

PREA Facility Audit Report: Final

Name of Facility: Sierra Conservation Center and Fire Camps Complex

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/08/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Amy J. Fairbanks	Date of Signature: 06/08/2025

AUDITOR INFORMATION	
Auditor name:	Fairbanks, Amy
Email:	fairbaa@comcast.net
Start Date of On-Site Audit:	01/27/2025
End Date of On-Site Audit:	05/02/2025

FACILITY INFORMATION	
Facility name:	Sierra Conservation Center and Fire Camps Complex
Facility physical address:	5100 O'Byrnes Ferry Road, Jamestown, California - 95327
Facility mailing address:	

Primary Contact

Name:	Traci Harrington
Email Address:	Traci.Harrington@cdcr.ca.gov
Telephone Number:	209-984-5291 ext 526

Warden/Jail Administrator/Sheriff/Director	
Name:	Joshua Prudel
Email Address:	Joshua.Prudhel@cdcr.ca.gov
Telephone Number:	209-984-5291 ext 542

Facility PREA Compliance Manager	
Name:	Traci Harrington
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Name:	Keith Petrey
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Telephone Number:	831-678-5560
Name:	Armando Gonzales
Email Address:	armando.gonzales@cdcr.ca.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Joseph Garland
Email Address:	Joseph.Garland@cdcr.ca.gov
Telephone Number:	209-984-5291 ext 509

Facility Characteristics	
Designed facility capacity:	4972
Current population of facility:	4120
Average daily population for the past 12 months:	4091
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Mens/boys
In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18 to 69
Facility security levels/inmate custody	Level 1, 2, and 3

levels:	
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	1439
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	35

AGENCY INFORMATION

Name of agency:	California Department of Corrections and Rehabilitation
Governing authority or parent agency (if applicable):	
Physical Address:	1940 Birkmont Drive, Rancho Cordova , California - 95742
Mailing Address:	
Telephone number:	2792233818

Agency Chief Executive Officer Information:

Name:	Gena Jones
Email Address:	Gena.Jones@cdcr.ca.gov
Telephone Number:	(279) 223-3719

Agency-Wide PREA Coordinator Information

Name:	Rusty Hickethier	Email Address:	rusty.hickethier@cdcr.ca.gov
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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:

1

- 115.31 - Employee training

Number of standards met:

44

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:	2025-01-27
2. End date of the onsite portion of the audit:	2025-05-02

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	4972
15. Average daily population for the past 12 months:	4091
16. Number of inmate/resident/detainee housing units:	34
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	4133
19. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	27
20. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
21. 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:	1
22. 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:	32
23. 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:	61
24. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	5

<p>25. 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:</p>	<p>2</p>
<p>26. 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:</p>	<p>1</p>
<p>27. 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:</p>	<p>4</p>
<p>28. 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:</p>	<p>0</p>
<p>29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>Numbers in SCC and all Fire Camps visited.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>30. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>1439</p>
<p>31. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>35</p>

<p>32. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>70</p>
<p>33. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>49</p>
<p>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Inmates were interviewed from all operations at the Sierra Conservation Camp and all Conservation Camps.</p>
<p>37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

38. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	33
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	4
41. 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:	2
42. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1

43. 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:	6
44. 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
45. 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:	1
46. 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:	2
47. 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:	1
48. 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

<p>49. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>I reviewed the complete investigation packets which noted how the inmates were separated; they were not placed in segregation pending an allegation.</p>
<p>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>51. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>44</p>

<p>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>If "Other," describe:</p>	<p>Gender, race ethnicity and ability to speak multiple languages was considered when selecting security staff for interviews.</p>
<p>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>36</p>
<p>56. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
58. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
59. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Training Coordinator, disciplinary staff, Grievance Coordinator, Volunteer Coordinator, Mailroom Supervisor, food service staff, industry staff, maintenance staff, commissary staff, laundry staff, warehouse staff and ecology staff.
61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
61. Enter the total number of VOLUNTEERS who were interviewed:	2
61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
62. Enter the total number of CONTRACTORS who were interviewed:	3

<p>62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input checked="" type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
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<p>63. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>No text provided.</p>
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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.

<p>64. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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Was the site review an active, inquiring process that included the following:

<p>65. 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)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>66. 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)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>68. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>70. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>

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.

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	9	0	9	0
Staff-on-inmate sexual abuse	5	0	0	0
Total	14	0	0	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	1	0	1	0
Staff-on-inmate sexual harassment	3	0	3	0
Total	4	0	0	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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	1	6	2
Staff-on-inmate sexual abuse	0	1	5	0
Total	0	2	11	2

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.

76. 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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	1	0
Staff-on-inmate sexual harassment	0	0	3	0
Total	0	0	4	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

14

<p>79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>9</p>
<p>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>5</p>
<p>84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>4</p>
<p>87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>41</p>
<p>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
92. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
93. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
95. 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.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

96. 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

AUDITING ARRANGEMENTS AND COMPENSATION

97. 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

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.1 PREA Policy · Title 15 3401.5 Staff Sexual Misconduct · Organization Chart · Position Duty Statement – PREA Coordinator · Interview with the PREA Coordinator · Interview with the PREA Compliance Manager (PCM) · Observations during the audit · Frequently Asked Questions - FAQ

The following policy excerpts demonstrate the facility's commitment to the requirements of zero tolerance for sexual abuse and harassment as well as an outline for preventing, detecting, and responding to allegations of sexual harassment and abuse.

54040.1 Policy The California Department of Corrections and Rehabilitation (CDCR) is committed to providing a safe, humane, secure environment, free from inmate on inmate sexual violence, staff sexual misconduct, and sexual harassment. This will be accomplished by maintaining a program to address education/prevention, detection, response, investigation, and tracking of these behaviors and to address successful community re-entry of the inmate. CDCR shall maintain a zero tolerance for sexual violence, staff sexual misconduct and sexual harassment in its institutions, community correctional facilities, conservation camps, and for all inmates under its jurisdiction. All sexual violence, staff sexual misconduct, and sexual harassment is strictly prohibited. This policy applies to all inmates and persons employed by the CDCR, including volunteers and independent contractors assigned to an institution, community correctional facility, conservation camp, or parole. Retaliatory measures against employees or inmates who report incidents of sexual violence, staff sexual misconduct or sexual harassment as well as retaliatory measures against those who cooperate with investigations shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. Retaliatory measures include, but are not limited to, coercion, threats of punishment, or any other activities intended to discourage or prevent a staff or inmates from reporting the incident(s) or cooperating with investigation of an incident(s).

54040.2 Purpose The purpose of this policy is to ensure compliance with Public Law 108-79, the Prison Rape Elimination Act of 2003 (PREA), California Assembly Bill 550 (Chapter 303, Statutes of 2005), the Sexual Abuse in Detention Elimination Act, and 28 Code of Federal Regulations, Part 115, National Standards to Prevent, Detect, and Respond to Prison Rape. It will provide guidelines for the prevention, detection, response, investigation, and tracking of sexual violence, staff sexual misconduct and sexual harassment against CDCR inmates. A further purpose of this policy is to provide guidelines for the successful community re-entry of inmates. Lastly, this policy informs staff of their responsibility and liability as specified in the law.

