

PREA Facility Audit Report: Final

Name of Facility: Richard J. Donovan Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: 07/23/2023

Date Final Report Submitted: 12/31/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☐
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☐
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.	☐
Auditor Full Name as Signed: Julie Ustruck Wetzel	Date of Signature: 12/31/ 2023

AUDITOR INFORMATION	
Auditor name:	Ustruck Wetzel, Julie
Email:	Julie.UstruckWetzel@wisconsin.gov
Start Date of On-Site Audit:	05/22/2023
End Date of On-Site Audit:	05/25/2023

FACILITY INFORMATION	
Facility name:	Richard J. Donovan Correctional Facility
Facility physical address:	480 Alta Road, San Diego, California - 92179
Facility mailing address:	San Diego,

Primary Contact

Name:	A. Jorrin
Email Address:	arturo.jorrin@cdcr.ca.gov
Telephone Number:	6192885593

Warden/Jail Administrator/Sheriff/Director

Name:	James Hill
Email Address:	James.Hill@cdcr.ca.gov
Telephone Number:	619-661-7800

Facility PREA Compliance Manager**Facility Characteristics**

Designed facility capacity:	2992
Current population of facility:	2993
Average daily population for the past 12 months:	3155
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:	18+
Facility security levels/inmate custody levels:	I, II, III, IV
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	2097
Number of individual contractors who have	27

contact with inmates, currently authorized to enter the facility:	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	298

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

Agency Chief Executive Officer Information:	
Name:	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
The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met. Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and

include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-05-22
2. End date of the onsite portion of the audit:	2023-05-25

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Staff from the Center for Community Solutions, advocacy agency, was interviewed for the audit. Palomar Health provides sexual assault examinations for victims at RJDCF. On June 12, 2023 an email was submitted to the general email box as noted on their website. A response was received with the contact information for a specific person. Subsequent phone call and emails were made on June 13 and July 1. No further response was received.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2992
15. Average daily population for the past 12 months:	3155
16. Number of inmate/resident/detainee housing units:	25

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	2931
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:	1050
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:	72
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0

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:	56
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:	46
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:	142
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:	36
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	Physical disability, sight and hearing impairment were provided on one tracking sheet; therefore the number 1050 includes physical disabilities, sight and hearing impairment. Zeros indicate specific data not available.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	2000
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:	298
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:	27
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS**Inmate/Resident/Detainee Interviews****Random Inmate/Resident/Detainee Interviews**

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	60
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54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☒ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☒ Housing assignment ☐ Gender ☐ Other ☐ None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	All inmates interviewed were asked questions from the Random Interview Guide. In order to obtain a sampling of the population, 6 individuals from each housing unit were selected. Consideration was given to the cell location (upper or lower tier) and race, as that is the information available on the inmate roster. As interviews were being conducted, random inmates were also ask if they would like to be interviewed for the audit.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	After the first day of inmate interviews, it was discovered that inmates were either refusing to come to the interview, or arriving to the locating and refusing the interview with CDCR staff. Once this was discovered, any inmate that arrived to the interview location were required to refuse the interview directly with the auditors. Although more inmates had been selected than the minimum required, auditors offered interviews to random individuals in the area of the interviews. For instance, as inmates were in the recreation yard or asked auditors why they were at the facility, auditors offered the inmate an opportunity to be interviewed.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	37
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1

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

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:	7
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:	4
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	2
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	Two inmates in segregation were interviewed. They had been noted as victims of sexual abuse or sexual harassment investigations, however, when interviewed it was determined they were not in segregation for that reason.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	20

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☐ Rank (or equivalent) ☒ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
If "Other," describe:	When considering random staff selection, the following criteria was considered: assigned shift, assigned yard, assigned post within a yard, and gender.
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	22
76. Were you able to interview the Agency Head?	☒ Yes ☐ No

77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No
78. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
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

	☒ Other
If "Other," provide additional specialized staff roles interviewed:	Additionally, the following specialized staff were interviewed: Grievances, Training Director, Maintenance, Food Service, and Volunteer Coordinator.
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ 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)	☒ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☐ Religious ☒ Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	1

b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☒ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	Agency staff interviews, such as the contract administrator and PREA Coordinator were conducted by other auditors within in the consortium and referenced for his audit.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?	☒ Yes ☐ No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	☒ Yes ☐ No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	☒ Yes ☐ No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	☒ Yes ☐ No
88. Informal conversations with staff during the site review (encouraged, not required)?	☒ Yes ☐ No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	While on site, auditors were able to test access to reporting and advocacy agencies using inmate phones. During inmate interviews, the language line was utilized as well as staff interpreters. Although a risk screen was not observed, staff walked auditors through the process and were able to completely answer auditor questions.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☒ Yes ☐ No

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

Documentation provided by the facility during the pre audit was limited. While on site and post audit, auditors requested completed risk screens, PREA education verification, investigation tracking, investigation documents, IPRC, closeout notices to inmates, grievances, inmate violation reports, HR documents, and volunteer/contractor background check verification and PREA education acknowledgements. Some of the documents were inmate or staff specific, while others were a request to send a random number of specific documents.

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	67	X	67	X
Staff-on-inmate sexual abuse	98	X	98	X
Total	165	X	165	X

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.

RJDCF and CDCR investigators are sworn law enforcement officers. When investigations indicate criminal misconduct, investigators work with local District Attorney's to partner in the investigation and eventual criminal charges.

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	43	0	43	0
Staff-on-inmate sexual harassment	72	0	72	0
Total	115	0	115	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	38	10	18	1
Staff-on-inmate sexual abuse	97	1	0	0
Total	135	11	18	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	32	1	10	0
Staff-on-inmate sexual harassment	71	1	0	0
Total	103	2	10	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:

24

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	17
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	7
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	6
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	5
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ 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?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	☐ Yes ☒ No ☐ 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?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	While on site, auditors reviewed 15 investigations. During the post audit period and corrective action period, additional file material was sent to auditors for review; including entire investigation files as well as specific documents contained in the files.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	☒ Yes ☐ No
a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:	4

Non-certified Support Staff

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

☒ Yes

☐ No

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

1

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☐ The audited facility or its parent agency

☒ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☐ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Identify your state/territory or county government employer by name:

Western States and Counties Consortium

Was this audit conducted as part of a consortium or circular auditing arrangement?

☒ Yes

☐ No

Standards	
Auditor Overall Determination Definitions	
- Exceeds Standard (Substantially exceeds requirement of standard) - Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) - Does Not Meet Standard (requires corrective actions)	
Auditor Discussion Instructions	
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: - Pre-Audit Questionnaire - Policy and Procedures Department of Corrections and Rehabilitation (CDCR) Department Operations Manual Chapter 5, Article 5 Chapter 44 Prison Rape Elimination Act California Code of Regulations Title 15, Section 3401.5 Staff Sexual Misconduct Operations Manual Supplement Richard J. Donovan Correctional Facility California Penal Code - 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 dated August 13, 2015

CDCR Division of Adult Institutions Female Offender Programs and Services/Special Housing Duty Statement

FOPS Organizational Chart

PREA Compliance Manager list

4. Interviews

PREA Coordinator

PREA Compliance Manager

5. Tour of the Facility

Findings:

Subsection (a):

California Department of Corrections and Rehabilitation (CDCR) facility Richard J. Donovan Correctional Facility, hereinafter referred to as RJDCF, 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 Department Operations Manual (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 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 sexual organs, including their breasts, for sexual gratification, and rubbing or touching him or herself in the presence of another person for sexual gratification.

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. In addition to the agency level documentation, RJDCF submitted Chapter 5, Article 44 Prison Rape Elimination Policy Operations Manual Supplement which provides a facility level response to allegations of sexual assault. Subsection (b): 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, as PREA compliance is the sole responsibility for the Coordinator. In addition to the PREA Coordinator, PREA Compliance Unit employs two lieutenants, Staff Services Manager, and retired annuitants. Subsection (c): CDCR has identified 34 PREA Compliance Managers (PCM) and additional backup PREA Compliance Managers supporting PREA initiatives within each institution and the Contract Beds Unit. The PCM position at RJDCF is held by a Facility Captain, who reports directly to the Chief Deputy Warden. Corrective Action: None
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 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; 200 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 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

Community Confinement Facilities Contract Monitoring Schedule

Contract Compliance Review Report Prison Rape Elimination Act; blank form

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

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

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 - Sacramento dated March 11, 2022

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

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

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

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 - Tri-County Treatment dated January 10, 2023

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

4. Interviews

Contract Administrator

PCM for Contracted Facilities

Findings:

Subsection (a):

CDCR holds twelve contracts for the placement and care of inmates. 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 is in its early stages. A monitoring tool was developed and finalized in 2022. PREA compliance monitoring was documented for 10 of the 12

	contracted facilities in 2022. Additionally, two of the facilities completed a formal PREA audit. According to the PCM for the contracted facilities, contract monitoring by CDCR will continue through Cycle 4, Year 1. A schedule of site visits for PREA compliance monitoring was submitted and indicated that eleven facilities would complete the monitoring by the end of this audit year. According to the contract Administrator, the intent is to have DOJ audits completed in Year 2 of Cycle 4. This process is still being procured and a schedule is not developed. Corrective Action: None
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115.13	Supervision and monitoring
	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. Document TeleStaff/BIS Code Listing Standardized Staffing - OPRS Richard J. Donovan FY 22-23 2023.01.30 Richard J. Donovan Staffing Plan Analysis Prison Rape Elimination Act (PREA) Annual Data Collection Tool and Staffing Plan Review dated January 31, 2023 Daily Activity Report; Dated March 29, 2023; 56 pages 4. Interviews Warden PREA Compliance Manager PREA Coordinator 5. Tour of the Facility

Findings:

Subsection (a):

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 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 Pre-Audit Questionnaire (PAQ), since the last audit, the average daily population is 3345 and the institutional staff plan is designed for the average daily population of 4039. RJDCF does have a current staffing plan which was recently updated, reflecting that on April 28, 2023 the average daily population was 2863.

The staffing plan includes the 11 factors noted in the 28 C.F.R. Part 115 Section 115.13 and the CDCR DOM. Both the Warden and PCM discussed the staffing plan and considerations in its development. Additionally, they addressed actions taken when staffing levels are low, such as the modification of programming and non-uniform staff assisting with additional rounds.

Subsection (b):

If a post cannot be filled, the watch Commander is notified and the staffing shortfall is noted in the Daily Activity Report. The Warden is aware when posts are not filled or if shortages during a shift arise, such as an emergency medical trip. In addition to the change in staffing level, steps taken to address the shortage is also noted in the Daily Activity Report. A Daily Activity Report for March 29, 2023 consisting of 56 pages was submitted. The report is a comprehensive account of the day's activities and includes a section for staff redirects and shortages and a section to account for modified programs.

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 31, 2023 was submitted and reviewed. The staffing plan review indicated all areas of the staffing plan were considered. The current RJDCF staffing plan was updated and includes current average daily population and 2022 data for incidents of sexual abuse. Additionally, the names of both the Warden and PREA Coordinator are affixed to the end of the plan.

