appropriate agency for prosecution. California Code of Regulations Title 15, Division 3, Chapter 1, Subchapter 4, Subsection 3316 addresses criminal misconduct by persons under the authority of CDCR or occurring on facility property and directs the institution to refer to appropriate authorities for investigation and prosecution when there is evidence substantiating each of the elements of the crime to be charged. It should be noted the CDCR custody staff and investigators are sworn law enforcement and have the authority and training to conduct both administrative and criminal investigations.

According to the PAQ, Corcoran has referred 4 substantiated allegations for criminal prosecution since the last PREA audit. In the past year, one investigation has been substantiated and referred for criminal prosecution.

Subsection (i):

DOM Chapter 5, Article 44, Section 54040.17 refers to the CDCR Records Retention Schedule for all case records associated with PREA related reports including incident reports, investigation reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling. The PREA Records Retention Schedule (RRS) requires the investigatory file be retained "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". The schedule continues with a list of documents that may be included as well as "Any documents not identified which pertain to the PREA incident, investigation, or allegation". A copy of all items created in connection with an allegation, incident, investigation or inquiry are maintained in the Investigatory File retained by the Investigative Services Unit. Records retention is also addressed in the Specialized PREA Training for Locally Designated Investigators training.

Subsection (j):

	<p>According to DOM Chapter 5, Article 44, Section 54040.12, investigations continue even if the alleged suspect or victim is no longer employed or under the care and control of CDCR.</p> <p>Corcoran PREA Investigators confirmed they continue to investigate when the staff is no longer employed at Corcoran or the inmate is no longer housed at Corcoran. Investigators will reach out to other institutions or parole to continue interviewing former inmates or may work with local law enforcement to reach prior staff.</p> <p>Subsection (I):</p> <p>Corcoran conducts both administrative and criminal investigations.</p> <p>The PREA Coordinator confirmed that all custody staff are Peace Officers, and as such CDCR conducts their own administrative and criminal investigations. The Warden and PCM furthered that if there was an outside agency involved in an investigation, another institution, or OIA Corcoran investigators would be somewhat involved with evidence gathering and assisting with statements. Additionally, the Corcoran investigators noted that they would serve as a liaison and may assist with evidence collection or coordinate interviews.</p> <p>Recommendation: 115.71 (f) & (g) Add more detail in the Confidential Memorandum when describing the evidence reviewed and how that justifies the outcome recommendation. Rather than simply stating the video did not show PREA, further describe what the video showed in order to support the not PREA finding.</p> <p>Corrective Action: None</p>
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 3, Article 22</p> <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <ol style="list-style-type: none"> 3. Documents

	<p>Specialized PREA Training for Locally Designated Investigators Participant Workbook Version 1.0 BIC BET ID: 11055853 (LDI Standalone: 11057915)</p> <p>Investigation Files</p> <p>4. Interviews</p> <p>Investigators</p> <p>5. Tour of the Facility</p> <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article Section 54040.12 requires no standard higher than the preponderance of the evidence to be used when determining whether allegations of sexual abuse or sexual harassment are sustained. DOM Chapter 3, Article 22, Section 33030.13.1 imposes preponderance of evidence as the standard to sustain any allegation of staff misconduct.</p> <p>The Corcoran investigators confirmed they use preponderance of the evidence standard when substantiating an allegation of sexual abuse or sexual harassment. This is consistent with training they received during the Specialized PREA Training for Locally Designated Investigators. A review of investigation files also supported this standard.</p> <p>Corrective Action: None</p>
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115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 3. Documents CDCR 128-B General Chrono; blank and completed

Specialized PREA Training for Locally Designated Investigators Participant Workbook
Version 1.0 BIC BET ID: 11055853 (LDI Standalone: 11057915)

Unsubstantiated Sexual Misconduct investigation packet; 24 pages

Investigation File Review

PREA Allegation Log

4. Interviews

Warden

Investigators

Inmates

5. Tour of the Facility

Findings:

Subsection (a) & (e):

DOM Chapter 5, Article 44, Section 54040.12.5 indicates that following an investigation into allegations of sexual misconduct by staff or sexual violence by inmates, the alleged victim is notified of the outcome of the investigation; substantiated, unsubstantiated, or unfounded. This notification in CDCR is done by ISU utilizing the CDCR 128-B General Chrono. The CDCR 128-B General Chrono is utilized to notify alleged victims of case findings and has a check box for substantiated, unsubstantiated, and unfounded. The inmate signs receipt of the notice.

According to the PAQ, 38 allegations of sexual abuse and staff sexual misconduct have been investigated during the past twelve months and 17 alleged victims have been informed of the investigation outcome. According to the PREA Investigation Log, in the past calendar year, 18 staff sexual misconduct allegations were investigated, with 2 being closed. An additional 8 allegations were found not to meet the definition of sexual abuse after an initial inquiry, in which LDI interviewed the person reporting the allegation. In the same time frame, 10 allegations of inmate on inmate sexual abuse were received, with 7 being closed and 1 being found to not meet the definition of sexual abuse. 18 allegations remain under investigation.

The Warden confirmed the inmate receives written notification either in a memorandum or a CDCR-128B. She indicated the process recently changed. Both methods of notification were evident in file review. The investigators confirmed the investigator generates the notification at the conclusion of the investigation. This process is also trained during Specialized PREA Training for Locally Designated investigators. Inmate experiences were inconsistent. Two inmates reported not having received notification and one reported receiving written notification. In all

closed sexual abuse investigation files reviewed and all but one closed sexual harassment investigation file contained a closeout memorandum or CDCR-128B Chrono notifying the inmate of the investigation outcome.