3401.5. Staff Sexual Misconduct. (a) For the purposes of this section, staff sexual misconduct means any sexual behavior by a departmental employee, volunteer, agent or individual working on behalf of the Department of Corrections and Rehabilitation, which involves or is directed toward an inmate or parolee. The legal concept of "consent" does not exist between departmental staff and inmates/parolees; any sexual behavior between them constitutes sexual misconduct and shall subject the employee to disciplinary action and/or to prosecution under the law. Sexual misconduct includes, but is not limited to: (1) Influencing or offering to influence an inmate's/parolee's safety, custody, housing, privileges, parole conditions or programming, or offering goods or services, in exchange for sexual favors; or (2) Threatening an inmate's/parolee's safety, custody, housing, privileges, work detail, parole conditions or programming because the inmate/parolee has refused to engage in sexual behavior; or (3) Engaging in sexual act(s) or contact, including: (A) Sexual

intercourse; or (B) Sodomy; or (C) Oral Copulation; or (D) Penetration of genital or anal openings by a foreign object, substance, instrument or device for the purpose of sexual arousal, gratification, or manipulation; or (E) Rubbing or touching of the breasts or sexual organs of another or of oneself, in the presence of and with knowledge of another, for the purpose of sexual arousal, gratification, or manipulation; or (F) Invasion of privacy, beyond that reasonably necessary to maintain safety and security; or disrespectful, unduly familiar, or sexually threatening comments directed to, or within the hearing of, an inmate/parolee. (4) Display by staff, in the presence of an inmate, of the staff person's uncovered genitalia, buttocks, or breast; (5) Voyeurism by a staff person including volunteers or independent contractors. Voyeurism is defined as an invasion of privacy of an inmate by staff for reasons unrelated to official duties. (b) Penalties. All allegations of staff sexual misconduct shall be subject to investigation, which may lead to disciplinary action and/or criminal prosecution. (c) Reporting Requirements. Any employee who observes, or who receives information from any source concerning staff sexual misconduct, shall immediately report the information or incident directly to the hiring authority, unit supervisor, or highest-ranking official on duty. Failure to accurately and promptly report any incident, information or facts which would lead a reasonable person to believe sexual misconduct has occurred may subject the employee who failed to report it to disciplinary action. (d) Confidentiality. Alleged victims who report criminal staff sexual misconduct falling into one of the Penal Code section set forth in Government Code Section 6254(1)(2) shall be advised that their identity may be kept confidential pursuant to Penal Code Section 293.5, upon their request. (e) Retaliation Against Employees. Retaliatory measures against employees who report incidents of staff sexual misconduct shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. Such retaliatory measures include, but are not limited to, unwarranted denials of promotions, merit salary increases, training opportunities, or requested transfers; involuntary transfer to another location/position as a means of punishment; or unsubstantiated poor performance reports. (f) Retaliation Against Inmates/Parolees. Retaliatory measures against inmates/parolees who report incidents of staff sexual misconduct shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. Such retaliatory measures include, but are not limited to, coercion, threats of punishment, or any other activities intended to discourage or prevent an inmate/parolee from reporting sexual misconduct. (g) Protection Measures. Multiple protection measures shall be considered to protect inmate victims who report staff sexual misconduct or cooperate with staff sexual misconduct investigations including but not limited to housing changes or transfers for inmate victims, removal of alleged staff from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting staff sexual misconduct or sexual harassment or for cooperating with investigations.

DOM 64040.15 Disciplinary Process

54040.15 Disciplinary Process Upon completion of the investigative process, the existing disciplinary process, which includes referral for criminal prosecution and classification determinations, shall be followed. If the allegation of sexual violence warrants a disciplinary/criminal charge, a CDCR Form 115, Rules Violation Report

shall be initiated. The inmate who is charged will be entitled to all provisions of CCR Section 3320 regarding hearing procedures and time limitations and CCR Section 3316, Referral for Criminal Prosecution.

Evidence reviewed/analyzed by provision:

(a) Four policies (DOMs) and administrative regulations (Title 15) all emphasize various aspects of how the agency is committed to ensuring prevention, detection and response to any sexual abuse or sexual harassment towards the inmate population.

(b) The organization chart reflects that the PREA Coordinator reports to the Correctional Administrator, DOC, who reports to the Facility Operations Deputy Director to the Director of Adult Institutions to the Undersecretary to the Secretary. The Duty Statement for the PREA Coordinator has the following General Statement: Under the direct supervision of the Correctional Administrator, the Captain is responsible for providing a safe, humane, secure environment, free from sexual misconduct in California State Prisons. This will be accomplished by maintaining a program to address education/prevention, detection, response, investigation, and tracking of sexual misconduct and to address successful community re-entry of the victim. The Captain will act as lead within the Female Inmate Programs and Services/ Special Housing Mission in ensuring compliance with Public Law 108-79, the Prison Rape Elimination Act (PREA), the Sexual Abuse in Detention Elimination Act (AB 550), the federal PREA Standards and the Departmental policies and procedures. The Captain will serve as the California Department of Corrections (CDCR) statewide Prison Rape Elimination Act (PREA) Coordinator. This position will direct institutional inquiries regarding interpretation of policy back to the hiring authority within the institutions. The interview with the PREA Coordinator and all interactions with him pertaining to this audit led the auditor to conclude that he does have the time and authority to manage his PREA related duties. His office has seven staff, three full-time and four part-time. He has recently completed PREA auditor certification. This operation conducts consortium audits and therefore conducts audits in other states. This further enhances the staff experience and talent in the development and maintenance of policies and systems to ensure compliance with PREA in his state.

(c) The PAQ indicates that the PREA Compliance Manager is an Associate Warden who reports to the Chief Deputy Warden. During her interview, the following was determined: She is the rank of Captain. She has access to all areas of the facility as was demonstrated during the onsite tour of the operation. The auditor observed interactions with staff that the auditor concluded to be a regular ongoing process. The PCM indicated she keeps lines of communication open with all staff regarding PREA compliance and expectations. When an issue of compliance is identified, she and the appropriate staff meet to ensure expectations are communicated and appropriate documentation is developed. She participates in the weekly administrative meetings in which all administrative managers are present, including the conservation camp administrators either in person or by computerized video meetings. The auditor was present for this meeting on the first day of the onsite audit. Additionally, PCM indicated that she conducts weekly video meetings with all supervisors for the

	<p>conservation camps (Mt. Bullion, Vallecito, Pine Grove, Growlersberg, Washington Ridge, Ben Lomand, Gabilan, Miramonte, Mountain Home, Owens Valley, Fenner Canyon, Francisquito, Acton, Holton, Julius Klein, Prado, Oak Glen, Bautista, La Cima, Delta, Konocti, Parlin Fork, Eel River, Alder, Deadwood, Trinity River, Sugar Pine, Intermountain, Antelope, Ishi, and Salt Creek) to update them on any relevant matters regarding PREA.</p> <p>Summary of evidence to support findings: Policies in the form of Title 15 (enforced as a law) and the Director Office Memorandums (enforced as policy) provide ample, detailed information on how the agency is complying with the requirements of PREA. Interviews with the PREA Coordinator, PCM and overall observations throughout this audit demonstrated to the auditor the agency’s commitment to ensuring prevention, detection and response to sexual abuse and sexual harassment towards inmates. It will be further demonstrated throughout this report. The auditor believes that both the PREA Coordinator and PCM have the authority and influence to ensure continuing efforts toward compliance and ultimately prevention of sexual harassment and sexual abuse as clarified in the FAQ issued December 2015. The auditor finds the facility compliant with the standard provisions.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Interview with the agency contract monitor · Interview with the PREA Coordinator · Review of contracts - Mental Health Systems, Custody to Community Transitional Reentry Program, Volunteer/Contractor acknowledgement, Career Technical Education, Teachers, Epidaurus DBA Amity Foundation, Saint John’s Program for Real Change, Westcare California, Los Angeles Centers for Alcohol and Drug Abuse, WestCare California, Inc. Healthright 360; Corecivic, Inc; Tri County Treatment; Turning Point of Central California, Inc.; and Geo Reentry, Inc. · Boilerplate Language in contracts · PAQ <p>The PAQ confirms that the number of contracts for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies since the last PREA audit is thirteen (13). All contracts required the contractors to adopt and comply with PREA standards zero contracts that did not</p>

require the agency to monitor contractor's compliance with PREA standards.