The PREA Coordinator confirmed his involvement with the staffing plan review. If there are staffing issues, the facility and PREA Coordinator will discuss the need and

	strategies to mitigate staffing issues such as increasing rounds, the deployment of monitoring technology or closing areas of the facility. 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 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. During the tour of RJDCF, log books on each housing unit were reviewed. They consistently showed security supervisors signature in red at various times and watches. Further, supervisory interviews and housing unit staff confirmed unannounced supervisory rounds are completed and documented in the log book with red pen. Corrective Action: None
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115.14 Youthful inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures 3. Documents 4. Interviews Warden Random Staff 5. Tour of the Facility Findings: Subsection (a)-(c):

	RJD does not house any inmate under the age of 18 years old, as noted in the PAQ and confirmed by the Warden and random staff. Corrective Action: None
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115.15	Limits to cross-gender viewing and searches
	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 5, Article 19 - Arrest, Search, and Seizure 3. Documents Memorandum dated February 8, 2019 subject: Changes in the use of the ADANI CONPASS low dose scanner Memorandum dated November 6, 2020 subject: Overview of Senate Bill 132 - Training Memorandum dated September 24, 2019 subject: Policies and procedures related to working with transgender and gender non-conforming inmates. CDCR In-Service Training (IST) version 2.0 Working Successfully with Transgender, Intersex, and Non-Binary Inmates Lesson Plan CDCR Overview of Senate Bill 132; 44 slides Negative training list for Working Successfully with Transgender, Intersex, and Non-Binary Inmates 2022 4. Interviews 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 RJDCF.

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):

RJDCF 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 PREA Compliance Manager, in the past year, there has not been a cross gender strip or body cavity search.

Subsection (d):

According to 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.

RJDCF showers are constructed with half doors or doors with bars providing some privacy while ensuring inmate safety. Additionally, housing units provided portable screens as an option for showering inmates. E Yard is unique to RJDCF in that each cell is a six person room, rather than two person, and contains a toilet and urinal.

During the tour, homemade privacy curtains were used, separating the toilet from the remainder of the cell. The urinal was shielded by a short half wall. Inmates and staff consistently reported that inmates are able to shower and perform bodily functions without being observed by female staff, unless incidental during routine rounds and checks.

The gymnasiums contained open bay showers and toilet areas. Those showering, had the option to use a portable screen to provide privacy from others in the gym. However, camera views in three of the five gymnasiums were directed into the toilet area. This was immediately addressed with RJDCF staff and the PREA team. Strategies were developed to address this, including moving the camera, placing a barrier in front of the toilet area and updating technology to blur human images.

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.

Outside of each housing unit's main entrance was an opposite gender notice. During the tour, uniform staff could be heard over the Public Announcement (PA) system, alerting the population to female staff being present on the unit. Approximately 75% of inmates interviewed reported that an announcement is made when female staff enter the unit for the first time that shift. This is typically done by the tower over the PA system and the language used varies. Some inmates interviewed said they couldn't hear the PA system because it was too quiet or due to their hearing deficits. It is recommended a visual system be put in place, particularly on housing units with a larger population of hearing-impaired inmates. Most uniform staff also acknowledged an announcement is made when female staff enter the housing unit for the first time.

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 would not 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):

CDCR 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 81%

	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 affirmed having completed training to conduct searches. Training records indicate 41 custody staff not out on leave have not completed the training. it is unclear from the training documents when training was due, however all staff were assigned this training in 2022. Recommendation: 115.15(d) To ensure inmates who have a hearing impairment receive notice that male 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. Recommendation: 115.15(f): Ensure all staff complete required training within the time allotted. Given the number of staff allegations and the number of transgender, intersex and non-binary inmates it would behoove RJD to ensure all custody staff have received training prior to working with the inmate population, particularly, before conducting searches. Corrective Action: None
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115.16	Inmates with disabilities and inmates who are limited English 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 DPP Code Definitions Standard Agreement between CDCR and Interpreters Unlimited effective July 1, 2021 through June 30, 2024

Course Enrollment; Changes to the Identified LEP Coordinator Memo

CDCR 128-B General Chrono

4. Interviews

Agency Head

Inmates

5. Tour of the Facility

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 such as 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 all written materials are in English and Spanish. CDCR also has the ability for interpretation services through a contracted agency. She also indicated that staff use "effective communication" 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. During the initial and annual classification reviews, effective communication was addressed with each inmate. If there was not a need for effective communication, a note as to why was included, such as 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", "noted hearing aids", or "continuous prompts to inmate to repeat, in his own words, his understanding of the issues presented". The comments appeared individualized and responsive to the inmate's needs.

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 RJDCF, auditors reviewed the Orientation Handbook in both English and Spanish. Additionally, postings throughout the institution were available in both languages.

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 an 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 multiple languages and sign language. The process to obtain services was easily navigated and accommodated the needs of the interview. Additionally, RJDCF staff were available to interpret and assisted with interpretation needs.

Fifteen inmates were interviewed who were identified with a cognitive or physical disability or limited English language. 50% of inmates indicated they did not receive information about sexual abuse and sexual harassment in a manner they could understand. Of those who said they received information, they did so either by postings on the housing unit or through the institution channel. Those who indicated they did not receive information in a manner which could be understood, were primarily individuals in which neither English nor Spanish were their first language. Documentation was not available indicating an interpreter was used during intake for these or other individuals needing an interpreter. However, according to Classification Review chrono, interpreters were provided during the pre committee meetings and during committee review. Additionally, CDCR 128-B General Chrono, reflected effective communication and in one instance indicated a translator was utilized to provide PREA education.

Training records were also reviewed, indicating staff in all classifications are familiar with the LEP Coordinator memo.

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. Inmates who are limited in English were not as clear who they would go to for help, however, no one stated they would go to another inmate. Most staff stated they would not use another inmate to interpret.

	Recommendation: 115.16 (a): Provide written educational materials and handbooks in Braille. Corrective Action: None
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 3, Article 6 - Appointments CDCR Department Operations Manual Chapter 3, Article 7 - Personnel Identification Cards CDCR Department Operations Manual Chapter 5, Article 44 3. Documents Hiring Guide for Managers and Supervisors CDCR 1951 Supplemental Application For All CDCR Employees; blank form CDCR 1951 Supplemental Application For all CDCR Employees; 44 completed CDCR 2164 Live Scan Response; blank form CDCR 2164 Live Scan Response; 44 completed Personnel Information Bulletin dated September 16, 2016 Memorandum dated July 14, 2017; Subject: Completion of Background Checks Under the Prison Rape Elimination Policy CDCR Special Terms and Conditions Exhibit D Memorandum dated February 26, 2016; Subject: Personnel Identification Card Issuance Memorandum dated October 6, 2017; Subject: Hiring and promotion decisions STD 678 Examination / Employment Application

4. Interviews

Staff Services Manager

Contractors

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 RJDCF considers incidents of sexual harassment when making decisions to hire or promote.

Subsection (c):

A criminal records check is a requirement for employment with CDCR. In 2017, the process of background checks was updated to gain compliance with this PREA standard. This requirement is formalized in DOM Section 31060.16 updated in 2021.

Prior to hiring new 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.

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. In 2017, CDCR issued a memo to CDCR Background Investigators outlining PREA standard requirements and how CDCR resolved to follow the standard. One such change included amending form 2025 Employment Reference Questionnaire to include questions about substantiated incidents of sexual abuse and resignation during an investigation.

The Staff Services manager confirmed that criminal background checks are conducted on new staff and those being considered for promotion. CDCR utilizes the Live Scan System. According to the PAQ, 425 people who have contact with inmates were hired during the past year. During the onsite, auditors were provided the completed CDCR 1951 and 2164 for 44 new staff, including healthcare, non-custody, and custody 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 and the

contractors interviewed.

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 RJDCF had 27 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.

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 CDCR 1951 completed by applicants confirmed this information is obtained and considered. The Staff Services Manager confirmed these questions are asked on the employment forms. Additionally, employees have a duty to disclose such misconduct.

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): Background checks are completed in addition to contacting previous institutions in which the applicant was employed. According to human resources, when a former employee is attempting to reinstate or a current employee is being considered for transfer, the previous institutions are contacted for a reference check which includes information regarding substantiated allegations. The investigative Services Unit and Warden may provide information relevant to the individuals employment. Corrective Action: None
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115.18 Upgrades to facilities and technologies	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures 3. Documents 4. Interviews

Agency Head

Warden

5. Tour of the Facility

Findings:

Subsection (a):

According to the PAQ, RJDCF has not acquired new facility or made any substantial modifications. However, during the interview with the Warden, he talked about RJDCF expanding several housing units with pill lines. This would allow the inmate to receive medications on his housing unit, without leaving the building. He indicated inmates would never be allowed inside the space, they would come to the space to receive their medications. Warden also talked about camera placement to ensure there are no blind spots while still being mindful of inmate health privacy.

In an interview with the Agency Head, she indicated that when a CDCR facility is designing, acquiring, or planning substantial modifications, they consider the use of direct line of sight. Consider windows in office doors, how doors are hung not to create a blind spot. While reviewing the space, they also consider how to mitigate blind spots with cameras and mirrors while balancing inmate privacy.

Although documentation was not submitted to indicate that the RJDCF considered inmate sexual safety when designing the facility upgrades, safety and security measures were utilized in all of the projects.

Subsection (b):

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.

According to the PAQ, RJDCF has updated video monitoring systems since the last PREA audit. RJDCF has over 1000 cameras throughout the facility. All of the housing units and education have cameras. Additionally, every officer and sergeant who has direct contact with inmates has a body worn camera. Throughout the tour, cameras were observed in all areas of the institution. In addition to cameras, mirrors were used to decrease blind spots. Due to the intricacies of some areas, offices within offices, one area of concern is the back storage space of B Yard library. To first enter the storage area, one must enter through a locked door. The back of the room, is another locked room with windows utilized now for storage. Non-uniform staff do not have keys to that space. Another storage area was not locked, and used to store library supplies. Although inmates rarely go in this storage area, inmate clerks do assist with bringing supplies in and out of the storage room. Given the layout, it is recommended either a camera or mirror be strategically placed to view into the

	storage area. During the tour, it was noted the windows in Canteen A and D yard and Clothing in D yard were covered. This was rectified during the on site portion of the audit. Additionally, during the tour, paper covering staff office windows was removed from several offices and staff were addressed. One final area of concern was the height of shoe boxes stacked in the D shoe factory. Although well designed with cameras, the height of the stacked boxes may create a blind spot. It is recommended that when supervisory staff are making their rounds, they are looking for and addressing any covered windows. Windows into staff offices not only addresses inmate sexual safety, but are also installed to protect staff. Recommendation: 115:18 (b) RJDCF has cameras throughout the institution to address inmate and staff safety. It is recommended that a process be developed to monitor camera systems real time. Real time audio-visual monitoring does not take away from current procedures, as there is no better security monitoring practice than the presence of staff; however additional monitoring serves to strengthen current procedures. Recommendation: 115:18 (b) Given the layout of B Yard library, it is recommended either a camera or mirror be strategically placed to view into the back storage closet. Recommendation: 115:18 (b) When supervisory staff are making their rounds, monitor for covered windows of staff offices and the height of stacked boxes. Immediately address any areas creating blind spots or unsafe conditions. Corrective Action: None
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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 Department Operations Manual Chapter 5, Article 44 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; Version 1.0

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 Palomar Health Care; July 1, 2020 through June 30, 2023; 62 pages

Standard Agreement between CDCR and Center for Community Solutions; March 30, 2021 through June 30, 2024; 8 pages

Center For Community Solutions poster; English, Spanish, Hmong

Palomar Medical Center website

Center for Community Solutions website

4. Interviews

PCM

Investigator

Advocacy Agency

Random staff

5. Tour of the Facility

Findings:

Subsection (a):

RJDCF 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 secure the scene and 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):

RJD 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. Co-pays for treatment services related to sexual abuse or assault are not charged according to the memorandum from the California Health Care Services Receiver and Secretary on February 22, 2019. CDCR and Palomar Health Center entered into a Standard Agreement effective July 1, 2020 through June 30, 2023. This agreement formalizes the relationship in which Palomar Health Center will provide sexual assault forensic examinations to any inmate under the care of CDCR. Additionally, Exhibit B of the Standard Agreement outlines payment for services which does not include billing the inmate patient.