Subsection (b):

This subsection is not applicable. Corcoran or CDCR OIA conducts their own investigations. Zero investigations were conducted by outside investigative agency.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.12.5 provides the following notification guidance: when the staff sexual misconduct allegation is unsubstantiated or substantiated, the PCM or designee informs the inmate the following:

- The staff member is no longer posted within the inmate's unit;
- The staff member is no longer employed at facility;
- Indicted on the alleged sexual misconduct; or
- Convicted of the alleged sexual misconduct.

The CDCR 128-B General Chrono contains the above listed status for staff suspects.

Training documents confirm that investigators are trained regarding the agency's obligation to notify inmates following an allegation and investigation of staff sexual misconduct of the investigation outcome and the staff's status within the institution and court process.

Subsection (d):

DOM chapter 5, Article 44, Section 54040.12.5 also requires the institution to inform the alleged victim of sexual violence by another offender whenever the alleged abuser has been indicted for the alleged sexual violence or convicted of the charge. The General Chrono includes notification to the alleged victim if the alleged abuser has been moved to another housing unit or facility and if the alleged abuser was indicated for the allegations or convicted on the charges.

According to the PAQ, zero notifications have been made in response to an investigation of staff on inmate or inmate on inmate sexual abuse. A copy of the notification was viewed in the one substantiated investigation. However, the inmate denied having received a copy.

Subsection (f):

DOM 54040.12 indicates the agency no longer has an obligation to report or inform the inmate of the changes when the inmate is released from CDCR's custody.

Corrective Action: None

115.76	Disciplinary sanctions for staff
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 544 374">Evidence Reviewed:</p> <ol data-bbox="256 412 639 517" style="list-style-type: none"> <li data-bbox="256 412 639 445">1. Pre-Audit Questionnaire <li data-bbox="256 483 616 517">2. Policy and Procedures <p data-bbox="256 555 1094 589">CDCR Department Operations Manual Chapter 3, Article 22</p> <p data-bbox="256 627 1094 660">CDCR Department Operations Manual Chapter 5, Article 44</p> <p data-bbox="256 698 831 732">California Code of Regulations Chapter 1</p> <ol data-bbox="256 770 464 804" style="list-style-type: none"> <li data-bbox="256 770 464 804">3. Documents <p data-bbox="256 842 600 875">PREA Investigations Log</p> <ol data-bbox="256 913 560 1019" style="list-style-type: none"> <li data-bbox="256 913 448 947">4. Interviews <li data-bbox="256 985 560 1019">5. Tour of the Facility <p data-bbox="256 1128 384 1162">Findings:</p> <p data-bbox="256 1200 472 1234">Subsection (a):</p> <p data-bbox="256 1272 1477 1850">CDCR staff discipline as it relates to sexual misconduct is addressed in Title 15, Division 3, Chapter 1, Subchapter 5, Section 3401.5 and DOM Chapter 3, Article 22. Section 3401.5 of Title 15. Staff Sexual Misconduct is defined as any sexual behavior by a department employee, volunteer, agent or individual working on behalf of the Department of Corrections and Rehabilitation, directed toward an inmate or parolee. Retaliation against employees and protection measures is also addressed in this section. DOM Chapter 3, Article 22 addresses potential disciplinary action. Chapter 3 outlines an Employee Disciplinary Matrix. The Matrix includes potential actions for sexual misconduct involving staff, to include harassment; over familiarity with an inmate; and sexual misconduct with an inmate. The potential penalties include a range of salary reduction to dismissal; with the base penalty being salary reduction or suspension without pay. The base penalty is applied unless there are mitigating or aggravating factors. The only penalty noted for sexual misconduct with an inmate(s)/parolee(s) is dismissal.</p> <p data-bbox="256 1888 552 1921">Subsection (b) & (c):</p> <p data-bbox="256 1960 1461 2078">The Employee Disciplinary Matrix serves as a foundation and guide when imposing discipline for staff misconduct. According to DOM Chapter 3, Article 22, Section 33030.17, when applying the Employee Disciplinary Matrix, "no favor is afforded due</p>

to the employee's rank within the department". The matrix assumes the misconduct is one single misdeed and it is the employee's first adverse action. As such, mitigating and aggravating factors are considered when determining the level of discipline within the matrix. The mitigating and aggravating factors considered include: if the misconduct was intentional; premeditated; the employee's length of service and experience; if the misconduct was for personal gain; resulted in serious injury; and other related adverse action(s). When imposing a penalty, the hiring authority, in consultation with the Vertical Advocate and SAIG, consider various factors including: the seriousness of the misconduct; harm or potential harm to the public service; the circumstances surrounding the misconduct; the likelihood of recurrence; previous progressive discipline; and other mitigating or aggravating circumstances.