Evidence reviewed/analyzed by provision:

(a) (b) Boilerplate language all contracts: Prison Rape Elimination Policy CDCR maintains a zero tolerance for sexual misconduct in its institutions, community correctional facilities, conservation camps and for all inmates under its jurisdiction. All sexual misconduct is strictly prohibited. CDCR is committed to providing a safe, humane, secure environment, free from sexual misconduct. This will be accomplished by maintaining a program to ensure education/prevention, detection, response, investigation and tracking of sexual misconduct and to address successful community re-entry of the victim. All Contractors and their employees are expected to ensure compliance with this policy as described in Department Operations Manual, Chapter 5, Article 44. If you are providing services for the confinement of our inmates, you and your staff are required to adopt and comply with the PREA standards, 28 Code of Federal Regulations (CFR) Part 115 and with CDCR's Department Operations Manual, Chapter 5, Article 44, including updates to this policy. This will include CDCR staff and outside audit personnel (who also conduct PREA audits of state prisons) conducting audits to ensure compliance with the standards. As a Contractor with CDCR, you shall not assign an employee to a CDCR facility or assign an employee to duties if that employee will have contact with CDCR inmates, if that employee has 1) 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); 2) been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or 3) has been civilly or administratively adjudicated to have engaged in the activity described in this section. The Contractor shall conduct a criminal background records check for each contract employee who will have contact with CDCR inmates and retain the results for audit purposes. By signing this contract the Contractor agrees to ensure that all of the mandates of this Section 5: Prison Rape Elimination Policy are complied with. Material omissions, by the contract employee, regarding such misconduct or the provision of materially false information, shall be grounds for removal from institutional grounds. Contract employees, who have contact with inmates, shall be provided training via the Exhibit titled; "Prison Rape Elimination Policy, Volunteer/Contractor Informational Sheet" to learn their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. A copy of this signed informational sheet will be provided to the institution before a contract employee may have contact with inmates. Any contract employee who appears to have engaged in sexual misconduct of an inmate shall be prohibited from contact with inmates and shall be subject to administrative and/or criminal investigation. Referrals shall be made to the District Attorney unless the activity was clearly not criminal. Reportable information shall be sent to relevant licensing bodies.

The auditor reviewed all current contracts and confirmed that the standard language as indicated is in each contract. The interview with the Contract Monitor confirmed that this requirement is standard for current and new contracts. A monitoring tool is utilized to ensure contracts comply with PREA regulations. All contractual operations

	<p>have recently or are scheduled for PREA audits as verified with the PREA Coordinator.</p> <p>Summary of evidence to support findings: Review of all contracts, contractual boilerplate language requiring compliance with PREA, interview with the PREA Coordinator and agency contract monitoring all provided sufficient evidence to support the finding of compliance.</p>
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.18 Institutional Staffing Plan · DOM 54040.17 Annual Review of Staffing Plan · DOM 54040.4 Security Rounds · Prison Rape Elimination Act (PREA) Annual Data Collection Tool and Staffing Plan Review · Staff Codes for Staff Vacancies · Staff Training Curriculum · Interview with the Director of Adult Institutions · Interview with Warden · Interview with the PREA Coordinator · Interview with the PCM · Interview with the staff who monitor staffing · Interviews with supervisors formal and informal · Interviews with random staff - correctional officers · Documentation of unannounced rounds (12/11/2024 3:00pm; 12/11/2024 4:30pm; 12/11/2024 1:03pm; 12/13/2024 10:15am; 12/9/2024 10:30pm; 11/23/2024 11:00pm; 0/22/2024 6:30am; 8/26/2024 5:50pm, 10/16/2024 12:05pm; 10/11/2024 8:00am; 10/3/2024 7:12 am; 8/24/2024 5:0am; 8/28/2024 4:25pm; 9/28/2024 1:13pm;

- Observations of staffing levels during the tour

- PAQ

The PAQ indicates that the average daily population since the last PREA audit 4901. However, the staffing plan is predicated on an inmate population of 5930 the facility capacity. The facility reports there have been no deviations. This incorporates thirty-one (31) conservation camps (Mt. Bullion, Vallecito, Pine Grove, Growlersberg, Washington Ridge, Ben Lomand, Gabilan, Miramonte, Mountain Home, Owens Valley, Fenner Canyon, Francisquito, Acton, Holton, Julius Klein, Prado, Oak Glen, Bautista, La Cima, Delta, Konocti, Parlin Fork, Eel River, Alder, Deadwood, Trinity River, Sugar Pine, Intermountain, Antelope, Ishi, and Salt Creek) into the plan.

The following policy excerpt supports compliance with the requirements of this standard:

DOM 54040.18 Institutional Staffing Plan states, CDCR shall ensure that each facility it operates develops, documents and makes its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors. In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the staffing plan through the Telestaff Program and Daily Activities Report. The Watch Commander is responsible for reporting and justifying all deviations from the approved staffing plan.

54040.17.1 Annual Review of Staffing Plan Whenever necessary, but no less frequently than once each year, in consultation with the PREA Coordinator, the institutional PCM and the Program Support Unit shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources assigned to ensure adherence to the staffing plan.

Evidence reviewed/analyzed by provision:

(a) As indicated, policy addresses the requirements. The interview with the Warden and PCM indicated the following:

(1) The Warden confirmed that the facility operates on generally accepted detention and correctional practices, per the DOMs. The auditor agreed with this conclusion

based on overall observations during the audit,

(2) The Warden and PCM confirmed that there are no judicial findings of inadequacy;

(3) There are no findings of inadequacy from Federal investigative agencies as confirmed by the Warden, PCM and annual staffing analysis.

(4) There are no findings of inadequacy from internal or external oversight bodies as confirmed by the Warden, PCM and annual staffing analysis.

(5) All components of the facility's physical plant are reviewed. This was also assessed by the auditor during the onsite audit. Video monitoring is used; specific information regarding placement of cameras was reviewed during the audit.

(6) The composition of the resident population has been analyzed by the facility. The main mission of the facility is to screen and initiate training for inmate fire fighters. One other operation confines medium to high security inmates.

(7) The number and placement of supervisory staff has been reviewed and determined to be adequate. Review of rounds and staffing occur regularly. The annual review states the facility has a minimum number of security supervisors on day shift, on evening shift and on the midnight shift. The security supervisors are required and routinely conduct unannounced checks in all areas of the facility to deter sexual abuse and sexual misconduct.