The PAQ indicates that zero forensic examinations occurred during the past year. However, according to investigative files reviewed, at least two alleged victims were taken to Palomar Health Center for a Sexual Assault Examination. Neither alleged victim was available for interview.

On June 9, 2023, this auditor reviewed the Palomar Medical Center website and emailed the general email to coordinate an interview. A response was received on June 12, 2023, providing a specific person and her contact information. On June 13 and July 1, emails were sent requesting an interview. The website confirms that patients do not receive a bill for services received through Forensic Health Services. They work closely with the Palomar Health Foundation to ensure availability of services.

Subsection (d):

Inmates at RJDCF receive victim advocacy services from the Center For Community Solutions. 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 March 30, 2021 and is valid through June 30, 2024.

According to DOM Section 54040.8.1 and the Watch Commander Notification Checklist, the Watch Commander contacts the rape crisis center to request a victim advocate be dispatched. 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, also requires institutions to provide victims mailing addresses and phone numbers for outside rape crisis organizations, victim advocacy groups and immigrant service agencies.

Posters at RJDCF in English, Spanish, and Hmong are displayed for inmates informing them how to contact the Center for Community Solutions either by the hotline number or confidential written correspondence. Additionally, the Rape Crisis phone

number is posted by the phone.

According to the PCM, Palomar Health Center coordinates the presence of a victim advocate during the sexual assault examination. The Director of Sexual Assault Services for The Center for Community Solutions confirmed their relationship with RJDCF and the services offered. She indicated that her staff accompany victims at the hospital and confirmed that it is the hospital process to coordinate the victim advocate.

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. A list of RJDCF staff identified as victim advocates was requested but a list was not received.

According to the Center For Community Solutions Director, advocates are on call 24 hours a day and available to respond to the hospital when needed. Palomar Health Center was contacted for an interview and did not respond to multiple attempts.

However, according the Director for the Center For Community Solutions, it is common practice that the sexual assault examination hospital calls the advocate

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 investigator 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).

Subsection (g):

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 CDCR staff.

Subsection (h):

RJDCF does not utilize staff to conduct sexual assault examinations but utilizes qualified providers from Palomar Health Center. Palomar Health Center was contacted

	for an interview and did not respond to multiple attempts. Corrective Action: None
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115.22	Policies to ensure referrals of allegations for investigations
	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 CDCR 128B DA Rejection 4. Interviews Agency Head 5. Tour of the Facility Findings: Subsection (a): 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 PAQ indicates there were 251 reports of sexual abuse or sexual harassment in the past year with zero being referred for administrative or criminal investigation. According to the investigation spreadsheet provided on site, from May 1, 2022 to May 1, 2023 there were 288 investigations of sexual abuse and sexual harassment at RJDCF. During this time, one investigation of inmate on inmate sexual abuse was substantiated. It should be noted that allegations are referred for investigation, however of the 280 investigations, 238 remain open. The one substantiated allegation was referred to the district attorney's office who declined to prosecute.

The head of CDCR stated that a Locally Designated Investigator (LDI) conducts the initial fact finding for every sexual assault or sexual harassment allegations. They are responsible for interviewing the complainant and witnesses and then reporting to the hiring authority. OIA is responsible for conducting a full investigation for allegations involving staff. Ultimately investigations are turned in to the hiring authority for a disposition.

Subsection (b):

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 was submitted and reviewed. The Annual Report breaks down types of allegations and further provides numbers of

	substantiated, unsubstantiated, unfounded, and ongoing investigations. While onsite, ISU provided tracking documentation of all investigations assigned to ISU and OIA. Subsections (c) & (d): These subsections do not apply, as CDCR has the authority to and conducts administrative and criminal investigations. Corrective Action: None
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115.31	Employee training
	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 CDCR In-Service Training Prison Rape Elimination Act (PREA) Version 2.1 and 3.0 BET Code 11054378; Instructor Text CDCR On-The-Job Training (OJT) Prison Rape Elimination Act (PREA) Version 2.0 BET 11053499; Participant Module CDCR In-Service Training Inmate/Staff Interaction BET Code 11053211; Instructor Text CDCR Division of Adult Institutions Institutional Custody Off-Post Training Scheduled January-December 2021; 3 pages Division of Adult Institutions Annual Required In-Service Training Schedule Institution Custody Staff; 2021, 2022, 2023 Division of Adult Institutions Annual Required On-the-Job Training Schedule Institution Custody Staff; 2021, 2022, 2023 Division of Adult Institutions Annual Required In-Service Training Schedule Institution Non-Custody Staff; 2022, 2023

Division of Adult Institutions Annual Required On-the-Job Training Schedule Institution Non-Custody Staff; 2022, 2023

Division of Adult Institutions Annual Required In-Service Training Schedule Institution Headquarters Custody Staff; 2022, 2023

Division of Adult Institutions Annual Required On-the-Job Training Schedule Institution Headquarters Custody Staff; 2022, 2023

Division of Adult Institutions 2023 Annual Required In-Service Training Schedule Headquarters Non-Custody Staff

Division of Adult Institutions 2023 Annual Required On-the-Job Training Schedule Headquarters Non-Custody Staff

Negative training records PREA 2022 Online - OJT; dated January 24, 2023

4. Interviews

Random Staff

Training Director

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 unclothes 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.

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. Custody staff noted they first received training in the academy and for experienced staff, annual training thereafter. They identified all of training topics as noted in this standard.

Subsection (b):

According to DOM Section 54040.4, training is gender specific based on the offender population at the assigned institution.

Subsection (c):

DOM 54040.4 addresses new employee orientation training and annual training.

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 1 hour On-the-Job Prison Rape Elimination Act training, course code 11053499. Headquarter custody staff are also required to complete the same training.

Subsection (d):

Based on previous audits completed by this writer, this writer is aware of the PREA Knowledge Review utilized by CDCR which consists of 17 questions that the employee must complete at the end of on line training and affix their signature to the form. RJDCF did not provide any examples of electronically signed PREA Knowledge Review forms. Because documentation was not received, it is unclear if RJDCF requires staff to complete this documentation as part of the training process. However, training is completed electronically in a system which tracks participants training progress. This information can be queried and populated into a report.

	Corrective Action: None
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures Department Operations Manual Chapter 5, Article 44 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 PREA Policy Information for Volunteers and Contractors Part A Active Volunteer List May 23, 2023 Volunteer Contact list dated June 30, 2023 CDCR 2301 PREA Policy Information for Volunteers and Contractors Part A and Part B; 3 pages; 8 completed 4. Interviews Contractors Volunteers Community Resource Manager Training Director 5. Tour of the Facility 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.

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.

According to the Pre-Audit Questionnaire, RJDCF has 298 volunteers and contractors who have contact with inmates and have received the PREA In-Service Training.

Two contractors were interviewed in person. Both described the process for being approved to work on site. Within that process is an orientation and PREA training.

A list of volunteers was received while on site. However, the list did not contain contact information. On June 30, 2023 another list of volunteers and their contact information was submitted. It should be noted that the names of volunteers did not mirror each other. On July 2, 2023, an email to seven volunteers was sent, requesting an interview. Three volunteers responded and were interviewed by telephone. They described the process for applying for and the training to become a volunteer at RJDCF. They all described completing training prior to receiving clearance to enter the facility.

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 and contractors 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. According to the Community Resource manager, all volunteers and contractors receive the PREA training. He described the application containing PREA information, for which the volunteer would complete and sign. Permanent volunteers would also complete in person orientation. Training includes definitions, awareness, how to respond to incidents of sexual abuse and sexual harassment and what to do and not to do. Upon completion of orientation, the volunteer or contractor signs the form acknowledging completion and an understanding off the PREA training. Ten completed CDCR 2301 Part A and Part B forms were submitted. Part A provides a summary of the CDCR policy and specifically states CDCR's zero tolerance for sexual violence, staff sexual misconduct, and sexual harassment. This policy prohibits the behavior by all staff, volunteers, and coordinators. Part B is completed by contractors who may have contact with inmates during the course of their assigned duties. Part B includes a section in which contractors have a "Duty to Report" prior behavior as noted in 115.17 that employees are required to answer during hiring and promoting. Part B further requires contractors to acknowledge, with a signature, that as a contract employee," there is a "continuing duty to promptly report" and "notify your employer and the appointing Authority of the Institution to which you are assigned" if the answers to the questions have changed. Contractors affirm that "there are no misrepresentations, omission, or falsifications and that all answers are true and correct". Corrective Action: None
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures 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 Inmate Orientation Handbook; English and Spanish

Senate Bill 132 brochure

CDCR-128-B Completed PREA Education; Blank form

Shine the Light on Sexual Abuse; English and Spanish

Memorandum to the Director of Female Offender programs and Services/Special Housing from Lieutenant dated November 4, 2015; Subject: Prison Rape Elimination, Written Materials Distribution

CDCR-128-B; 14 completed forms

CDCR-128-B; 21 completed forms

4. Interviews

Intake Staff

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 department policy 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. While in Receiving and Release (R & R), inmates are provided a PREA Brochure, orientation handbook which contains PREA information, an explanation of the opposite gender announcement, and the What You Need To Know" PREA video. During the tour of R&R it was explained that the inmate receives Offender Handbook which contains the standard CDCR PREA Information for the inmate handbook. Additionally, it was explained that upon processing the inmate is then shown the PREA video.

The Senate Bill 132, "The Transgender Respect, Agency, and Dignity Act" brochure discusses how the bill directly effects offenders 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, 1667 inmates were admitted to RJDCF during the past year, and all received PREA information during intake.

Subsection (b):

According to the PAQ, 1369 inmates were admitted to RJDCF 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. Follow up comprehensive PREA education is not provided.

Subsection (c):

According to the PAQ, all inmates at RJDCF have received PREA education. In a memorandum dated November 4, 2015 to the Associate Director of the Female Offender Programs and Service/Special Housing from the Lieutenant of the Female Offender Programs and Service/Special Housing, the PREA Information for Orientation Handbook was distributed to the current inmate population and Proof of Practice memorandums were received from each institution verifying this occurred.

Inmates should receive the Inmate Orientation Handbook with standard CDCR PREA information, PREA brochure, and the PREA video while in R&R to satisfy the education requirement.

60% of inmates interviewed answered affirmatively to receiving PREA education/information upon arrival to RJDCF. Despite not recalling formal PREA education, the inmates were aware of their rights to be free from sexual abuse, harassment, and retaliation as well as how to report incidents of such. Many indicated they knew their rights and contact information from the posters on the walls or from being at other institutions. Of those who said they did not receive any information, 68% had been transferred to RJD within the past three years.

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 is available in Spanish, English, and Hmong.

CDCR also utilizes Effective Communication as noted in 115.16. Completed CDCR 128-B Receipt of Inmate PREA Education forms from 2022 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.

Additionally, the PREA video shown in R&R and the institution is available in Spanish or English, as well as subtitles.

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, the R&R Lieutenant explained the intake process. After being processed in and meeting with mental health and the nurse, the Lieutenant meets with the inmate to complete the initial PREA risk screen, provide a copy of the Orientation Handbook and show the PREA video. The inmate then signs the chrono (128B). He sends the completed 128 "up front" to be scanned and entered into the Electronic Records Management System.