According to the PAQ, in the past 12 months, 3 staff have violated the Department's policy against sexual misconduct or sexual harassment. The PAQ indicates that zero staff have been terminated. It should be noted, according to the PREA Investigations Log, zero investigations involving staff have been logged as substantiated during the past year. While on site, investigations were completed but pending final approval from the Hiring Authority.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.12.3 addresses reporting to relevant licensing bodies and mirrors 28 C.F.R. Part 115 by requiring "all terminations for violations of agency sexual misconduct or harassment policies, or resignation 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". DOM specifically identifies licensed health care staff in the requirement to report to relevant licensing bodies when it is determined the health care staff engaged in sexual misconduct. DOM Chapter 3, Article 22, Section 31140.20 addresses employee misconduct and referrals for prosecution. This section is silent for staff who resign prior to termination. However, investigators confirmed that they would continue investigating and refer for charges if the employee resigned prior to the conclusion of the investigation.

In the past 12 months, zero employees, contractors, or volunteers have been referred to licensing agencies due to sexual misconduct.

Corrective Action: None

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire
2. Policy and Procedures

CDCR Department Operations Manual Chapter 3, Article 14

CDCR Department Operations Manual Chapter 5, Article 22

CDCR Department Operations Manual Chapter 10, Article 9

3. Documents

PREA Allegation Log

4. Interviews

Warden

5. Tour of the Facility

Findings:

Subsection (a):

DOM Chapter 3, Article 14, Section 31140.20 addresses criminal investigations for allegations of staff misconduct. Volunteers and Contractors fall under the definition of staff and are criminally investigated if there is reason to believe the volunteer or contractor engaged in criminal behavior. DOM Chapter 5, Article 22, Section 54040.12.4 prohibits contractors and volunteers from further contact with offenders if they engage in staff sexual misconduct. Additionally, policy requires notification to relevant licensing bodies.

According to the PAQ, in the past 12 months, zero contractors or volunteers have been reported to law enforcement or relevant licensing bodies for sexual misconduct. This is supported by the PREA Allegation Log.

Subsection (b):

DOM Chapter 10, Article 9, Section 101090.9 allows the hiring authority to limit or discontinue activities of a volunteer or volunteer group which may impede the security and /or operations of the institution. DOM further outlines behaviors which may cause a volunteer or program to be discontinued, such as over familiarity with inmates, over familiarity with family and friends of inmates, or volunteer misconduct. According to the Warden, the location where the volunteer or contractor is assigned would determine if the person would be allowed to continue working at the institution pending an investigation. The institution would investigate the allegations and if there appeared to be truth to the allegations, the volunteer or contractor would not be allowed to enter the institution where they may have contact with inmates.

	Corrective Action: None
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> CDCR Department Operations Manual Chapter 5, Article 44 California Code of Regulations Title 15 3. Documents <ul style="list-style-type: none"> PREA Investigation Log PREA Investigation Files 4. Interviews <ul style="list-style-type: none"> Warden Mental Health Staff 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44, Section 54040.15 speaks to the formal disciplinary process for inmates alleged to have committed sexual violence. The investigative process and the disciplinary process includes referral for criminal prosecution and classification determination if warranted. If the allegations warrant a criminal charge, the process includes completion of the CDCR Form 115, Rules Violation Report. DOM references California Code of Regulations Sections 3316 and 3320; Referral for Criminal Prosecution and Hearing Procedures and Time Limitations, respectively.</p> <p>The inmate is also entitled to all provisions in CCR Title 15, Division 3, Chapter 1, Subchapter 4, Article 5, Section 3315 defines "serious rule violations" as a felony</p>

offense and breaks down further examples of serious rule violations. This section further identifies responses to the behavior, disciplinary hearing, segregation, and referral for prosecution. This section further identifies potential dispositions of the disciplinary hearing.

Section 3323, addresses disciplinary credit forfeiture for the finding of guilt of a serious rule violation. Sexual assault and sexual battery fall under Division A-1 offenses and allow for the most credit forfeiture of 181-360 days.

According to the PAQ, one inmate was found guilty of inmate on inmate sexual assault. The PREA Investigation Log confirms Corcoran's report of one substantiated inmate on inmate sexual assault investigation.

Subsection (b):

CCR Title 15, Division 3, Chapter 1, Subchapter 4, Article 5, Section 3315 identifies potential dispositions based on if the behavior is a first or 2nd or subsequent offence. The Warden confirmed RVR dispositions consider discipline history, particularly if the violation is repeat behavior. Additionally, Corcoran considers sanctions imposed for similar offenses by other inmates with similar histories.

Subsection (c):

According to Title 15, Article 5, Division 3, Chapter 1, Subchapter 4, Section 3317, the disciplinary process includes a mental health assessment when a mental illness or developmental disability, cognitive or adaptive functioning deficits may have contributed to the behavior. The assessment is considered by the hearing officer when determining whether an inmate should be disciplined and the appropriate method of discipline. The Warden confirmed Mental Health reviews the RVR and addresses the inmate's mental health diagnosis and if that impacted the behavior.

Subsection (d):

Title 15, Article 5, Division 3, Chapter 1, Subchapter 4, Section 3317 allows the hearing officer to consider mental health staff's assessment in addition to other relevant information when determining if the inmate should be disciplined or the appropriate discipline when mental illness or developmental disability/cognitive or adaptive functioning deficits contributed to the behavior. Title 15 is silent on requiring inmates to participate in interventions as a condition of access to programming or other benefits. Corcoran does not offer program designed specifically to address offenders of sexual abuse. However, clinicians see anyone regardless of their conviction. Individual clinicians may provide individual therapy to address the offending behavior. Inmates are not required to participate in programming to address sexual offending in order to participate in other programs. Clinicians will ensure that all inmates receive crisis counseling and are safe.