(8) Institution programs occurring on a particular shift have an evaluation of the time and days of the programs occurring. The staffing analysis notes that programming is scheduled on day and evening shifts and is supervised by program staff and supervised by security staff. Programs offered include the following: Prison Industry Authority Vocational Programs Academic Classes Self-Help Programs (i.e., Narcotics Anonymous, Alcoholics Anonymous, Celebrate Recovery) Parenting and Responsible Fatherhood Career Development, New Professionals Arts and Healing through music The auditor observed programming during the tour of the facility and noted the camera monitoring and security staff in the areas.

(9) Any applicable State or local laws, regulations, or standards are reviewed.

(10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse are addressed. This is additionally analyzed in the Annual Report. It was concluded that the review of PREA allegations did not warrant any changes to staffing.

(11) Other relevant factors include an assessment of the PREA training provided to staff annually.

(b) The PAQ indicates that the facility does not deviate from the staffing plan. The interview with the staff designated to monitor staffing (three total) confirmed to the auditor that this review of staffing needs is occurring continually, analyzing schedules, vacancies, use of overtime and insurance of all designed posts filled.

(c) The auditor reviewed the Prison Rape Elimination Act (PREA) Annual Data

	<p>Collection Tool and Staffing Plan Review January 2024 provided with the PAQ. It notes that it involved the PCM and the Warden. It addresses all the questions noted in provision (a). It notes a review by the PREA Coordinator.</p> <p>(d) Staff In-Service Training module addresses the following: Security Rounds A custody supervisor assigned to each facility or unit shall conduct weekly unscheduled security checks on all watches, to identify and deter sexual violence, staff sexual misconduct, and sexual harassment of any kind. These security checks shall be documented in the unit logbook in red pen. The unit logbook shall indicate the date, time, and location the security check was conducted. The auditor interviewed three lieutenants, one from SCC and two from conservation camps who confirmed the requirement that they conduct an unannounced round monthly, coming into the facility when not scheduled on the night shift to ensure an unannounced security audit is conducted. The auditor randomly asked correctional officers, seven total, if they see the supervisor making rounds, if they were aware the supervisor was making rounds and if they inform other staff that the supervisor is making rounds. All indicated they see the supervisors, they are not informed, they are not informing other staff.</p> <p>Summary of evidence to support findings: Policy (DOMs), training curriculum, annual staffing analysis all supports compliance with all provisions of the standard. Interviews with the Warden, PCM, three supervisors, staff who review compliance with staff requirements and randomly asked correctional officers all confirmed compliance. Documentation provided with the PAQ and the training curriculum provide additional evidence of compliance. Based on this accumulation of evidence, in addition to observations, the auditor finds the facility compliant with all requirements of the standard provisions.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Interview with the PREA Coordinator · Interview with Warden · PAQ <p>The PAQ indicates that the agency/facility does not house any inmates below the age of eighteen years.</p> <p>Evidence reviewed/analyzed by provision:</p>

	<p>(a)(b)(c) The interview with Warden confirmed that the agency does not house inmates below the age of 18 years old. The PAQ indicates this. This was closely reviewed at the Pine Grove Conservation camp which indicates it is a camp for youthful inmates. Two inmates were interviewed and asked their age, they confirmed they were 18 years old or older and were not housed at the camp when under the age of 18.</p> <p>Summary of evidence to support the findings: The auditor finds the facility not applicable - compliant with the standard provisions.</p>
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115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.5 Searches · DOM 54040.16 Unclothed Body Search on Inmates · DOM 54040.16.7 Unclothed Body Searches of Transgender or Intersex Inmates · DOM 54040.4 Preventative Measures · Memo: Use of scanner same gender · Memo- overview of Senate Bill 132 Training · CDCR Training Module: Working Successfully with Transgender, Intersex, and non-binary Inmates · Transgender Memo · Training Module Overview of Senate Bill 132 · Interviews with Warden · Interview with the PREA Coordinator · Interviews with random staff (males and females) · Observations of living areas · Observations of strip search areas · Review of video monitoring

- Demonstration of an inmate intake search process
- Review of camera monitoring - inmate worker strip search area
- Random review of logbook entries - "Gender Announcement"
- PAQ
- FAQ

The PAQ indicates that there has been no cross-gender strip or cross-gender visual body cavity searches of inmates, no cross-gender strip or cross-gender visual body cavity searches of inmates. The PAQ indicates that 99% of all security staff received training on conducting cross-gender pat-down and searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

The following policy excerpts supports compliance with the requirements of this standard:

DOM 54040.5 Searches states, Searches Institutions shall document all cross-gender strip searches and cross-gender visual body cavity searches in accordance with DOM Section 52050.16.5, and shall document all cross-gender pat-down searches of female inmates in accordance with DOM Section 52050.16.4 utilizing the Notice of Unusual Occurrence (NOU). Completed NOU forms shall be reviewed by the supervisor and routed to the institutional PCM to retain for audit purposes. If the search is incidental to an emergency or crime that constitutes a CDCR Form 837, Crime Incident Report, the search shall also be documented within the incident report.

DOM 54040.16 Unclothed Body Search on Inmates

- Correctional personnel, other than qualified medical staff, shall not conduct unclothed body inspections or searches of an inmate of the opposite sex, except in an emergency. etc.).

- Routine unclothed body searches shall be conducted in a safe manner and in an area that allows the inmate to preserve some measure of dignity and self-respect. Routine unclothed body searches shall not be completed by staff of the opposite biological sex.

- Unclothed body searches of inmates by staff of the opposite biological sex shall only be conducted in emergency situations. If a cross gender unclothed body search is required, the search shall be documented. This documentation shall be completed utilizing a Notice of Unusual Occurrence which shall be reviewed by the supervisor and routed to the institutional PCM. The PCM shall retain the completed document, in accordance with the Records Retention Schedule, for audit purposes.

DOM 54040.16.7 Unclothed Body Searches of Transgender or Intersex Inmates states, In the event that there is an individual going through Receiving and Release

(R&R) who self-identifies as transgender or self-identifies with a gender that seems not to match their biological sex, the search will be conducted by staff of the same biological sex as the inmate to be searched. In the event that an individual's genital status is ambiguous, the search shall be conducted by a staff member that is the same biological sex as indicated in the inmate's records. (i.e., paperwork indicates male, inmate will be searched by a male staff member). If staff are unable to determine the genital status through medical records or an interview with the inmate, the inmate shall be placed on single-cell status or in administrative segregation for his/her safety, until the standard intake medical evaluation is completed. This standard medical examination will establish the genital status of the inmate. Once the information is collected and documented on the CDCR Form 128-C3, the Institution Classification Committee should determine appropriate classification and housing placement.

DOM 54040.4 Preventative Measures states, Each institution shall enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite biological sex viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Except in circumstances where there would be an impact to safety and security, modesty screens shall be placed strategically in areas that prevent incidental viewing. Per 28 CFR, Standard §115.42, upon request, transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. In order to minimize cross gender exposure, staff of the opposite biological sex shall announce their presence when entering the housing unit. This announcement is required at the beginning of each shift and/or when the status quo within the housing unit changes. This policy shall be included in each institution's orientation handbook. This will allow the inmate to take into consideration that staff of the opposite gender may be present when performing bodily and bathing functions.

Evidence reviewed/analyzed by provision:

(a) (c) Policy supports that the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches. The PAQ indicates this has not occurred. During informal conversations, the auditor found it credible that this had not occurred. Policy supports that a Notice of Unusual Occurrence (NOU) form will be completed.

(b) This facility does not house female inmates.