Subsection (f):

Shine the Light on Sexual Abuse Poster in English and in Spanish were submitted for review. It provides means in which inmates may report incidents of sexual abuse. Contact information for the Office of the Inspector General is noted and provides an address and phone number. The Shine the Light on Sexual Abuse also informs inmates that CDCR has a zero tolerance policy and 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. During the tour of RJDCF, PREA posters were visible on all housing units and throughout common areas of the institution, such as in Education, Dining Hall, medical., and visiting areas. Additionally, inmates consistently cited the posters as a means in which they received PREA information or where they would go to receive needed PREA information

Recommendation: 115.33 (d) (f) Given the number of inmates who are visually impaired, it is recommended that education materials such as the Orientation Handbook, PREA brochures, or Shine the Light on Sexual Abuse poster be made available in Braille should the inmate need to reference the information.

Corrective Action: Although policy requires PREA education, and staff report inmates receive PREA education and signs the CDCR 128-B acknowledging receipt of PREA education, twelve of the requested 66 completed CDCR 128-B forms were submitted.

	Additionally, only 60% of inmates reported having received education. Without further documentation, it appears that just over half of the inmates have received the required PREA education, rather than they forgot receiving the education. It is recommended that R&R educate all new arrivals by providing the handbook and brochure, playing the video and having a conversation with the inmate prior to transferring inmates from reception. The education should be provided to all inmates at R & R, regardless of the inmate having received the information from other institutions or previously at RJDCF. Two additional completed CDCR128-B forms were completed while the inmates were at another institution. Upon completion of the PREA video, RJDCF staff should meet with the inmate to ensure an understanding of the information and document training on the CDCR 128-B. Inmate education should include a clear articulation of inmates rights as to sexual safety, definitions of sexual abuse, sexual harassment, and retaliation, and how to report incident. It is recommended that all staff in R & R who provide PREA education are trained to deliver the material in the same manner. Additionally, if PREA education is occurring according to policy and the documentation is not available, RJDCF should review the procedure for processing CDCR 128-Bs once they are signed by the inmate. Finally, if R & R does not have the capacity to provide comprehensive PREA education, R & R should provide basic information such as providing the Orientation Handbook and brochures, and when the inmate is on their assigned yard, they receive additional, comprehensive PREA training within 30 days of reception. During the Corrective Action period, a list of 763 individuals received at RJDCF was provided to this auditor. From the list, twenty-one names were selected, requesting copies of the completed 128-Bs, documenting PREA education. All were received and indicated the inmates received PREA education on the day they arrived. PREA education included a video, receipt of the brochure on PREA reporting information, and Orientation Handbook with PREA information. Additionally, the opposite gender announcement was explained. Further, effective communication was considered for each person. Through additional documentation and conversations with RJDCF, corrective action has been satisfied and this standard is met.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures 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 Enrollment - Completed Report - PREA Locally Designated Investigator

Course Enrollment - Investigator Training On PREA - ILC - IST 11054626 and PREA Locally Designated Investigator - OCS - IST 11057915

4. Interviews

RJD Investigators

5. Tour of the Facility

Findings:

Subsection (a):

RJDCF follows 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". Two RJDCF investigators were interviewed and confirmed having completed the training specific to conducting sexual abuse investigations.

Subsection (b):

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, specifically addressing in detail preservation of evidence, conducting interviews, and policy.

Subsection (c):

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.

According to the PAQ, there are 13 specially trained PREA investigators at RJDCF. Course Enrollments for Basic Investigators Course and PREA Locally Designated Investigator course were submitted. The Course Enrollment - Completed Report -

	PREA Locally Designated Investigator for RJDCF dated May 23, 2023 was submitted. This report lists 25 RJDCF staff who have completed PREA Locally Designated Investigator training. Additionally, the completion report for Investigator Training On PREA - ILC - IST 11054626 and PREA Locally Designated Investigator - OCS - IST 11057915 for investigators assigned to OIA-AIMS was also submitted. 142 investigators assigned to OIA-AIMS completed specialized training for PREA investigators. Corrective Action: None
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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 and Participant Module Negative training list PREA Specialized for Medical and Mental health Staff - OJT dated January 24, 2023 CDCR 2301 Part A and Part B; 4 completed forms Negative training list PREA OJT dated January 24, 2023 4. Interviews Medical Staff 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". It 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, 627 Medical and Mental Health Staff regularly work at RJDCF and 96% have 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 and Participant Module was submitted for review. The training includes:

- Signs of Sexual Abuse and Sexual Harassment
- Preservation of Evidence
- Professional Behavior
- Reporting
- Responsibilities and Procedures

Six staff working in Medical and Mental Health Care were interviewed, four permanent staff and two contractors. All six staff confirmed completing initial PREA training and training annually thereafter. However, most staff interviewed did not recall PREA training specific to those working in Medical and Mental Health areas. Training records indicate that all but one staff, who is on extended leave, has completed specialized training.

Subsection (b):

Staff at RJDCF do not conduct forensic medical examinations, as confirmed by on site medical staff. These are completed at an outside medical facility.

Subsection (c):

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 documentation. Subsection (d): 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. Corrective Action:
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures 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) defines "violent felony" 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 July 23, 2020; Subject: Changes to the Prison Rape Elimination Act Screening Form - Standard 115.41 Compliance PREA Screening Job Aid and Instruction; 6 pages PREA Screening form access; screenshot

PREA Screening; 59 completed

Memorandum dated October 1, 2022; Subject: Update to Prison Rape Elimination Act - 30 Day Reassessments at Reception Centers

Reception Center - Prison Rape Elimination Act (PREA) Reassessment

Classification Review - 47 completed

4. Interviews

PCM

PREA Coordinator

Corrections Counselor

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 - Correctional Counselor Responsibilities 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. At RJDCF, 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.

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. Therefore, it is recommended that the practice be formalized in the Department Operations Manual Chapter 5, Article 44.

According to the PAQ, 1623 individuals were admitted to RJDCF during the past year and remained at RJDCF longer than 72 hours. According to the PAQ, all were screened for risk of victimization or abusiveness. About half of the inmates interviewed confirmed they were asked questions from the PREA Screening on the day they arrived to RJDCF while in R & R. Completed PREA Screenings were requested for review, including for those who could not recall screening questions. Completed PREA Screening would confirm RJDCF is following procedures set by CDCR in line with the standards and would further clarify if the inmates were in fact not screened or they just did not remember the screening. 47 Classification Review chronos were reviewed and 57 Completed PREA Screenings were reviewed. The notes did not consistently indicate the date the inmate arrived to RJDF or the date of the PREA Screening.

Subsection (c):

RJDCF utilizes the PREA Screening. This screening tool was implemented in August 2017, as noted in a memorandum to Associate Directors, Wardens and PREA Compliance Managers. In 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 or otherwise may be perceived to be LGBTQI. 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, has been perceived to be LGBTI, or if the custody supervisor (person conducting the screening) perceives the inmate to be LGBTI or gender non-conforming. This was a recent change from previous direction and does not change the wording of the question. Despite the recent change, RJDCF staff administering the PREA Screening in R & R do not answer according to their perception, but solely on what is reported by the inmate.

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):

The reassessment process for Reception Centers was formalized and addressed in a memorandum dated March 13, 2019 to Associate Directors, Wardens, Classification and Parole Representatives, Correctional Counselor II Supervisors, and PREA Compliance Managers. This memo provides instruction to Reception Centers regarding the Reception Center - PREA Reassessment form. This form is comprised of

four questions completed by the Corrections Counselor. If there are any "yes" answers, the Corrections Counselor will interview the inmate the same day. In a memorandum dated October 1, 2022, in response to further clarification from the Department of Justice regarding this standard, CDCR updated their process and clarified that screening staff should consult with all available resources, included the inmate to determine if there is new information available. The Reception Center - Prison Rape Elimination Act (PREA) Reassessment was updated and direction was provided on the form; "A face to face interview with the inmate is required to determine whether any previously unknown triggering event or information has become available".

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, 1369 inmate were admitted to RJDCF 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 PCM, within 14 days of intake, the inmate is seen by UCC. The committee looks at the tool, and the inmate is asked if there are additional concerns. This was confirmed by a Correctional Counselor who served on the committee.

According to a Corrections Counselor, they review the PREA Screening and ask the inmate if they have any new information. However, she indicated it is the Corrections Counselor on the housing unit who conducts the PREA Reassessment. During post-audit, a request to interview a housing unit Corrections Counselor made but not granted. Additionally, PREA Reassessments and/or Classification Committee Chronos were requested. 47 completed Classification Reviews were submitted. At each classification, the inmate is asked if there are additional PREA or safety concerns. Some of the Classification Reviews indicated the inmate was seen ahead of the committee review by a Corrections Counselor, at which time the reassessment occurred This meeting was in addition to the safety check during the committee review. It is noted that material is reviewed and the inmate is interviewed and has an opportunity to address any safety concerns. It appears that inmates are reassessed, however, it is unclear if these reassessments are occurring within 30 days.

Additionally, based on submitted documentation, as a Reception Center, RJDCF does not appear to follow their policy by using the Reception Center - PREA Reassessment Form, rather following the process for in which the reassessment review is conducted in conjunction with classification.

Subjection (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". It is not clear who administers the screening or how the screener becomes aware of the need to reassess. Several PREA Screens were conducted which indicated they were completed due to new information. It was unclear what the new information was or when in the inmate's incarceration the reassessment occurred.

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.

Subsection (i):

According to the PCM, all staff have access to the system which houses the assessment. However, line staff do not have full access to the system and as such, staff receive access based on their classification and their need to have the information. The PREA Coordinator clarified that security and health services staff would not have access but staff involved with housing assignments would have access. The PREA Coordinator furthered that the system tracks the log in information of staff.

Recommendation: 115.41(d) Change the wording of the question #7 7 in Section A, separating the inmate report and the rater's perception to strengthen the assessment and be clearer to the rater to ensure the assessment remains objective and in line with standard 115.41. Additionally, train all staff administering the PREA screening to ensure consistency in the way questions are interpreted and asked. This may be done through training brief, on line training module, or in person training.

Recommendation: 115.41(f) It is recommended that RJDCF follow the requirements of the Reception Centers by completing the Reception Center - Prison Rape Elimination Act (reassessment) rather than following the processes of reassessing more informally through the initial Unit Classification Committee.

Recommendation: Ensure PREA Screening is completed for all inmates being admitted to or transferred to RJDCF within 72 hours of admission, particularly if they are admitted without first going through R & R. Additionally, ensure PREA Reassessments are completed within 30 days of arrival to RJDCF, due to a referral, request, incident of sexual abuse or receipt of new information.

Corrective Action: None

115.42	Use of screening information
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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 6,

3. Documents

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

CDCR's compliance with 115.42; 5 pages

Memorandum dated October 24, 2018; Subject: Changes to Prison Rape Elimination Act Screening Form - Mental Health Referral Process

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

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

Letter dated October 6, 2017, Use of Screening Information

PREA Screening Instructions, 4 pages

Senate Bill 132 Brochure; English and Spanish

Classification Review; completed 56

Transgender Biannual Assessment Chrono; 145 completed

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.

The PREA Compliance Manager confirmed that the PREA Screening is reviewed during the initial review. The committee includes staff from Education, Medical and Mental Health disciplines. The committee considers the inmate's concerns of safety and information gleaned from the screening tool when considering work assignments, housing and program. If single cell is needed, the committee or a supervisor is involved. A classification staff confirmed the committee reviews the PREA Screen, identifies any new information, and ensures the inmate does not have any concerns regarding their sexual safety. Classification reviews eligibility for single or double cell and places inmates on wait lists for work and program assignments. According to the Corrections Counselor, Classification places inmates on program waiting lists while another department will place the inmate into the assignment. Classification Review documents noted that PREA screening and safety was addressed at each review. This included bed assignments, work and program recommendations.