Subsection (e):

CCR Title 15 Division 3, Chapter 1, Section 3007 prohibits inmates from engaging in illegal sexual acts. CCR Title 15, Division 3, Chapter 1, Subchapter 4, Article 5, Section

	<p>3323 Disciplinary Credit Forfeiture Schedule includes "Rape, attempted rape, sodomy, attempted sodomy, oral copulation, and attempted oral copulation against the victim's will". File review did not show evidence of inmates being disciplined for sexual contact with staff who provided consent.</p> <p>Subsection (f):</p> <p>DOM Chapter 5, Article 44, Section 54040.15.1 addresses false allegations. Only after the investigation is completed and it is determined the allegations were either not made in good faith or the inmate knowingly made a false report, then the inmate may be subject to disciplinary action. Section 54040.15.1 furthers that an allegation determined to be unsubstantiated or unfounded based on a lack of evidence does not necessarily constitute false reporting. Although, investigations were unfounded, there was no evidence that suggested the alleged victim was disciplined for making a false allegation. Corcoran should consider discipline when a report is unfounded based on clear evidence that the offense did not occur, evidence such as staff schedules, video documentation, or inmate housing assignments.</p> <p>Subsection (g):</p> <p>According to the PAQ, CDCR prohibits all sexual activity between inmates. CCR Title 15 Division 3, Chapter 1, Section 3007 states "may not participate in illegal sexual acts. Inmates are specifically excluded in laws, which remove legal restraints from acts between consenting adult".</p> <p>Corrective Action: None</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <p>CDCR California Correctional Health Care Services Health Care Department Operations Manual</p> <ol style="list-style-type: none"> 3. Documents <p>CDCR MH-7448 Informed Consent for Mental Health Care; blank form</p>

CDCR 7552 Prison Rape Elimination Act Authorization for Release of Information;
blank form

CDCR 128-MH5 Mental Health Referral Chrono

PREA Screening; 83

4. Interviews

Staff who conduct screening

Inmates

5. Tour of the Facility

Findings:

Subsection (a) & (b):

DOM Chapter 5, Article 44, Section 54040.7 addresses mental health referrals when during the initial intake screen or at any other times during confinement, an inmate reports having experienced sexual victimization or previously perpetrated sexual abuse. The initial PREA screen occurs at Receiving and Release on the day the inmate arrives at Corcoran. During the PREA Screening, inmates are asked if they experienced sexual victimization in a correctional setting and non-correctional setting. PREA Screening also asks inmates if they have had a prior conviction for a sexual offense in a non-correctional setting and history of sexual violence in a correctional setting. The PREA Screening identifies risk of victimization or risk of abusiveness and includes a check box for mental health referral or decline of services. Additionally, if there is a more emergent mental health need, psychology staff are available in Receiving and Release to assist. Staff who complete PREA Screening confirmed this process. Additionally, inmates who reported previous sexual abuse during the PREA Screening confirmed they were immediately offered a mental health referral.

The CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 addresses this standard. If a patient discloses they have experienced prior sexual victimization or previously perpetrated sexual abuse to staff during the initial custody intake screening or any other time during confinement, the patient is offered a follow-up meeting with mental health and medical staff. If the patient agrees a referral is made, and the patient seen within 14 calendar days.

According to the PAQ, 100% of inmates reporting prior victimization or perpetration of sexual assault was offered a follow-up meeting with mental health.

Section C of the PREA Screening forms is titled Mental Health Referral. This section contains instructions to the screener when a Mental Health referral should be should be offered. The screener indicates the inmate's response by checking whether the

inmate declined or accepted the referral. If the referral is accepted, the screener completed a CDCR 128-MH5, Mental Health Referral Chrono and submit it to Mental Health. 83 completed PREA Screenings were reviewed. Based on the directions, Section C was consistently completed, with all but one person accepting a referral.

Examples of completed CDCR 128MH Mental Health Referral Chrono and examples of completed CDCR 7552 PREA Authorization for Release of Information and MH 7448 Informed Consent were requested to confirm Corcoran's implementation of the policy. However no completed documents were submitted for review. Compliance was determined by reviewing Mental Health documentation, including date of arrival to Corcoran and date seen by Mental Health indicating those who accepted a mental health referral were seen within 14 days.

Subsection (c):

This section is not applicable, as Corcoran is a prison, not a jail.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.3 defines "Need to Know" Basis as "When the information is relevant and necessary in the ordinary performance of that employee or contractor's official duties". The "need to know" phrase is used again in 54040.8 when addressing staff's interaction with an alleged victim of sexual violence or staff sexual conduct. Section 54040.7 addresses "Detection, Notification, and Reporting" and contains language which mirrors 115.81(d).

Staff reported various ways in which they are able to privately report incidents or suspicions of sexual abuse and sexual harassment to ensure incidents are investigated and services are provided to the inmate. Staff did not use the term "need to know" however staff talked about reporting incidents to supervisors. They did not indicate they would log the incident in a log book or tell other staff of the incident. Systems are in place to ensure only those staff who have a need to know to render care have the information. For instance, mental health referrals in response to reported incident at Corcoran or other facility are conducted by email to mental health supervisory staff. The clinician assigned to the yard is assigned to provide the care. Risk Screening information is housed in SOMS and only staff who have a need for the specific information are granted those rights in the system.