(d) Policy requires that there are procedures that enable 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. Such policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit. During the tour, the auditor observed covers by the showers, dividers for the toilets and dividers for the urinals. Each conservation camp operation has a different physical plant. Few have female staff. The auditor confirmed during random inmate interviews that only one out of eighty-two (82) inmates interviewed indicated

he does not hear the announcement. Each conservation camp operation has a different physical plant. Few have female staff. Inmates at the camps were questioned about the lack of female staff but indicated to the auditor that if during a rare event like the PREA audit they are confident they will be notified of a female presence at the camp. At two conservation camps, the bathroom shower area did allow a female staff to view buttocks or genitalia. However, no females worked at this operation as confirmed to the auditor by inmates, staff and observations. The PREA Coordinator provided information on how to provide additional barriers to the supervisors at the camp. However, at the time of the audit, it was not considered non-compliant due to no females working at this operation.

The auditor reviewed security monitoring at all operations. Specifically, she was asked by an inmate to review the camera monitoring in the vicinity of the outdoor strip search area for inmate workers in the programming areas. Review confirmed that the camera was appropriately placed and did not reveal to anyone watching any buttocks or genitalia of the inmates being searched.

(e) Policy and the training module, Working Successfully with Transgender, Intersex, and Non-binary Inmates reinforce and demonstrate compliance ensuring that the facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. Policy addresses the process for this at the intake operation. It requires CDCR, for an individual who is transgender, non-binary, or intersex, to search them consistent with their gender identity or gender designation of the facility where they are housed, based on approved search preference. This demonstrates compliance with the FAQ clarifications issued/revised October 2023.

(f) CDCR Training Module: Working Successfully with Transgender, Intersex, and Non-binary Inmates addresses definitions, transgender victims of violence, professional communication, PREA risk assessment and re-assessments, Body Searches. It reinforces the standards: Do not conduct unclothed searches for the sole purpose of determining an inmate's genital status. If genital status is unknown or ambiguous, a staff of the same gender as indicated in the inmate's records will search the inmate. The institution is permitted to determine an inmate's 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. Transgender women housed in male prisons will require the lower body to be searched the same as all male inmates. However, search the upper body utilizing the back of the hand, as you would with a female inmate. Male or female staff can conduct clothed body searches of transgender women housed in a male prison. Only female staff shall search transgender women housed in a female prison. Clothed body searches of transgender women at a male institution:

- Utilize the alternate search method if the inmate has been designated as transgender in SOMS and is requesting to be searched differently. Searches of

transgender inmates is outlined in DOM, Section 52050.16.7.

- Can be conducted by male or female staff
- Shall be completed utilizing the back of the hand to search the upper body/ chest/breast area.

Training Module Overview of Senate Bill 132 reviews the requirements of this bill, The Transgender Respect, Agency, and Dignity Act. It requires the following: transgender woman housed at a male facility may submit a request to be searched by a female staff member. The request will be provided to the PREA Compliance Manager (PCM) for review, Chief Deputy Warden (CDW) for approval, and will be notated on their Transgender Access Card and on a CDCR 128B approved and signed by the CDW. It provides an Inmate Search Preference Request Flow Chart. If an inmate has requested and been approved for a Transgender Access Card noting their search preference, it is the responsibility of the inmate to present that card to staff upon being searched. In the event the inmate's Transgender Access Card has been lost, confiscated, etc., staff may also verify in ERMS via the CDCR Form 128B, which is signed by the CDW approving the inmates search preference. If there is no documentation noting the inmate's search preference or the search is being conducted under emergency circumstances, staff shall conduct the search consistent with the gender designation of the facility. If an inmate has requested and been approved for a Transgender Access Card noting their search preference, it is the responsibility of the inmate to present that card to staff upon being searched. In the event the inmate's Transgender Access Card has been lost, confiscated, etc., staff may also verify in ERMS via the CDCR Form 128B, which is signed by the CDW approving the inmates search preference. If there is no documentation noting the inmate's search preference or the search is being conducted under emergency circumstances, staff shall conduct the search consistent with the gender designation of the facility. Specific techniques for how to conduct the search for males and females is reviewed.

In accordance with FAQ clarifications, policy was updated to allow a transgender/ intersex incarcerated individual to designate the gender of the staff to pat search in accordance with the inmates preferred gender. Interviews all confirmed that they have been appropriately trained regarding how to search transgender/intersex persons and cross-gender pat searches.

All interviews with security staff confirmed they have received training on how to pat search both males and females in accordance with the Senate Bill 132.

Summary of evidence to support findings: As illustrated, policy, Senate Bill 132, training curriculum, responses to random inmate interviews and random staff interviews, observations during the tour, review of security monitoring all provided ample evidence for the auditor to support a finding of compliance with all provisions of the standard and the applicable FAQ.

115.16

Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

- DOM 54040.4 Education and Prevention
- DOM 54040.12 Investigation
- I Speak, Language Identification Guide
- Contract Focus Language International Inc. and Interpreters Unlimited, Inc.
- Memo Division of Adult Institutions
- CDCR Disability Code Definitions
- Observations during the tour, PREA information
- Interview with the Director of Adult Institutions
- Random staff interviews
- Interview with staff who conduct intake
- Random inmate interviews - disabled or LEP
- Testing of interpretation services availability
- PAQ

The PAQ indicates that the number of instances where incarcerated individual interpreters, readers, or other types of incarcerated individual assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under §115.64, or the investigation of the resident's allegations is zero.

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.4 Education and Prevention states, *Appropriate provisions shall be made to ensure effective communication for inmates not fluent in English, those with low literacy levels, and those with disabilities.*

Memo Division of Adult Institutions states, *Inmates with disabilities and inmates who are limited English proficient. In order to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts*

to prevent, detect, and respond to sexual abuse and sexual harassment, CDCR provides reasonable modification or accommodation to inmates with physical or communicational disabilities pursuant to the Americans with Disabilities Act. Appropriate provisions are made to ensure effective communication for inmates not fluent in English, those with low literacy levels, and persons with disabilities. Institutions may consider the use of inmate peer educators to enhance the inmate population's knowledge and understanding of PREA and sexually transmitted diseases. For example, in instances where an inmate's Test of Adult Basic Education (TABE) score is 4.0 or lower, employees are required to query the inmate to determine whether or not assistance is needed to achieve effective communication. The employee is required to document on appropriate CDCR forms his/her determination of whether the inmate appeared to understand, the basis for that determination and how it was made. For instances involving due process, employees give priority to the inmate's primary means of communication, which may include but is not limited to; auxiliary communication aids, sign language interpreter, and bilingual interpreter.

DOM 54040.12 Investigation states, *Except in limited circumstances or exigent circumstances, investigators shall not rely solely on inmate interpreters, readers, or other types of inmate assistance during a sexual violence, staff sexual misconduct, or sexual harassment investigation.*

DOM 54040.7 Detection, Notification and Reporting also states, *The Department shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties, or the investigation of the inmate's allegations.*

Evidence reviewed/analyzed by provision:

(a) The agency provides screening for intellectual, psychiatric or speech disabilities. Inmates with those needs are placed at specialized facilities to accommodate them. During the site audit, the auditor found no inmate that may have been inappropriately placed at this operation due to low intellect, psychiatric or speech difficulties or at the conservation camp. Additionally, this was reviewed with each conservation camp supervisor. Due to the mission of the facility, the auditor did not observe any inmates with physical disabilities other than that which required a cane or a walker. Inmates were present who had hearing aids but were not totally deaf. Inmates were present with visual impairments but were able to read literature and posters. All inmates are screened by medical staff upon arrival, in which medical accommodations are screened and appropriate accommodation initiated. The auditor observed the detailed posters regarding PREA and rape crisis counseling in all but one housing unit (corrected during the tour) appropriate place at eye level when seated as they were in the dayrooms. All inmates confirmed they have access to a tablet or will when it is repaired or issued (one week from arrival) which provides detailed information regarding their right to be free from sexual abuse and sexual harassment, how to report allegations, how to reach a victim advocate, and the ability to use the phone from their tablet.