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. RJDCF is identified as one of the institutions with appropriate medical and mental health services to support transgender and intersex individuals. Within RJDCF, identified transgender or intersex inmates are not assigned to a specific yard or housing unit. Inmates consistently reported not being assigned housing specific for the transgender or intersex population.

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, when placing individuals in housing and program assignments they consider the safety of the individual. This is done by considering the individual's mental health, history of victimization and predatory behaviors, education, and cognitive functioning. This is typically done during committee review.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.14.2 addresses biannual reassessments for inmates identified as transgender or intersex. According to DOM, a list of identified inmates is sent to the PREA Compliance Manager indicating who has been identified and the month in which the person is due for review.

The PREA Compliance Manager confirmed that inmates identified as transgender or intersex are seen by classification biannually and more frequently if placed in administrative segregation. Additionally, classification staff confirmed inmates identified as transgender or intersex are reviewed biannually for placement and programming assignments. The list was requested for review, however it was reported that a list is not generated for the PCM to track review dates. Rather, 145 completed Transgender Biannual Assessments were submitted for review. Additionally, the Classification Review documentation notes the next Classification Review and the next Transgender Biannual Assessment.

	Subsection (e): Both the PREA Compliance Manager and the Classification Committee staff confirmed the inmate's own views regarding their safety is considered when assigning housing and programming placements. Inmates did not consistently report that they were asked their views regarding safety, however, safety was consistently addressed during classification committee reviews including the inmates own views. Subsection (f): The PREA Compliance Manager reported that inmates identified as transgender and intersex are able to shower separately from others. RJDCF offers privacy screens and alternate shower schedules. Inmates interviewed all confirmed they are able to shower separately from others. During the tour, shower doors were observed with bars across the front, blocking full view of the inmate. Additionally, all housing units had portable privacy screens available for use during showers. Recommendation: 115.42(d) Ensure a list of inmates identified as transgender or intersex is provided to the PCM as noted in the DOM to ensure Transgender Biannual Assessments are not missed. Corrective Action: None
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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 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 confirmed the CDCR policy prohibiting the use of administrative segregation for inmates at high risk for victimization or for those who have alleged victimization. The Warden reported that victims are placed in administrative segregation if the inmate makes the request. When that occurs, staff make every effort to release them as soon as possible. RJDCF has the ability to rehouse in another facility or housing unit rather than using administrative segregation. He furthered that inmates are placed for safety, not because an allegation was made.

Inmates who had alleged sexual victimization who were placed in administrative segregation were interviewed. By their own detail of events, the placement in administrative segregation was not due to sexual victimization, but other behavior the inmate engaged in.

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.

According to staff working in segregation, inmates placed in segregated housing for protection have programs and education available to them. Based on the inmate's location and work opportunities, the work opportunity would not be available. Those placed in administrative segregation are reviewed during the next scheduled committee meeting after placement, which is convened weekly, and then every 30 days thereafter if placement is extended. Restrictions are documented. Inmates in segregation confirmed they participated in groups while in Administrative Segregation.

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.

Documentation was requested to confirm information gleaned from staff and inmate interviews name Administrative Segregation Notices and CDCR 114-1, if available. These documents were not received.

Recommendation: 115.43 (a) It should be noted, inmates reported fear of being placed in administrative segregation for reporting incidents of sexual abuse or harassment or a safety concern. Inmates did report that they told staff they did not fear for their safety, when in fact they did, as not to be placed in administrative segregation. Given the number of sexual abuse and sexual harassment allegations and no definitive examples of inappropriate use of administrative segregation, corrective action is not warranted. However, it is worth noting that there is a perception among inmates that the only mechanism to ensure an inmate's safety is administrative segregation. RJDCF is encouraged to review their practices to ensure administrative segregation is in fact the last option to ensure inmate safety. RJDCF is also encouraged to message and train staff to use language that is not exacerbating

	a false narrative or instilling unnecessary fear. Corrective Action: None
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115.51	Inmate reporting
	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 Section 3401.5 3. Documents Sexual Abuse/Assault Prevention and Intervention pamphlet; English and Spanish Sexual Violence Awareness pamphlet; English and Spanish Shine the Light on Sexual Abuse poster CDCR-128-B Receipt of Inmate PREA Education Prison Rape Elimination Act (PREA) In-Service Training version 2.0 and 3.0; Lesson Plan CDCR Public Website web inquiry 4. Interviews PREA Compliance Manager Staff Inmates Office of the Inspector General (OIG) 5. Tour of the Facility Findings:

Subsection (a) & (b):

Offender reporting is addressed in two sections of the Department Operations Manual. DOM Chapter 5, Article 44, Section of 54040.4 Offender Education describes how the 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 "Avoidance of Sexual Violence" and the pamphlet "Sexual Abuse/Assault Prevention & Intervention" in both English and Spanish was 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. Further, they provide the address and phone number for the Center for Community Solutions and the address for Just Detention International. According to the brochure, the OIG PREA Ombudsperson will keep the inmate's name anonymous, should this be requested.

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 Center for Community Solutions 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.

The CDCR-128B is utilized to acknowledge receipt of the PREA Video, brochure, orientation handbook, and has been explained 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.

RJDCF 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.

According to the PREA Compliance Manager, inmates may report sexual abuse or sexual harassment to any staff, Office of Internal Affairs (OIA), OIG, and the rape crisis center. Inmates receive this information from the brochures handed out in Receiving and Release, Orientation Handbook, and the posters throughout the institution. Additionally, this information is available through the education video shown on the institution channel. Staff consistently reported multiple ways in which an inmate could report sexual abuse or sexual harassment, noting the 602 appeals process, talking to staff, and using the hotline number. Without prompting, staff also noted the information is available to the population on the posters throughout the institution.

Most inmates interviewed knew one way in which to report an incident of sexual abuse or sexual harassment. Most noted telling a staff, specifically, custody and medical; hotline numbers, or the 602 process. Inmates also acknowledged the posters displayed throughout the institution.

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, 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.

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 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. Some staff also indicated they could use the OIG and OIA hotline numbers to report an incident confidentially. Utilizing the link on the CDCR public website, this auditor contact OIG to confirm the process of reporting an incident of sexual harassment or sexual abuse. OIG confirmed the process and furthered that through mail, 1-800 number and web inquiries, OIG has received 36 notifications involving PREA allegations for RJDCF in 2022. Additionally, when OIG receives a report of a PREA incident, they immediately notify the Warden and PCM. Corrective Action: None
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures California Code of Regulations Title 15, Article 8. Inmate Sexual Safety Department Operations Manual Chapter 5, Article 44 3. Documents PREA Grievances Tracking 2023 4. Interviews 5. Tour of the Facility Findings: Subsection (a):

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.

Subsection (b):

CCR Title 15, Division 3, Chapter 1, Article 8 Inmate, Section 3084 refrains from requiring the inmate 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, CCR specifically identifies no time limits for these allegations.

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, 97 grievances filed alleged sexual abuse. Of those grievances, 4 allegations reached a final decision within 90 days and 33 required an extension. It is not clear the status of the remaining grievances. The PAQ explained that all grievances containing an allegation of staff sexual misconduct receive a written response within 60 days from the date of receipt. 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. 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.

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 RJDCF Grievance Office staff, Grievances are collected from each mailbox every business day by 10:00 am. They are reviewed the same day, checking for PREA, safety concerns, suicide concerns, or use of force. If there is a PREA concern, the information is sent to the RJDCF Investigative Services Unit utilizing the institution PREA notification email. The grievance is logged into SOMS tracking. PREA is considered emergency grievance in SOMS and is processed and closed within 5 days. The claimant receives notification that the Grievance is redirected and the Grievance is closed. The notification is typically sent the same day.

According to the PAQ, 79 grievances alleging substantial risk of sexual abuse was received by RJDCF. All of the 79 grievances received a response within 48 hours, essentially closing the grievance. None of the grievances received a final decision within five days.

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. According to the PAQ, grievances and emergency grievances are not completed according to standards. However, based on the interview with the RJDCF Grievance Office staff, grievances are closed timely and allegations of sexual abuse and sexual harassment are referred to Investigative Services Unit. Investigations tracking sheet confirmed allegations received through the 602 process is received and investigated by ISU. Given the competing responses, the grievance tracking sheet from SOMS for PREA related grievances with dates received, initial response date, and final response date was requested, but not received. Corrective Action: Provide the grievance tracking sheet from SOMS for PREA related grievances with dates received, initial response date, and final response date to confirm compliance with this standard. During Corrective Action, RJDCF provided a copy of the 2023 PREA Grievances tracking spreadsheet. The tracking sheet indicated that in 75% of grievances filed in 2023 which included an allegation of sexual abuse or sexual harassment, were issued a "final grievance decision letter" within 60 days of receipt of the grievance. The 25% that were not issued within the 60 days were issued just outside of the time frame and all delinquent responses occurred prior to the on site portion of the audit. Additionally, a comparison of the grievance tracking sheet and the investigations tracking sheet, indicate allegations of sexual abuse and sexual harassment made via the grievance process are being investigated. No further corrective action is required.
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115.53	Inmate access to outside confidential support services
	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 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 PREA Poster; Spanish and Hmong

Standard Agreement between CDCR and Center For Community Solutions dated March 30, 30, 2021

4. Interviews

Victim Advocate

Inmates

5. Tour of the Facility

Findings:

Subsection (a):

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.

RJDCF has partnered with the Center for Community Solutions to provide advocacy and support services. Inmates at RJDCF are provided the address and phone number for the Center for Community Solutions, via the Sexual Violence Awareness and the Sexual Abuse/Assault Prevention and Intervention pamphlets. 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. The Help is Available poster available in English, Spanish, and Hmong and provides contact information. These are posted throughout the institution.

Inmates were inconsistent with the knowledge of available support services. Answers ranged from yes there are services, to no there are not. Some inmates referenced the posters, while others did not know if support services were available.

Subsection (b):

The Inmate Orientation Handbook, given to all inmates in Receiving & Release contains a Mail System section and advises inmates that all non-confidential mail is subject to being read entirely or in part while confidential mail is opened and inspected in the presence of the inmate. Outgoing confidential mail will be inspected, "with or without opening the mail, for cause". The handbook also addresses Inmate Telephones. Inmates must state their name at the onset of the phone call. All phone calls are subject to monitoring. The PREA section of the handbook advises inmates that all calls on the telephone system are recorded. If a PREA allegation is identified through the inmate telephone system, it will be referred for investigation as appropriate.

The PREA Confidential Correspondence With Rape Crisis Centers poster was submitted for review. Written correspondence to the Center for Community Solutions should be labeled confidential / privileged communication to ensure the

communication between victim advocate and survivor is treated appropriately. How to identify and handle confidential PREA mail is posted in the mailroom to ensure the mail is not read by staff and only opened in the presence of the addressee.

Based on correspondence during a previous PREA audit, the PREA Coordinator confirmed that the calls to the rape crisis center are not recorded or monitored.

The four page PREA information section of Orientation Handbook submitted in the OAS is a standard format and provides comprehensive PREA information, including the victim advocate contact information for emotional support services, how written correspondence should be handled to ensure privacy, and advises inmate that telephone calls to the rape crisis center require a pin but are not recorded. However, a copy of the Orientation Handbook from Receiving and Release at RJDCF did not include the contact information. Additionally, some inmates reported the handbook was optional.

Subsection (c):

RJD has entered into an agreement with the Center for Community Solutions 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 RJDCF and the Center for Community Solutions was submitted in the OAS. The agreement began March 30, 2021 and remains in place through June 30, 2024. The MOU defines the roles and responsibilities of each entity. Community Action of Madera County, Inc agrees to work with CCWF 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 Center For Community Solutions 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.