Subsection (e):

The CDCR 7552 Prison Rape Elimination Act Authorization for Release of Information was submitted for review. The release of information is utilized by California Correctional Health Care services staff when inmate patients report an incident of sexual violence or misconduct that occurred outside of a correctional setting for the purpose of reporting the incident to law enforcement, prosecutor's office or another appropriate agency. The CDCR MH-7448 Informed Consent for Mental Health Care was submitted for review. The form includes a section which states that information shared in treatment is confidential and will be discussed only with the treatment team except under the noted situations, which includes if the inmate engages in acts of

	<p>sexual misconduct or has been sexually assaulted by other inmates or staff.</p> <p>According to the mental health providers they share with inmates their responsibilities as mandated reporters.</p> <p>Corrective Action: None</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <p>CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1</p> 3. Documents <p>California Correctional Health Care Service Memorandum dated February 22, 2019; Subject: Discontinuation of Copayments For Health Care Services and Payment for Dental Prosthetic Appliances</p> 4. Interviews <p>Medical and Mental Health Staff</p> <p>Inmates</p> 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a) & (b):</p> <p>DOM Chapter 5, Article 44, Section 54040.8.3 addresses medical responsibilities at Corcoran.</p> <p>The CDCR California Correctional Health Care Services (CCHCS) Health Care Department Operations Manual 4.1.6 covers Prison Rape Elimination Act Policy and</p>

Procedure. The purpose of this section is to ensure medically necessary emergency and follow-up treatment is provided to patients who are alleged victims or alleged abusers of inmate or staff sexual abuse or sexual harassment. When it is reported that an individual is the alleged victim of sexual abuse, medical staff immediately respond to assess and identify injuries and determine if they are urgent or emergent, and provide immediate emergency care.

According to interviews and documentation, when an inmate reports an incident of sexual abuse, the inmate victim is seen by medical staff at Corcoran. Each facility is equipped with a clinic during second and third watch, Monday through Friday. Outside of these hours, inmates are seen by an RN in the central health facility TTA which is staffed 24/7. Medical staff will complete a basic medical assessment and address emergent needs. The inmate patient is then transported to Central Valley Forensic Nursing Specialists Inc. for sexual assault examination. It is practice that when an inmate reports sexual assault, custody staff consult with sexual assault nurse examiner at Central Valley Forensic Nursing Specialists Inc. to determine if the victim and suspect should be seen for an evidentiary examination. Upon return from the sexual assault examination at the community health facility, inmates are seen in TTA before returning to a housing unit.

DOM Chapter 5, Article 44, Section 54040.9 addresses mental health responsibilities at Corcoran. Upon return from the sexual assault examination at the community health facility, inmates are seen by mental health services within four hours. Mental Health services are further outlined in the Mental Health Services Delivery System (MHSDS) Program Guide.

Subsection (c):

DOM Chapter 5, Article 44, Sections 54040.8.3 and 54040.9 address medical follow-up testing for sexually transmitted diseases, including Hepatitis B and/or C, HIV testing, and pregnancy if appropriate. California Penal Code Section 2638 requires inmate victims received immediate HIV/AIDS and sexually transmitted infections prophylactic measures. Additionally, information is provided regarding sexually transmitted infections, HIV and pregnancy options. CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 addresses medical's responsibilities following the inmates return from a sexual assault examination. It notes that in addition to physical injuries, if not completed at the medical facility, test and treat sexually transmitted diseases, provide pregnancy services, and refer the inmate to mental health.

Medical staff indicated testing and treatment are completed at the community hospital. Corcoran medical staff follow up with the inmate to ensure the inmate understands the information and provides them an opportunity to ask questions.

Inmates who reported sexual abuse indicated the incidents did not require outside medical care, treatment, or testing for sexually transmitted infections.

Subsection (d):

	<p>On February 22, 2019, a memorandum was issued by the Receiver and Secretary of the California Correctional Health Care Services discontinuing copayments for health care services and dental prosthetic appliances. CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 clearly states that there are no costs to the alleged victim for medically necessary emergency and follow-up treatment, regardless of whether or not the alleged victim names the alleged abuser or cooperates with the investigation.</p> <p>Corrective Action: None</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <p>CDCR California Correctional Health Care Services Health care Department Operations Manual Chapter 4, Article 1</p> <ol style="list-style-type: none"> 3. Documents 4. Interviews <p>Mental Health Staff</p> <ol style="list-style-type: none"> 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a) & (b):</p> <p>Inmates who have experienced sexual abuse in a confined setting or in the community are referred for medical and mental health evaluation and treatment. The CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 speaks to reports of sexual victimization or perpetration and requires the patient be offered a follow-up meeting with mental</p>

health and medical staff. It further requires mental health to determine level of care. Staff will arrange for follow-up services and continuity of care referrals when patients are transferred or released from custody.

DOM Chapter 5, Article 44, Section 54040.8.3 and 54040.10 outlines medical services responsibilities. Not only is medical responsible for emergent needs, medical also provides follow-up care upon return from receiving outside medical care. Section 54040.7 and 54040.10 addresses mental health responsibilities. Upon return from the sexual assault forensic examination, the victim is referred for an emergency mental health evaluation and seen by mental health staff within four hours of returning to the facility. The victim is given educational materials, monitored for self-harm or suicide, and arrangements are made for on-going care.