	<p>(b) The auditor interviewed inmates who had limited English speaking skills. All spoke Spanish. Interviews were conducted with the assistance of staff interpreters. The agency maintains a list of certified staff interpreters. In addition to Spanish, the facility has staff certified in Mandarin and Hindi. Additionally, the auditor tested access to the language line services and determined it was accessible. The auditor interviewed the Intake Sergeant who confirmed that language needs are assessed at intake. The "I Speak" poster is readily available to assist. Posters visible throughout the facility (SCC) and all conservation camps had posters in both English and Spanish.</p> <p>(c) The PAQ indicates that no inmate has been used to interpret for another inmate in the previous twelve months. This was also supported by interviews with corrections officers. Corrections officer interviews revealed that they were aware that if there were exigent circumstances, they could use another inmate but would be required to document the reason for this. The auditor found no reason to dispute this.</p> <p>Finding of compliance based on the following: Policies support compliance with the standard. Medical staff and the Intake sergeant assess any disabilities but as articulated, the facility is not designed to house inmates with major disabilities. The maintenance of the language contract and list of bi-lingual staff demonstrates that the agency takes extra measures to ensure that inmates are able to effectively communicate with staff and vice versa. The staff interviews demonstrated that they are aware of the requirements for using an inmate interpreter, only when there are exigent circumstances. Interviews with inmates who have disabilities yielded no concerns. The auditor concluded that there is sufficient evidence to support a finding of compliance.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 31060.3 Power of Appointment · DOM 31060.17 Pre-Employment Documentation · DOM 31070.1 Personnel Identification Cards · Hiring Guide for Managers and Supervisors · Memo: CDCR Background Investigators · Memo Renewal of ID cards by designation

- Memo: Hiring and Promotion Decisions
- Boilerplate language for contractors
- Standard Agreement CDCR and California Department of Forestry and Fire Protection (CAL FIRE)
- Supplemental Application for All CDCR Employees
- Supplemental Application for All CDCR Employees completed for twelve randomly requested staff, two promotional staff and two new hires
- Application Instructions - State of California
- Live Scan Response Form
- Live Scan Response completed for eight randomly requested staff
- Documentation of background check - new employees, status employees, contractual staff,
- Interview with CAL FIRE and LA County firefighters
- Interviews with the Human Resources staff
- Interview with staff who conduct background checks
- Review of personnel files - newly hired, contractor, promotions
- Observations
- PAQ

The PAQ indicates that fifty-one (51) staff have been hired who may have contact with inmates in the previous twelve months, thirty-one (31) contractual staff.

The following policy excerpts supports compliance with the requirements of this standard:

DOM 31060.3 In accordance with 28 Code of Federal Regulations (CFR), part 115, standard 115.17, Hiring Authorities shall not hire or promote anyone whose job duties may put them in contact with inmates, who: (1) Have engaged in sexual abuse of an inmate in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; (2) Have been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Have been civilly or administratively adjudicated to have engaged in the activity described immediately above. Consider substantiated incidents of sexual harassment in all hiring decisions.

HiringGuide for Managers and Supervisors states, *IF: The candidate previously worked at a prison, jail, lockup, community confinement facility, or other institution. THEN:*

Contact all prior institutional employers and ask the following questions: 1. While this individual was employed by your institution or facility, were any allegations of sexual abuse investigated and substantiated against him/her? 2. Did this individual resign from his/her employment with your institution prior to completion of an investigation of sexual abuse allegations?

DOM 31060.17 Pre-Employment Documentation states, *The following records shall be on file in the local personnel/payroll office prior to appointment of an applicant: CI&I SSCH; Live scan; USINS Form I-9; Physical examination report; CDCR Form 1951, Supplemental Application for all CDCR Employees.*

DOM 31070.1 Personnel Identification Cards states, *Local personnel offices shall: (a) Issuance (1) Order, securely store, and issue ID cards. (2) Verify completion of preemployment documentation (i.e., criminal records check, medical examination/health questionnaire, etc.). [See Department Operations Manual (DOM) Subsection 31060.] (3) Maintain the hiring authority's record of issuance and retrieval of ID cards. 165 Operations Manual Department of Corrections and Rehabilitation Chapter 3 (4) Individuals shall complete and sign CDCR Form 894-A, Personnel ID Card Info, for each ID card issued to them. Individuals shall, while on duty and/or while on the grounds of a Department institution/facility, carry their identification cards on their person and produce the card upon request.*

Borders (bold) The title on each ID card has a corresponding colored border as indicated below: (1) Red=Management and confidential employees as defined in the California State Civil Service Pay Scales (2) Green=Temporary (contractors, consultants, casual laborers, non-CDCR) (3) Blue=Supervisory employees as defined in the California State Civil Service Pay Scales (4) Brown=Volunteers (5) Gold=Retirees (6) No Border=Non-Supervisory employees (e) Customized Artwork (bold) The customized artwork for Peace Officers is the 7-point star. Artwork for Non-Peace Officer staff is the CDCR logo.

Standard Agreement CDCR and California Department of Forestry and Fire Protection (CAL FIRE)

Contract Language has the following: Security Clearance/Fingerprinting 1,. 17 (d.) The State reserves the right to conduct fingerprinting and/or security clearance through the Department of Justice, Bureau of Criminal Identification and Information (Bell), prior to award and at any time during the term of the Agreement, in order to permit Contractor and/or Contractor's employee access to State premises. The State further reserves the right to terminate the Agreement should a threat to security be determined.

During the performance of this Agreement, it shall be the responsibility of the Contractor whenever there is an incident of use of force or allegation(s) of employee misconduct associated with and directly impacting inmate and/or parolee rights, to immediately notify CDCR of the incident(s), to cause an investigation to be conducted, and to provide CDCR with all relevant information pertaining to the incident(s). All relevant information includes, but is not limited to: a) investigative reports; b) access to inmates/parolees and the associated staff; c) access to

employee personnel records; d) that information reasonably necessary to assure CDCR that inmates and/or parolees are not or have not been deprived of any legal rights as required by law, regulation, policy and procedures; and e) written evidence that the Contractor has taken such remedial action, in the event of unnecessary or excessive force, or employee misconduct with inmates and/or parolees, as will assure against a repetition of incident(s) or retaliation. To the extent that the information provided by the Contractor fails to so assure CDCR, CDCR may require that any implicated Contractor staff be denied access to and the supervision of CDCR inmates and/or parolees at the facility and access to inmate and/or parolee records.

Notwithstanding the foregoing, and without waiving any obligation of the Contractor, CDCR retains the power to conduct an independent investigation of any incident(s). Furthermore, it is the responsibility of the Contractor to include the foregoing terms within any and all subcontracts, requiring that subcontractor(s) agree to the jurisdiction of CDCR to conduct an investigation of their facility and staff, including review of subcontractor employee personnel records, as a condition of the Agreement.