The Director of Sexual Assault Services at the Center for Community Solutions confirmed the relationship between the Center For Community Solutions and RJDCF. They provide accompaniment to the hospital for sexual assault forensic examinations and through the investigation process. They provide a hotline that is staffed 24 hours a day and available to the inmate population. She indicated there is one main advocate who works with inmates at RJDCF and communicates through written correspondence. Prior to COVID, advocates would work with inmate survivors in person at RJDCF. They are in the process of obtaining clearance to begin providing in person services again.

Recommendation: 115.53 Update the RJDCF Orientation Handbook to include the four page standard PREA Information and ensure all inmates at intake receive a copy.

Corrective Action: None

115.54	Third-party reporting
	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 2 3. Documents Orientation Handbook CDCR public website CDCR public website PREA Reporting Information 4. Interviews Inmates Office of Inspector General 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 Handbook 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 or the 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 by clicking this will give the viewer an option for Reporting Information. This information was not made available under the Family and Friends tab. 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 as to which institution falls under which region. 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, this auditor contacted OIG electronically, using the link. A response was received by email within two business days. The staff from OIG indicated that the immediately contact the Warden and PCM of the institution in which the allegation of sexual abuse or sexual harassment was made. Most inmates interviewed were aware that someone outside of RJDCF 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
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 3. Documents 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

PREA Coordinator

Warden

Staff

Medical and Mental Health Staff

5. Tour of the Facility

Findings:

Subsection (a):

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 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 reported 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 reporting "immediately and confidentially, to the appropriate supervisor any information that indicates an offender is being, or has been, the victim of sexual violence, staff sexual misconduct, or sexual harassment". 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.

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 RJDCF acknowledged their responsibility to report to ISU should they become aware of an inmate being the victim of sexual abuse or sexual misconduct. Staff working directly with inmate patients who were interviewed reported that when they are the staff who first learn of an incident of sexual assault or harassment, they notify their supervisor and ISU. Upon arrival to RJDCF, medical staff review patient rights and medical confidentiality with all inmates. Subsection (d): RJDCF does not house individuals under 18 years of age, as previously noted. When a report is made on behalf of a vulnerable adult, a referral is made to mental health. Additionally, they have access to crisis centers and victim advocates. Further, CDCR staff work closely with the District Attorney's office to determine if criminal charges are warranted. Subsection (e): DOM Chapter 5, Article 44 addresses the routing of allegations to the Locally Designated Investigator in Section 54040.7.2 and 54040.7.3 third party reporting for sexual abuse and sexual harassment by staff and by inmate respectively, Section 54040.7.4 notification from other facilities. 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. Corrective action: None
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115.62	Agency protection duties
	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 4. Interviews Agency Head Warden Staff 5. Tour of the Facility Findings: 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. The Agency Head reported that the individual would be interviewed in a confidential setting in addition to ensuring the inmate is safe in their housing. The individual would be separated from the subject and referrals would be made to mental health. She continued that the situation would continue to be monitored. RJDCF did not have data regarding the number of inmates who were at a substantial risk of imminent sexual abuse. However, the Warden supported the Agency Head's explanation, that when an inmate is believed to be at substantial risk of imminent sexual abuse, the PREA investigative unit will interview the victim and determine actions to keep the victim safe. He furthered that CDCR has housing options, specifically rehousing the suspect to another facility or housing unit. Custody staff interviewed consistently reported they would move the person to a safe, private area, question them, and immediately contact a supervisor. Corrective Action: None
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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

Investigation Tracking

Warden to Warden Notification emails; 5

4. Interviews

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 RJDCF, the hiring authority rests with the Warden. The Warden confirmed that he notifies the hiring authority of the other facility and in turn, he is notified when there is an allegation stemming from RJDCF incident. The emails typically include ISU and the PCM, however if they do not, the Warden immediately informs them so the investigation can begin.

The PAQ did not indicate how many allegations of sexual abuse or sexual harassment of inmates housed at another facility were received by RJDCF staff. According to investigation tracking, over the past year, 37 investigations have been initiated for allegations of sexual abuse or sexual harassment having occurred at another institution and being reported by inmates housed at RJDCF. Five email notifications were requested but not yet received.

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. 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. Subsection (d): 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 point of contact is Warden, as the Hiring Authority. Inmate on inmate allegations are assigned to the LDI and staff on inmate allegations are initially referred to LDI and then submitted to the Hiring Authority to be forwarded to OIA. According to the investigation tracking sheet, the institution who receives the report, takes the lead on the investigation. Corrective Action: 115.63 (b) When RJDCF receives a report of sexual abuse that occurred at another institution, ensure the Warden notifies the head of the facility where the abuse occurred within 72 hours of receiving the allegation. 115.63 (c) Document 115.63 (b) notifications. During the corrective action period, RJDCF submitted five examples of Warden to Warden notification having occurred during the corrective action period. These are submitted via email for tracking purposes. Corrective action has been satisfied and RJDCF meets this standard.
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115.64	Staff first responder duties
	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

Initial Contact Guide (PREA)

Custody Supervisor Checklist (PREA)

In-Service Training - Prison Rape Elimination Act (PREA) Version 3.0 Course Code: 11054378; Instructor Text

4. Interviews

Staff

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, preserve the crime scene / evidence, and contact medical if needed.

The PAQ did not include how many sexual assault incidents were reported at RJD and how many were within 72 hours.

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 notify custody staff and ISU or immediately tell their supervisor. According to the In-Service Training - PREA Instructor Text, all staff are trained to report immediately and confidentially to the appropriate supervisor. Training does not expand on who that appropriate supervisor is. The PAQ did not provide the number of allegations of sexual assault first reported to non-custody staff. According to the investigation tracking sheet, in the past year 10 incidents of staff misconduct were reported to medical or mental health staff and 12 incidents of inmate on inmate sexual abuse were reported to medical or mental health staff. Recommendation: Non-custody staff were aware of their responsibility to immediately report incidents of sexual abuse and sexual harassment. It was not as clear to whom they report, their own supervisor or custody staff/supervisor. It is recommended to include in the training lesson plans that non-uniform staff should report incidents immediately to a custody supervisor, as noted on the Initial Contact Guide (PREA), and how that is carried out. Additionally, non-uniform staff did not discuss the Initial Contact Guide (PREA), which questions whether or not non-custody staff are aware of this document. It is important that they are aware of the document, as this is the only location non-custody staff are directed to contact a custody supervisor and provides direction on how to respond appropriately to allegations of sexual assault. Corrective Action: None
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115.65	Coordinated response
	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

RJDCF Operations Manual Supplement Chapter 5, Article 44; revised February 2023

3. Documents

Memorandum of Understanding between CDCR and the Center for Community Solutions effective March 30, 2021 through June 30, 2024

PREA - Initial Contact Guide

PREA - Custody Supervisor Checklist

PREA - Transportation Guide

Watch Commander Notifications Checklist

4. Interviews

Warden

5. Tour of the Facility

Findings:

DOM Chapter 5, Article 44, Section 54040.8 through 54040.10 addresses first responder responsibilities, custody supervisor, crime scene preservation and evidence collection, victim advocate and victim support person, medical services, transportation responsibilities, forensic medical examinations, and mental health responsibilities. The Warden confirmed RJDCF 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.

Corrective Action: Develop a written plan specific to RJDCF outlining the responsibilities of all who respond to an incident of sexual abuse. This should include the identification and coordinated duties of first responders, medical, mental health practitioners, investigators and facility leadership. Additionally, the plan should be disseminated to applicable staff and those staff should be trained in their roles when responding to an incident of sexual abuse.

During the Corrective Action period, RJDCF submitted the RJDCF Operations Manual Supplement which outlines roles and responsibilities when responding to an incident of sexual abuse. The plan is specific to RJDCF in that it provides the name and contact information for the forensic examination facility, hospital, and the advocacy agency. Additionally, the plan includes medical and mental health staff responsibilities, supervisor, and transportation staff. To ensure staff are aware of their role and responsibilities in responding to sexual assault, the plan includes the PREA Initial Contact Guide for all first responders, PREA Custody Supervisor Checklist, PREA

	Watch Commander Notification Checklist, and the PREA Transportation Guide. With the submittal of these documents, RJDCF is in compliance and no further corrective action is required.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 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 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 ad 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 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: According to the Agency Head, CDCR has entered into or renewed collective bargaining or other agreements. All Memorandum Of Understandings and Contracts contains language which allows CDCR to place staff on administrative should they be the subject of a PREA investigation. The Agreements between the State of California and the California Peace Officers Association, 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 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 the rights to determine the procedures and standards of selection for employment and promotion, layoff, assignment, scheduling and training. Thus, allowing CDCR to protect inmates from staff abusers. Corrective Action: None
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115.67	Agency protection against retaliation
	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

3. Documents

Investigation Files

CDCR 2304 Protection Against Retaliation (PAR) - Inmate; blank form

CDCR 2305 - Protection Against Retaliation (PAR) - Staff; blank form

4. Interviews

Agency Head

Warden

Staff responsible for retaliation monitoring

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 to 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. RJDCF follows department policy as noted above. RJDCF has assigned retaliation monitoring to staff from the Investigative Services Unit. The Warden confirmed retaliation monitoring occurs and if retaliation is suspected, RJDCF will follow up 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 talked about by staff and inmates is housing changes, the use of administrative segregation and referrals for mental health services.

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 the documentation review and inmate interview. Based on the review of completed CDCR 2304 and staff interview, monitoring includes face to face status checks every 15 days.

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.

	Corrective Action: None
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115.68	Post-allegation 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 3. Documents 4. Interviews Warden Staff Inmates 5. Tour of the Facility Findings: 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. 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 status. The PAQ did not indicate how many inmates who alleged to have suffered sexual abuse were held on non-disciplinary segregation status. Investigation file review did not indicate alleged victims were placed in segregated housing in response to an allegation of sexual abuse or sexual harassment. Inmates in segregation were placed there for reasons other than a safety concern. However, it should be noted that more than one interviewed inmate discussed fear of reporting an incident of sexual abuse or sexual harassment, or verbalizing a safety concern out of fear of being placed in administrative segregation. Additionally, staff interviews also discussed the use of administrative housing as a response to inmate safety concerns. Recommendation: Review the use of Administrative Segregation as a mechanism to protect individuals who are at risk for sexual abuse, staff sexual misconduct, or retaliation or verbalize a safety concern. Given that documentation was not submitted for review as requested, the nexus between the inmate report and the inmate's placement in Administrative Segregation are unclear. Corrective Action: None
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115.71	Criminal and administrative agency investigations
	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 44 California Code of Regulations 3. Documents CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Participant Workbook Version 1.0 BIC BET ID 11055853 (LDI Standalone: 11057915) Investigation files

Investigation tracking

PREA Records Retention Schedule

PREA LDI Training Records

2022 PREA Log as of December 5, 2023

2023 PREA Incident Log as of September 1 and December 5 2023

4. Interviews

PREA Coordinator

PREA Compliance Manager

Warden

Investigators

5. Tour of the Facility

Findings:

Subsection (a):

RJDCF 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 against 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.

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 RJDCF 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. They will use the information provided and gather more information through the investigation.

Investigation tracking documents and file review for investigations assigned to the LDI at RJDCF indicated that investigations are assigned and started on the day the allegation is received by staff. Investigations are thorough and documented upon completion.