Medical and mental health staff talked about the services provided to inmate victims and perpetrators of sexual abuse. Processes are in place when an inmate transfers to another facility to ensure continuity of care. When inmates are nearing release, resource nurses meet with the inmate prior to release to assist with discharge planning. They work with Parole or counties to make sure they are aware of the inmate's needs, with the goal of appointments scheduled prior to the inmate's release. Inmates are involved in the care plan and encouraged to make health care decisions.

Subsection (c):

The Health Care Department Operations specifically requires mental health treatment services for victims of sexual abuse be consistent with the community level of care, including but not limited to:

- 1) Identification of sexual abuse related mental health issues and treatment.
- 2) Consideration related to need for monitoring.
- 3) Arrangements for mental health follow-up services when necessary.
- 4) Continuity of care referrals as patients are transferred or released from custody.

Staff interviews indicate services are consistent with or better than the community level of care. Staff discussed medical care on site and noted that some specialty care requires inmates to receive care offsite with community providers. Forensic medical examinations and emergency medical care are provided at hospitals serving the community at large.

Subsection (d) &(e):

Corcoran is an all male facility and does not typically house transgender inmates. CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 includes pregnancy tests for patients who are alleged victims of sexually abusive penetration. If a pregnancy resulted from sexual abuse, victims receive comprehensive information, without unreasonable delay and timely access to all lawful pregnancy related services.

DOM Section 54040.8.3 also addresses pregnancy, stating that pregnancy options will be discussed with the victim. DOM Chapter 5, Article 45, Section 54045.2 addresses the Care, Treatment, and Security of Pregnant Offenders for the purpose of ensuring the safety of female offenders and the unborn child during pregnancy.

Subsection (f):

DOM Chapter 5, Article 44, Section 54040.8.3 indicates that medical staff will conduct follow-up testing for sexually transmitted diseases, Hepatitis B and/or C, HIV testing, and pregnancy if appropriate. California Penal Code Section 2638 requires inmate victims received immediate HIV/AIDS and sexually transmitted infections prophylactic measures. Additionally, information is provided regarding sexually transmitted infections, HIV and pregnancy options.

CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 addresses medical's responsibilities following the inmates return from a sexual assault examination. It notes that in addition to physical injuries, if not completed at the medical facility, test and treat sexually transmitted diseases.

Upon return from outside medical care, medical staff meet with the inmate. If additional medical care is required or the inmate has further questions, medical staff will tend to their needs.

Subsection (g):

As noted in 115.82 (d), inmates receive medical and mental health care at Corcoran at no cost. On February 22, 2019, a memorandum was issued by the Receiver and Secretary of the California Correctional Health Care Services discontinuing copayments for health care services and dental prosthetic appliances. CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 addresses care under the Prison Rape Elimination Act and clearly states that there are no costs to the alleged victim for medically necessary emergency and follow-up treatment, regardless of whether or not the alleged victim names the alleged abuser or cooperates with the investigation.

Subsection (h):

According to the CDCR California Correctional Health Care Services Health Care Department Operations manual, the abuser receives a referral to mental health and is seen within 60 calendar days. Abusers are evaluated for suicide and self-harm risk and appropriate follow-up care is determined. This section of policy does not qualify eligibility based on the location of the victimization.

DOM Section 54040.7 addresses substantiated perpetrators by requiring mental health to conduct an evaluation within 60 calendar days of the facility learning of abuse history. Mental Health providers confirm the assessment is completed immediately.

	Corrective Action: None
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 3. Documents Institutional PREA Review Committee (IPRC) DOM Section 54040.17; blank form Subsequent Institutional PREA Review Committee (IPRC) DOM Section 54040.17; blank form PREA Allegation Log Investigation files Subsequent Institution PREA Review Committee (IPRC) 4. Interviews Warden PREA Compliance Manager 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44, Section 54040.17 addresses the Institution PREA Review Committee (IPRC) and was revised on September 9, 2022. Each Hiring Authority is required to conduct an incident review of every sexual violence and staff sexual misconduct allegation which are substantiated and unsubstantiated.</p> <p>The PAQ indicated 38 incidents of sexual abuse allegations were investigated in the past twelve months. According to the PREA Investigation Log, in the past calendar year, 26 staff sexual misconduct allegations were received, with one unsubstantiated,</p>

one unfounded and eight allegations screened out as not meeting the definition of sexual abuse. In the same time frame, nine allegations of inmate on inmate sexual abuse were received with six being closed and one determined not to meet the definition of sexual abuse. three of the investigations were unsubstantiated, one substantiated, and 2 unfounded.

Subsection (b):

DOM Chapter 5, Article 44, Section 54040.17 requires PREA incidents to be reviewed by the Institution PREA Review Committee (IPRC) within 30 days of the conclusion of the investigation or within 60 days of the date of discovery, whichever is sooner. DOM furthers that a subsequent IPRC must be completed whenever the initial IPRC is conducted prior to the completion of investigation or when if the initial IPRC was unable to provide a thorough review. Policy exceeds the standards. The PCM confirmed Corcoran follows the time frames for the IPRC.