As a Contractor with CDCR, you shall not assign an employee to a CDCR facility or assign an employee to duties if that employee will have contact with CDCR inmates, if that employee has 1) 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); 2) been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or 3) has been civilly or administratively adjudicated to have engaged in the activity described in this section. The contractor shall conduct a criminal background records check for each contract employee who will have contact with COCR inmates and provide a written certification that it was done and that items (1) and (2) above were not identified on the document. The contractor shall also require contract employees to sign a statement certifying "yes" or "no" to each of the 3 items in the previous paragraph, and provide a written certification that this was done and that each of the 3 answers was "no." Material omissions, by the contract employee, regarding such misconduct or the provision of materially false information, shall be grounds for removal from institutional grounds. Contract employees, who have contact with inmates, shall be provided training to learn their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. (Any contract employee who engages in sexual abuse of an inmate shall be prohibited from contact with inmates and shall be subject to administrative and/or criminal investigation including possible referral to the District Attorney, unless the activity was clearly not criminal, and shall be subject to reporting to relevant licensing bodies.

Memo: Hiring and Promotion Decisions states, CDCR requires all employees who may have contact with inmates to be Live Scanned (fingerprinted) at the time of hire. The Live Scan system notifies the department of any subsequent arrests an employee or contractor, ongoing basis.

Evidence reviewed/analyzed by provision:

(a)(b)(f)(g) The Supplemental Application For all CDCR Employees has a section entitled, Compliance with the Federal Prison Rape Elimination Act in which candidates are required to answer the questions from provision (a) and (b) and specify all information regarding previous correctional institution employers to include any prison, jail, lock-up, community confinement, juvenile facility or other correctional institution/facility regardless of the dates of employment. It additionally requires the candidate to sign, acknowledging the following: 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. The application for the State of California states, I certify under the 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. Therefore, the requirements for this provision are met.

(c)(d) All staff and contractors are LIVE SCAN before allowed into the facility in accordance with policy, random checks for LIVE SCAN documentation and interview with thirty-one (31) fire fighters, who are not contractual and do not work for CDCR. In addition, staff who are issued an Identification Card are subject to a reissuance every five years in which their Live Scan record is reviewed. This includes contractual staff. The memo requiring this and Contractor Tracking List were provided to the auditor for further verification.

(h) Per the interview with Human Resource Administrator, the office can provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee. This would be addressed by staff in the Internal Services Unit (ISU).

Summary of evidence to support findings: To summarize, policy supports compliance. All staff who have contact with inmates must submit to a LIVE SCAN, which continually monitors for arrests. The application supplement ensures that the questions in provision (a) are addressed as well as provision (b) prior sexual harassment, prior correctional employment, acknowledge of telling the truth, and not omitting information. This was supported with randomly requested documentation from personnel files for employees and contractors. The auditor finds the facility compliant with the standard provisions.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Interview Director of Adult Institutions · Interview Warden · Observations of Medical Building renovation and updated camera monitoring · PAQ <p>The PAQ indicates the facility has not acquired any new facilities or made any substantial expansions but has made substantial modifications of existing facilities since the last PREA audit and has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) The interview with the Director of Adult Institutions and Warden confirms compliance in that all updates or modifications to facilities and video monitoring will consider the effects on the ability to protect inmates from sexual abuse. At SCC, the medical department had been remodeled. The auditor concurs through observation that the physical plant, use of windows and visibility for security staff does enhance safety for staff and inmates but does not violate privacy concerns.</p> <p>Summary of evidence to support findings: Interviews, observations and the PAQ provided the auditor with sufficient evidence to support a finding of compliance.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.8 Response, Crime Scene Responsibilities, Evidence, Transportation · DOM 54040.9 Forensic Medical Examinations · DOM 54040.8.2 Victim Advocate and Victim Support Person · DOM Definition Victim Advocate · Flow chart – All Staff-on Inmate Prison Rape Elimination Act (PREA) Allegations · Verification of SANE exams available - Sexual Assault Forensic Medical Exam

State of California - Department of Justice - Office of the Attorney General website and Standard Agreement with San Joaquin General Hospital

- Memo- Sexual Assault Kit Processing
- Justification Memo: Evidence protocol and forensic medical examinations
- Initial Contact Guide
- Transportation Guide
- Custody Supervisor Checklist
- A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents
- Specialized PREA Training for Locally Designated Investigators (review again for all standards)
- Basic Investigator Course
- Watch Commander Notification Checklist
- Purchase Order - local hospital Sexual Assault Forensic Exam
- Interview with investigator
- Uniform evidence protocol
- Observation of PREA evidence kits SCC and all Conservation camps
- Memo: Discontinuation of Copayment for health care services
- CDCR California Correctional health Care Services - Health Care Department Operations Manual 4.1.6 Prison Rape Elimination Act
- MOU CDCR and Center for Non-Violent Community
- Rape Crisis Center PREA Poster English and Spanish
- Interview with PCM
- Observations
- PAQ

The PAQ indicates there have been two forensic medical exams, two SANE/SAFE exams no exams performed by a qualified medical practitioner during the previous twelve months.

The following policy excerpts supports compliance with the requirements of this standard:

DOM 54040.8 Response, Crime Scene Responsibilities, Evidence, Transportation states the following: *It is the expectation that all staff shall maintain professional behavior when interacting with an alleged victim of sexual violence or staff sexual misconduct and display sensitivity to the potential emotional impact of the situation. All staff are reminded that this is a very serious situation. Incident specific information shall be treated as confidential, and disclosure made only to employees who have a "need to know" and to other persons and entities as permitted or required by law. Initial Contact Upon the initial contact with an employee, that employee will take the alleged victim to a private secure location.*

Crime Scene Preservation: The custody supervisor shall ensure that a perimeter has been established and an officer has been posted to keep persons out of the crime scene area. The custody supervisor shall ensure the assigned officer(s) maintain a chronological log of all persons entering the crime scene area and their purpose for entering the crime scene area. ISU staff and/or trained personnel shall process the crime scene including collecting and securing evidence. ISU staff shall photograph/ videotape the crime scene and evidence collected, make a diagram of the crime scene, and collect/package all evidence. Evidence Care must be taken to ensure that any potential evidence is identified, preserved, and collected. Examples of evidence include, but are not limited to any clothing worn by the victim and suspect, hair or clothing fibers, dried or moist secretions, semen, blood or saliva stains, stained articles of clothing, blankets, or other foreign materials on the body of the victim or suspect, fingernail scrapings, and any other trace evidence (including the rape examination kit). Based on when/where the incident occurred, a designated evidence officer will be requested to collect evidence that may be destroyed if not preserved. The designated evidence officer and any other employee who collects evidence will process it according to institutional procedure. All DNA related evidence taken from the body of the victim or suspect (i.e., fingernail scrapings, body fluid, hair, etc.) must be collected by the Sexual Assault Nurse Examiner (SANE), this individual is located at the SART location, in accordance with State of California, Office of Emergency Services Reporting Instructions. Refer to the institutions local MOU or DOM Supplement regarding processing of the clothing that the victim and suspect wore at the time of the incident. All other evidence such as clothing (from his/her bed area) and bedding will be collected per institutional procedure. Once the SANE has finished collecting the evidence, it will be processed following local protocols.