Investigations assigned to the Office of Internal Affairs are not completed promptly. Investigation tracking indicates there were 170 allegations of sexual misconduct or sexual harassment between May 1, 2022 and May 20, 2023. Only two of those investigations have been closed. Tracking indicates that investigations remain open from January 2022. Between the same time period, RJDCF LDI investigated 84 allegations of sexual abuse and sexual harassment and have closed 31. Investigation tracking does confirm that allegations are received in a variety of ways, including third party and anonymous reports.

Subsection (b):

LDIs assigned to RJDCF and IAO 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 as 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, medical reports, photographs of the crime scene, video monitoring from the housing unit and the body worn cameras, and interviews of witnesses, suspect, and victim. Interview and evidence summaries were housed in the investigation files reviewed while on site at RJDCF.

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 before conducting a compelled interview. The District Attorney's office in San Diego has established a liaison to work directly with RJDCF staff.

Subsection (e):

Specialized PREA Training for Locally Designated Investigators (LDI) Participant Workbook 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 RJDCF investigators indicated they take each report seriously and conduct a thorough investigation regardless of the allegation. One investigator talked about remaining unbiased when the allegation is against a staff member. Although CDCR has a variety of tools such as polygraph and voice stress analyzer, these are not utilized for an investigation into sexual misconduct, sexual abuse, or sexual harassment.

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. Investigation file review confirmed that staff actions or failures to act are considered and identified.

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.

RJDCF Investigators confirmed an investigative report is compiled at the conclusion of each investigation. This includes the evidence of the investigation, findings, photos, medical evaluations and the outcome of the investigation. In a review of the investigation files at RJDCF of inmate on inmate allegations, the closed investigations did contain a summary of the investigation, a review of the evidence 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 investigator, the investigation is documented. Only one inmate investigation completed at RJDCF was substantiated.

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, RJDCF has not referred any investigation for criminal prosecution since 2012. Based on the investigation tracking, one inmate on inmate sexual abuse allegation was substantiated, which was referred for 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):

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. RJDCF PREA Investigators confirmed they continue to investigate when the staff is no longer employed at RJDCF or the inmate is no longer housed at RJDCF. If the investigation appears criminal in nature, the case is referred to the District Attorney's office for charging.

Subsection (l):

RJDCF conducts both administrative and criminal investigations. The PREA

Coordinator explained that each facility has a Memorandum of Understanding with the District Attorney's Office and some institutions have a DA Investigator to assist with search warrants and guide ISU. The RJDCF investigators noted that they have a working relationship with the District Attorney and the District Attorney Liaison. Additionally, if another institution or agency is investigating, RJDCF investigators assist with evidence collection or interviews as needed to support the investigation.

Recommendation: Closed investigation files were thorough and contained information to support RJDCF's adherence to this standard. In order to provide additional transparency and allow for a more in depth view of the evidence, it is recommended that interview notes or summaries of the interviews be maintained in the investigation files. To further enhance evidence documentation, interviews should be documented in a Q and A format to accurately reflect the interviews of victims, witnesses, and perpetrators. This will also allow investigators and supervisors to better assess all evidence in determining an investigation outcome.

Corrective Action: 115.71(a): Given the number of open investigations stemming from January 2022, allegations of sexual abuse and sexual harassment are not completed promptly. The failure to close investigations and the failure to subsequently provide inmates with notification or updates, diminishes the faith one may have in the investigative process. Inmate victims may not report with the belief that nothing will happen or fear they will be targeted rather than the abuser being held accountable. Additionally, abusers are not held accountable and have the opportunity to continue in predatory behavior while investigations remain open. Finally, documentation for staff on inmate investigations have not been made available to determine if investigations are thorough and objective.

On September 19, 2023, RJDCF submitted an updated 2023 investigations tracking spreadsheet indicating 288 investigations opened at RJDCF in 8 months. 26 of those investigations have been closed. However, after further comparison with the spreadsheet and the documents submitted for review, the spreadsheet did not appear to be accurate. On December 5, 2023 RJDCF submitted the 2022 PREA Log and the 2023 PREA Incident Log. In 2022, RJDC averaged 14 new investigations per month. In 2023, RJDCF averaged almost 23 new investigations per month, seeing a spike of 78 new allegations in 2023 immediately after the on site portion of this audit. The 2022 PREA log indicates of 171 PREA investigations in 2022, 103 remain open. Of the 306 investigations open as of November 30, 2023, 254 remain open. Since September 1, 2023 28 investigations have been closed. As the corrective action period neared closing, additional investigations were pending closure and being reviewed by the Hiring Authority. This indicates a continued effort to thoroughly bring investigations to a close.

At the close of the corrective action period, RJDCF and CDCR still have investigations open from 2022. Recognizing the number of allegations being investigated, the fact that investigations are being closed, and the nuances as to why an investigation may remain open, RJDCF is found to be in compliance with this standard, but with the expectation that both RJDCF and CDCR continue to address investigations. Given the

	number of investigations at RJDCF, the investigative authority being shared by LDI and AIMS and subsequently the number of investigations, it is recommended that RJDCF and CDCR continue to evaluate the current process to determine the barriers in which an investigation is not being closed timely. This may include the number of investigators and size of each investigator's caseload, process for initiating and reviewing allegations and investigations, and the types of allegations being investigated. It is recommended that RJDCF and CDCR ensure the allegations meet the definition of sexual abuse and sexual harassment as defined by the PREA standards and CDCR policy. RJDCF should also consider holding inmates accountable when allegations are unfounded and were clearly not made in good faith to dissuade individuals from using "PREA" for ulterior personal gain rather than protection from sexual abuse and sexual harassment.
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 3, Article 22 CDCR Department Operations Manual Chapter 5, Article 44 3. Documents Specialized PREA Training for Locally Designated Investigators Participant Workbook Version 1.0 BIC BET ID: 11055853 (LDI Standalone: 11057915) Investigation Files 4. Interviews Investigators 5. Tour of the Facility Findings: 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. The RJDCF 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. Corrective Action: None
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115.73	Reporting to inmates
	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 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) Investigation file review 4. Interviews 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, 27 allegations of sexual abuse and staff sexual misconduct have been investigated during the past twelve months and all 27 alleged victims have been informed of the investigation outcome. The PAQ indicates a total of 44 notifications were provided during the past twelve months to inmates and all were documented. According to the investigations tracking sheet, between May 1, 2022 and May 20, 2023, 98 staff sexual misconduct allegations were investigated, with one being closed as unfounded. In the same time frame, an additional 41 allegations of inmate on inmate sexual abuse were investigated, with 20 being closed. Of those 20 closed investigations, 1 was substantiated and 12 were unsubstantiated.

The Investigator and Warden both confirmed the inmate receives written notification and signs for it, acknowledging they received the notification. This process is also trained during Specialized PREA Training for Locally Designated investigators. Two inmates reported that they received papers that they were told to sign. Both inmates described documentation in which they acknowledge they could get along with their alleged abuser and that there were no safety concerns. Of the investigation files reviewed on site at RJDCF, seven files alleging sexual abuse by an inmate were closed. Three of those files contained the CDCR-128B.

Subsection (b):

This subsection is not applicable. RJDCF 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.

According to the PAQ, zero staff sexual misconduct investigations have been substantiated or unsubstantiated in the past year. This was confirmed with the investigations tracking sheet.

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 investigation tracking sheet, one inmate on inmate sexual abuse investigation was substantiated in the past year. Recommendation: When providing the inmate with the CDCR 128-B, investigators should explain the intent of the form as the outcome notification. The signature does not indicate agreement with the outcome, but simply acknowledges receipt. It is also recommended that the CDCR 128-B be amended to include a check box if the inmate refuses to sign and a Notice of Service section for staff to complete indicating a copy was provided to the inmate and the inmate refused to sign. Corrective Action: As noted in 115.71, investigations are not completed timely, some remaining open for longer than one year. Investigations should be completed timely. If investigations are not completed, inmates are not provided notification. Additionally of the closed investigation files reviewed, less than half included a CDCR 128-B. Ensure each alleged inmate victim of staff sexual misconduct and sexual abuse are provided notification of the investigation outcome and the status of the employee when the investigation involves a staff allegation that was unsubstantiated or substantiated. During Corrective Action period, ten closed investigations were reviewed and an additional two were pending Hiring Authority signature pending closure. All of the closed files included a CDCR 128-B notice. In five of the ten closed investigations, a memorandum was also included with the 128-B, providing additional information to the alleged victim. Should RJDCF consistently close investigations timely and provide inmates with a 128-B and memo, RJDCF would exceed the expectations of this standard. No further corrective action is needed.
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 3, Article 22 CDCR Department Operations Manual Chapter 5, Article 44

California Code of Regulations

3. Documents

4. Interviews

Investigator

5. Tour of the Facility

Findings:

Subsection (a) & (b):

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.

Subsection (c):

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 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.

In the past twelve months, no staff from RJDCF have been disciplined, for violation of

	agency sexual abuse or sexual harassment policies. 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". Department Operations Manual 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. Zero employees, contractors, or volunteers have been referred to licensing agencies due to sexual misconduct. Corrective Action: None
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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 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. 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 or the family and friends of inmates or volunteer misconduct. According to the Warden, while investigating the veracity of the allegations, the volunteer or contractor may still be allowed to work, but would not be given access to inmates or may be assigned to an area outside of the secure perimeter. Corrective Action: None
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115.78	Disciplinary sanctions for inmates
	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 Investigation Tracking 3. Documents

4. Interviews

Warden

5. Tour of the Facility

Findings:

Subsection (a):

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. The inmate is 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 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 investigation tracking, one inmate-on-inmate sexual assault investigation was substantiated. This case was referred for criminal prosecution, however the District Attorney's office declined to prosecute.

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 previous allegations and the seriousness of the current allegations.

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 RJD Warden confirmed that a mental health assessment is completed and the results considered when determining sanctions for sexual violence.

Subsection (d):

Title 15, Article 5, Division 3, Chapter 1, Subchapter 4, Section 3317 allows for a recommendation of an alternative resolution to the discipline if there is indication the inmate's behavior was strongly influenced by mental illness, disability/cognitive or adaptive functioning deficits. Title 15 is silent on requiring inmates to participate in interventions as a condition of access to programming or other benefits. According to mental health staff, mental health evaluations are completed with all alleged perpetrators and victims. RJD does not offer therapy designed to address offenders of sexual abuse in a group setting. Individual clinicians may provide individual therapy to address the offending behavior. Inmates are not required to participate in programming to address sexual abuse prior to receiving other programming and services. Inmates have a right to refuse programming

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 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 did not consent.

Subsection (f):

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. It was reported by inmates and staff that inmates use false PREA allegations as a means for housing changes or other self-serving gains. Although, one investigation was unfounded, there was no evidence that suggested the alleged victim was disciplined. To RJDCF's credit, inmates are not quickly disciplined for reporting an incident of sexual abuse or misconduct, which could lead to a decrease in legitimate reports. However, RJDCF should continue to consider discipline when a report is unfounded based on clear evidence that the offense did not occur, such as staff schedules, video documentation, or inmate housing assignments.

Subsection (g):

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".

Corrective Action: None

115.81	Medical and mental health screenings; history of sexual abuse
	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 California Correctional Health Care Services Health Care Department Operations Manual 3. Documents CDCR MH-7448 Informed Consent for Mental Health Care; blank form CDCR 7552 Prison Rape Elimination Act Authorization for Release of Information; blank form PREA Screening Tool; blank form CDCR 128-MH5 Mental Health Referral Chrono 4. Interviews Mental Health Staff Staff who conduct screening Inmates 5. Tour of the Facility Findings: Subsection (a) & (b): DOM Chapter 5, Article 44, Section 54040.7 entitled Referral for Mental Health Screening indicates that if 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 inmate is referred to mental health. The initial PREA screen occurs at Receiving and Release on the day the inmate arrives at RJDCF. 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. Upon completing the PREA Screen, all inmates are then seen by medical and mental health staff.