According to the PAQ, in the past 12 months, 29 incidents were reviewed within 30 days of the conclusion of the investigation. Corcoran tracks the IPRC on the PREA Allegation Log. According to the standards of 115.86, five investigations required an IPRC in calendar year 2023. Four of the five IPRCs were completed well within the 30 days of the investigation being closed. One unsubstantiated allegation was reviewed 30 days after the incident was reported, with a follow up IPRC completed outside of the 30 days from the conclusion of the investigation. Many of the investigations that were not closed within thirty days of the incident being reported were reviewed according to CDCR standards, including allegations that were ultimately determined not to meet the definition of sexual abuse. It should be noted, Corcoran consistently follows CDCR policy, in that investigations of staff sexual misconduct and inmate sexual abuse are reviewed within 60 days of the allegation being reported and an investigation opened.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.17 outlines the composition of the IPRC to include: Hiring Authority or designee as the chairperson; PREA Compliance Manager; one other manager; In-Service Training Manager; Health Care Clinician; Mental Health Clinician; Incident Commander or Investigative Services Unit Supervisor. IPRC documentation housed in the investigation file demonstrated the above staff were present for the IPRC reviews. The Warden confirmed the institution PREA Review Committee meets to review incidents of sexual abuse. The committee includes the Warden, Chief, PCM, medical staff, mental health staff, In Service Training Manager, and the Use of Force Coordinator. The PCM also confirmed his participation in the IPRC.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.17 mirrors the language in 115.86(d) for considerations. To ensure comprehensive review, IPRC documentation is done using the Institutional PREA Review Committee (IPRC) - DOM Section 54040.17 and the Subsequent Institutional PREA Review Committee (IPRC) - DOM Section 54040.17

	<p>forms. Both forms include considerations from 115.86(d) and DOM.</p> <p>Consistent to DOM and the standards, the Warden and PREA Compliance Manager confirmed what factors the team considers during the review. Specifically both noting consideration of changes to policy and procedure and taking a close look at physical layout and blind spots of the facility which may have contributed to an incident of sexual abuse. Further, completed IPRC forms confirmed factors reviewed during the IPRC.</p> <p>DOM Chapter 5, Article 44, Section 54040.17 indicated the IPRC shall determine a plan to correct findings of inadequacy and implement the Action Plan or reasons for not doing so. The IPRC forms allow for corrective action, such as "was a work order submitted", "what action is being taken", "Was a Corrective Action Plan generated as a result of this incident". The completed IPRC forms did not note any corrective action needed or implemented.</p> <p>Reviewed investigation files contained IPRC documentation and confirmed Corcoran's compliance with this standard.</p> <p>Corrective Action: None</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 3. Documents Survey of Sexual Victimization 2021; blank form CDCR PREA Annual Report - Calendar Year 2019, 2020, 2021, 2022 Investigation Files PREA Allegation Log 4. Interviews PREA Headquarter Staff

5. Tour of the Facility

Findings:

Subsection (a) &(c):

DOM Chapter 5, Article 44, Section 54040.20 Tracking - Data Collection and Monitoring addresses the collection of sexual violence and staff sexual misconduct data. By the fifth day of every month, the PCM or Parole Employee Relations Officer completes the monthly update of the Yearly Tracking Report to the PREA Coordinator. Additionally, policy, and confirmed by file review, the ISU Lieutenant or Locally Designated Investigator completes the Survey of Sexual Violence - Incident Adult (SSV-IA) for every allegation within 2 business days of the allegation being received. The PREA Allegation Log includes the date the form was completed. An SSV-IA was completed for every allegation either the same day the allegation was received or within two days.

Subsection (b):

DOM Chapter 5, Article 44, Section 54040.20 also requires CDCR to aggregate incident-based data at least annually. This data is compiled in the CDCR PREA Annual Report. The CDCR Annual Report for 2022 was submitted for review. During previous audits, this auditor reviewed CDCR Annual Reports from 2019, 2020, and 2021, indicating consistent compliance with this subsection.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.20 requires CDCR to review and collect data as needed from all available documents such as incident reports, investigation files, and PREA Incident Reviews. The information is collected at CDCR headquarters using the CDCR PREA Incident Log. This is an excel spreadsheet of data collected from various sources including the investigations, SSV-IA, and the Yearly Tracking Report. This process was confirmed with PREA Headquarter staff.

Subsection (e):

DOM Chapter 5, Article 44, Section 54040.20 also requires CDCR to obtain incident based and aggregated data from every private facility with which it contracts for the confinement of inmates. The Pre-Audit Questionnaire indicates that this is completed. This process was confirmed with PREA Headquarter staff.

Subsection (f):

The agency reported in the Pre-Audit Questionnaire that they provided the Department of Justice (DOJ) with data from the previous calendar year. This is consistent with DOM Chapter 5, Article 44, Section 54040.20 which states the agency shall provide all such data from the previous calendar year to the Federal Department of Justice no later than June 30.