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. A review of completed PREA Screenings confirmed that inmates were offered follow up mental health care and if a referral was accepted by the inmate.

Subsection (c):

This section is not applicable, as RJDCF 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).

Subsection (e):

According to the mental health providers, they do not obtain informed consent prior to reporting sexual victimization that occurred in a correctional institution. That is treated the same as a suicide or self-harm risk. If the incident occurred outside of an institutional setting, staff would work with the inmate to report the incident. Mental Health staff are mandated reporters and inform inmates requirements as a mandated reporter. Mental Health staff did not talk about a written release of information. However, 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 sexual misconduct or

	has been sexually assaulted by other inmates or staff. Examples of completed CDCR 128MH Mental Health Referral Chrono and examples of completed CDCR 7552 PREA Authorization for Release of Information were requested to confirm RJDCF's implementation of the policy. However no completed documents were submitted for review. Compliance was determined by completed PREA Screening and CDCR 128-B Classification Chrono. Corrective Action: None
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115.82	Access to emergency medical and mental health services
	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 California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 3. Documents Custody Supervisor Checklist California Correctional Health Care Service Memorandum dated February 22, 2019 regarding the discontinuation of copayments Palomar Health Center public website 4. Interviews Medical and Mental Health Staff Investigator Random Staff Inmates 5. Tour of the Facility

Findings:

Subsection (a) & (b):

According to interviews, when an inmate reports an incident of sexual abuse, the inmate victim is seen by medical staff at RJDCF. If the victim cannot be transported to health services triage area, a nurse will respond to the victim location. RJDCF health services is staffed with a nurse 24/7. Medical staff will address emergent issues and then the patient is transported to Palomar Health Center for sexual assault examination. It is practice that when an inmate reports sexual assault, custody staff consult with sexual assault nurse examiner at Palomar Health Center 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 by health services within 1 to 5 days of return and mental health services within four hours.

DOM Chapter 5, Article 44, Section 54040.8.3 addresses medical services responsibilities at RJDCF. Medical staff on site provide emergency medical care. Medical staff are required to identify injuries and determine if they are urgent or emergent, and provide immediate emergency care.

Custody staff are aware of their first responder responsibilities in terms of inmate safety and separating the alleged victim and abuser, contacting medical and notifying a supervisor. The Custody Supervisor Checklist also reminds custody staff to ensure medical assessment has been initiated and within four hours of return from offsite emergency medical attention, the inmate patient is seen by mental health for a Suicide Risk Evaluation.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.10 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, provide pregnancy services, and refer the inmate to mental health.

Medical staff confirmed that a physician at RJDCF will complete a follow up examination, provide sexually transmitted disease testing and treatment options.

Subsection (d):

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 is 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. Additionally, according the Palomar Health website, patients who receive forensic health services will not receive a bill for those services. Palomar Health has developed community partnerships and receives grant funding to cover costs. Corrective Action: None
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 CDCR California Correctional Health Care Services Health care Department Operations Manual 3. Documents 4. Interviews Medical and Mental Health staff Inmates 5. Tour of the Facility Findings: Subsection (a), (b), & (h): Inmates who have experienced sexual abuse in a confined setting 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 health and medical staff. It further requires mental health to determine level of care. Mental health will make arrangements for follow-up services and continuity of care referrals when patients are transferred or released from custody. According to medical and mental health staff

DOM Chapter 5, Article 44, Section 54040.8.3 outlines medical services responsibilities. Not only is medical responsible for emergent needs, medical also provides follow-up care. Section 54040.7 and 54040.11 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 make arrangements for on-going care. The abuser also 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.

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 in which orders remain open to be reinstated at the receiving facility. This ensures continuity of care. When inmates are nearing release, designated social workers and medical staff arrange for community services, completing referrals and assisting with enrollment processes. Medical and mental health staff describe services consistent with policy and standard 115.83.

Subsection (c):

Medical and mental health staff interviews indicate services are consistent with or better than the community level of care. Given medical staff on site are available to provide emergent care 24/7 and mental health services for victims are available within four hours. Forensic medical examinations and emergency medical care are provided at hospitals serving the community at large.

Subsection (d) & (e):

RJDCF is an all male facility with the ability to house transmale 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.

Subsection (f):

As noted in 115.82 (c), DOM Chapter 5, Article 44, Section 54040.10 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, provide pregnancy services, and refer the inmate to mental health. Medical staff confirmed that a physician at RJDCF will complete a follow up examination, provide sexually transmitted disease testing and treatment options. Subsection (g): As noted in 115.82 (d), inmates receive medical and mental health care at RJDCF 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 is 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. Inmate interviews confirmed they did not have to pay for services. Corrective Action: None
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115.86	Sexual abuse incident reviews
	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 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

PREA investigation file review

IPRC Completed; 4

4. Interviews

Warden

PCM

5. Tour of the Facility

Findings:

Subsection (a):

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.

RJDCF did not indicate in the PAQ the number of incidents of sexual abuse allegations in the past twelve months. According to the investigation tracking sheet, between May 1, 2022 and May 20, 2023, RJDCF had 165 allegations of staff sexual misconduct and inmate-on-inmate sexual assault. Only the 2022 PREA Allegation Log track IPRC dates. Based on tracking documents, it appears the IPRC meet monthly and review both open and closed investigations.

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. However, RJDCF does not consistently follow policy, nor does it follow the requirement to complete reviews within 30 days of the conclusion of the investigation. Based on the the 2022 PREA Allegation Log, of the 74 open investigations, 25% have not been reviewed. Beginning with allegations received in June 2022, most open cases were reviewed at the IPRC meeting convened two months from the date the allegation was received. Depending on when the allegation was received, the allegation may be reviewed just outside the 60 days time frame. Given this is a CDCR standard that exceeds 115.86, this does not render RJDCF non compliant. However, of the 14 closed investigations requiring a review, 2 incidents were not reviewed, 7 were reviewed outside the 30

days, 4 were reviewed but the log did not include close out dates in order to assess timeliness, and 1 was completed within 30 days. In reviewing the log from 2022, the IPRC due dates are scheduled for 90 days after the allegation is received. This date is not consistent with either DOM or the standards.

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 most of the IPRC reviews. The Warden confirmed the institution PREA Review Committee meets to review incidents of sexual abuse. The committee includes the Warden, PCM, medical staff, mental health staff, and the Office of the Inspector General. 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, the Institutional PREA Review Committee (IPRC) - DOM Section 54040.17 and the Subsequent Institutional PREA Review Committee (IPRC) - DOM Section 54040.17 forms includes the considerations from 115.86(d). Additionally, the Warden and PREA Compliance Manager confirmed what factors the team considers during the review, which is consistent to DOM and the standards. Further, completed IPRC forms confirmed the practice.

Subsection (e):

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.

Corrective Action: 115.86 (b) IPRC meetings should convene more frequently than one time per month to ensure incidents are reviewed within 30 days of the conclusion of the investigation. It is recommended that when an investigation of staff misconduct or inmate-on-inmate sexual abuse, the IPRC due date is calculated and tracked, and the PCM ensures the IPRC is scheduled to convene prior to the due date. If the IPRC is not scheduled, a special IPRC should convene.

During corrective action, additional IPRC documentation was submitted. Seven closed investigation files requiring an IPRC were reviewed. The investigations included documentation indicating an initial IPRC and a subsequent IPRC once the investigation was closed. Five of the Seven IPRCs were completed within 30 days of the investigation being completed.

It appears the timeliness of IPRCs have improved during corrective action. RJDCF

	should work towards completing all IPRCs within 30 days of closing the investigation. To ensure compliance, RJDCF should ensure tracking documents are accurate and IPRC is a standing meeting on the monthly calendar to ensure they are being completed within 30 days of closure.
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115.87	Data collection
	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 Survey of Sexual Victimization 2019 and 2021; blank forms CDCR PREA Annual Report - Calendar Year 2021 Investigation File Review 4. Interviews 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 the next day. 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 2021 was submitted for review. 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. 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. 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
	Evidence Reviewed: 1. Pre-Audit Questionnaire 2. Policy and Procedures CDCR Department Operations Manual Chapter 5, Article 44 3. Documents CDCR website CDCR PREA Annual Reports - Calendar Year 2019, 2020, and 2021

4. Interviews

Agency Head

PREA Coordinator

PCM

5. Tour of the Facility

Findings:

Subsection (a):

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, PREA Coordinator, and PREA Compliance Manager confirm compliance with the policy and subsection (a) of this standard.

Subsection (b):

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 years. In a review of the PREA Annual Reports 2019, 2020 and 2021, as posted on the CDCR website, reports contained the agency's progress in addressing sexual abuse with comparative data and corrective action.

Subsection (c):

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 she reviews the annual report but the CDCR Secretary has final approval. PREA Annual Reports 2015 through 2021 are posted on the CDCR public website. All of the reports contain the signature of the CDCR Secretary.

Subsection (d):

Any personal identifying information of staff and inmates would be redacted. However, according to the PREA Coordinator, redactions are not needed to the PREA Annual Report as no personal identifying information is included. The reviewed PREA Annual Reports did not contain redactions or personal identifying information

Corrective Action: None

115.89	Data storage, publication, and destruction
	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 4. Interviews PREA Coordinator 5. Tour of the Facility Findings: Subsection (a): DOM Chapter 5, Article 44, Section 54040.21 further 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 and tracking logs, do not contain personal identifying information. Subsection (b): 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. Subsection (c): 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. Subsection (d): 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. Corrective Action: None
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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 CDCR Department Operations Manual Chapter 5, Article 44 3. Documents CDCR Public Website Audit Schedule 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 1. According to the CDCR public website, RJDCF was previously audited in 2020 and 2017. Subsection (h): During the onsite phase, the audit team had access to all areas of the institution. A comprehensive tour was completed of areas inside and outside of the fence. Due to

	the size and layout of RJDCF, during the tour, the audit team split into two teams with CDCR staff from headquarters and RJDCF. CDCR Staff were accommodating of all requests during the tour and answered questions to assist in better understanding the layout and practices of RJDCF Subsection (i): Additional documentation was requested while on site and during the post audit. Much of the requested documentation was received, however, at the issuance of the interim report, not all documentation has been submitted by RJDCF. The auditor believes the documentation or similar documentation exists to further show compliance, nonetheless, it is possible the documentation does not. Further documentation to strengthen compliance or non-compliance determination is addressed under each individual standard. Subsection (m): RJDCF 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): On April 5, 2023 audit notices were emailed to the PREA Compliance Manager for posting six weeks prior to the start of the on-site audit, April 10, 2023. On May 2, 2023, the PREA Compliance Manager emailed photos of the audit notice posted on various housing units 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. Four letters were received during the pre-audit phase and 5 letters was received during post-audit. Envelopes were marked either "confidential" or "legal mail". Corrective Action: None
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115.403	Audit contents and findings
	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 (f): In review of the CDCR Public Website, PREA Audit reports are available for audits completed in 2016 through 2022. 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 Final PREA Reports" and remain accessible on the public website. Corrective Action: None
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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
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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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
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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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
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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
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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
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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
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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
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	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.)	na
	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?	no
	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?	no
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	no
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?	no
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?	no
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?	no
	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.)	no
	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?	no
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?	no

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	no
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	no

	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?	no
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	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?	no
	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?	no
	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?	no
	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?	no
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.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	no
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.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	no
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	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