	Corrective Action: None
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 3. Documents CDCR Public Website CDCR PREA Annual Reports - Calendar Year 2019, 2020, 2021 and 2022 4. Interviews Agency Head PREA Coordinator 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44, Section 54040.17 Department PREA Coordinator mirrors standard 115.88 in that the agency shall review data collected according to 115.87 to assess and improve the effectiveness of its sexual violence prevention, detection, and response policies, practice, and training. Data is gleaned from a number of sources such as incident reports, investigations, and IPRC. Interviews with the agency head and PREA Coordinator confirm compliance with the policy and subsection (a) of this standard.</p> <p>Subsection (b):</p> <p>DOM Chapter 5, Article 44, Section 54040.20 requires the annual report to include a comparison of the current year's data and corrective actions with those from previous</p>

	<p>years. In a review of the PREA Annual Reports 2019, 2020, 2021 and 2022, as posted on the CDCR website, reports contain the agency's progress in addressing sexual abuse with comparative data and corrective action.</p> <p>Subsection (c):</p> <p>DOM Chapter 5, Article 44, Section 54040.20 requires the annual report to be approved by the CDCR Secretary and made available on the public website. The agency head confirmed the annual report is routed to CDCR Secretary. PREA Annual Reports 2015 through 2022 are posted on the CDCR public website. All of the reports contain the signature of the CDCR Secretary.</p> <p>Subsection (d):</p> <p>DOM Chapter 5, Article 44, Section 54040.20 allows for “specific material” to be redacted from reports if when published the information would present a threat to the safety and security of the facility. If information is redacted, the report must indicate the nature of the material redacted. According to the PREA Coordinator, any personal identifying information of staff or inmates would be redacted. The reviewed PREA Annual Reports did not contain redactions or personal identifying information</p> <p>Corrective Action: None</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <p>CDCR Department Operations Manual Chapter 5, Article 44</p> <ol style="list-style-type: none"> 3. Documents <p>CDCR Public Website</p> <p>CDCR PREA Annual Reports - Calendar Year 2019, 2020, 2021, and 2022</p> <p>Survey of Sexual Victimization 2021; blank forms</p> <ol style="list-style-type: none"> 4. Interviews <p>PREA Coordinator</p>

	<p>5. Tour of the Facility</p> <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44, Section 54040.21 requires CDCR to ensure collected PREA data is securely stored. According to the PREA Coordinator information specific to 115.87 is restricted and is securely retained at headquarters. Submitted information, such as the SSVI, do not contain personal identifying information.</p> <p>Subsection (b):</p> <p>DOM Chapter 5, Article 44, Section 54040.21 contains language mirroring standard 115.89 (b) and identifying the CDCR website as the format in which reports are made available. A review of the CDCR website confirmed this information is readily available.</p> <p>Subsection (c):</p> <p>DOM Chapter 5, Article 44, Section 54040.21 also ensures all personal identifiers are removed. The PREA Coordinator confirmed that reports do not contain personal identifying information. A review of the PREA Annual Reports located on the public website confirmed the reports contain no personal identifying information.</p> <p>Subsection (d):</p> <p>DOM Chapter 5, Article 44, Section 54040.17 requires all PREA records related to the annual report such as incident reports, investigation documents, offender information, counseling evaluations be retained according to CDCR records retention schedule. Section 54040.21 requires PREA data to be maintained for 10 years after the data is collected. PREA Annual Reports are available on the CDCR public website beginning with the 2015 report. Investigation files are maintained according to time frames noted in the standard.</p> <p>Corrective Action: None</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed:

1. Pre-Audit Questionnaire
2. Policy and Procedures
3. Documents

CDCR Public Website

4. Interviews
5. Tour of the Facility

Findings:

Subsection (a):

In a review of the CDCR public website, it is confirmed that CDCR ensures each facility it operates is audited at least once during a three-year audit cycle.

Subsection (b):

This audit falls in Audit Cycle 4, Year 2. According to the CDCR public website, Corcoran was previously audited in 2021 and 2018.

Subsection (h):

During the onsite phase, the audit team had access to all areas of the institution. A comprehensive tour was completed of all areas inside and outside of the fence. Due to the size and layout of Corcoran, the audit team split into two teams during the tour, with CDCR staff from headquarters and Corcoran accompanying auditors. CDCR and Corcoran Staff were accommodating of all requests during the tour and answered questions to assist in better understanding the layout and practices of Corcoran and CDCR.

Subsection (i):

Additional documentation was requested while on site and during the post audit. The requested documentation was received without delay. Further documentation to strengthen compliance or non-compliance determination is addressed under each individual standard.

Subsection (m):

Corcoran is comprised of 6 yards, of which 5 yards are currently open. Auditors met with staff and inmates for formal interviews on their assigned yards, in private office space.

Subsection (n):

December 22, 2023 audit notices were emailed to the PREA Compliance Manager

	<p>for posting six weeks prior to the start of the on-site audit, December 25, 2023. On December 26, 2023, the PREA Sergeant emailed 10 photos of the audit notice posted on various housing units and common areas of the institution. During the tour, audit notices were posted on each housing unit, inmate common areas, and staff only areas. Inmates were allowed to send confidential correspondence to the auditor. One letter was received during the post-audit phase. The envelope was marked "legal mail confidential".</p> <p>Corrective Action: None</p>
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115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures 3. Documents <p>CDCR Public Website</p> <ol style="list-style-type: none"> 4. Interviews 5. Tour of the Facility <p>Findings:</p> <p>Subsection (f):</p> <p>In review of the CDCR Public Website, PREA Audit reports are available for audits completed in 2016 through 2023. The institution's most recent audit is available on the public website under the heading "Final PREA Audit Reports". Previous years audits are moved to the "View Archived CDCR Final PREA Reports" and remain accessible on the public website.</p> <p>Corrective Action: None</p>

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

	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.)	
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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	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
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	no
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

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

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

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

	screening instrument?	
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)	no

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
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	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

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

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

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

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

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on 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	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	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	yes

	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).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	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?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	no
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	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from 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).	na
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	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	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?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
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	Audit contents and findings	

(f)		
	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