54040.8.4 Transportation Responsibilities *The transportation sergeant or designated sergeant shall maintain Sexual Assault/Battery Transportation Kits in a plastic storage bin. This kit will consist of: One clean jumpsuit; Two pieces of "examination table" type paper (approx. 18" x 36" each); Two Evidence Collection Envelopes; Two Evidence Collection Paper Bags; and Two pairs of latex gloves and other required personal protective equipment (PPE). A Transportation Checklist has been developed to identify the duties to be completed related to the transportation of Sexual Assault victims and suspects.*

54040.9 Forensic Medical Examination *In accordance with DOM Sections 54040.12.1 and 54040.12.2, the victim will be taken to the designated outside hospital, or on-site location, where SART Contract Staff will complete the forensic exam. The SANE shall*

provide the required Forensic Medical Examination, per the Office of Emergency Services, as well as the appropriate Forensic Medical Report: Acute (72 hours) Child/ Adolescent Sexual Abuse Examination, or the Forensic Medical Report: Sexual Assault Suspect Examination. These examinations will consist of an explanation of the process, the inmate's signature on consent forms (some inmates will require assistance to explain the consent forms prior to signing them), discussion of the incident and when/how it occurred, and a detailed physical examination that will include evidence collection and photographs. As required in Penal Code Section 2638 (part of AB 550), immediate HIV/AIDS prophylactic measures will be provided. In addition, information regarding sexually transmitted infections, HIV and pregnancy options, will be discussed with the victim and/or suspect. Testing for sexually transmitted infections, HIV, and pregnancy (if appropriate) will be offered.

Memo: Sexual Assault Kit Processing states, California Penal Code (PC) Section 6809 Sexual Assault Victims' DNA Bill of Rights, state in part, "Law enforcement agencies have an obligation to victims of sexual assaults in handling, retention and timely DNA testing of rape kit evidence or other crime scene evidence is completed in a timely manner in order to assure the longest possible statute of limitations.

4040.8.2 Victim Advocate and Victim Support Person states, Victims of alleged sexual violence or staff sexual misconduct have the right under PC 264.2, PC 679.04, and/or 28 CFR, Standard §115.21 to a Victim Advocate and Victim Support Person for both forensic medical examination (where evidentiary or medically appropriate) and for the investigatory interview. Victim Advocate and Victim Support Person for Medical Examination In incidents where an inmate has alleged sexual violence or staff sexual misconduct, the watch commander or designee shall immediately notify the local Rape Crisis Center whenever a victim of a sexual violence or staff sexual misconduct, is treated at the local SART location and/or transported to an outside hospital for any forensic examination. The victim has the right to have a victim advocate present and a victim support person of the victim's choosing (see PC Sections 679.04 and PC 264.2 and/or 28 CFR, Standard §115.21) at the forensic medical examination. In most cases, the victim advocate will be from the local rape crisis center. The victim support person may be excluded from the examination if the watch commander/designee or medical provider determines that the presence of the victim support person would be detrimental to the purpose of the examination or poses a threat to the safety and security of the institution or outside hospital. If a victim support person is excluded, the watch commander/designee or medical provider who made the decision shall document the reason (i.e., if time for the support person to attend would result in a significant delay and/or the person requested would present a risk to the safety/ security of the institution) on the CDCR Form 837 if the allegation is against another inmate or on a confidential memorandum if the allegation is against staff. A Memorandum of Understanding (MOU) between the Institution and Local Rape Crisis Center (Victim Advocate) shall be established to ensure that both agencies understand their roles and responsibilities when responding to sexual violence or staff sexual misconduct. Victim Advocate and Victim Support Person for Investigatory Process Victims of alleged sexual violence or staff sexual misconduct, have the right to have a victim advocate and a victim support person of the victim's choosing (see

PC Sections 679.04 and 264.2 and/or 28 CFR, Standard §115.21) present at any investigatory interview, interview by law enforcement, the district attorney, or defense attorneys. If the investigator or the district attorney determines that the presence of the victim support person would be detrimental to the interview, the victim support person may be excluded from the interview. The victim must be notified verbally or in writing of this right by the attending investigator or the district attorney prior to the interview. Reasons for exclusion of the victim support person are the same as identified previously in the medical examination process and shall be documented as required above. Victim Advocates for Emotional Support Services The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available. This information is available to the inmate population in the PREA Brochure entitled "Sexual Violence Awareness" and the PREA booklet entitled "Sexual Abuse/Assault - Prevention and Intervention". It should also be included in each institution's inmate orientation handbook. For persons detained solely for civil immigration purposes, information for the appropriate immigrant services agency shall be provided by staff. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

DOM Definition Victim Advocate

Victim Advocate An individual typically employed by a Rape Crisis Center whose primary purpose is the rendering of advice or assistance to victims of sexual assault and who has received a certificate evidencing completion of a training program in the counseling of sexual assault victims issued by an approved counseling center. The Victim Advocate will be summoned to assist the alleged victim of an in-custody sexual assault including rape, sodomy, oral copulation, or forcible acts of sexual penetration for the SANE exam and interview process. The victim advocate will also be summoned for in-custody abusive sexual contact allegations when appropriate. In cases where an outside Victim Advocate is not available, a designated employee will be summoned, if available; an employee who has been certified by a rape crisis center as trained in counseling of sexual assault victims and who either: (1) A psychiatrist, psychologist, licensed clinical social worker, psychiatric mental health registered nurse, staff person with a master's degree in counseling, or others listed in Evidence Code Section 1010; or (2) Has the 40 hours of specialized training listed in Evidence Code Section 1035.2 and is supervised by a staff member in subsection (1) above. If a designated employee is utilized as a Victim Advocate proof of required training must be on file in their personnel or IST file.

Specialized training may be offered to employees who volunteer to act as victims' advocates. This training includes certification by a rape crisis center as trained in the counseling of sexual assault victims. For any employee volunteer who is not a psychiatrist, psychologist, licensed clinical social worker, psychiatric mental health RN, staff person with a master's degree in counseling, or other's listed in Evidence Code section 1010, this specialized training also includes the 40 hours of specialized training listed in Evidence Code 1035.2. Only employees who voluntarily agree to act as a victim advocate shall be utilized in that capacity. Employees who volunteer will

be subjected to background clearance to ensure no prior history of violence.

Evidence reviewed/analyzed by provision:

(a) (b) The auditor concluded that the agency does follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. All operations, including Conservation camps (Mt. Bullion, Vallecito, Pine Grove, Growlersberg, Washington Ridge, Ben Lomand, Gabilan, Miramonte, Mountain Home, Owens Valley, Fenner Canyon, Francisquito, Acton, Holton, Julius Klein, Prado, Oak Glen, Bautista, La Cima, Delta, Konocti, Parlin Fork, Eel River, Alder, Deadwood, Trinity River, Sugar Pine, Intermountain, Antelope, Ishi, and Salt Creek) maintain a PREA evidence kit in the event of an allegation of sexual abuse whereby there is usable evidence. All SANE examinations are conducted at local hospitals which the protocol is established under the authority of the California Attorney General assuring the exam is conducted by healthcare professionals who have received specialized training. This process is included in the PREA Guides developed for Initial Contact, Watch Commander Guide, Transportation Guide. Investigators receive training that addresses the Evidence Officer Responsibilities up to and including transportation for a SANE exam. This training and process for evidence collection was confirmed during the interviews with the facility investigations (LDIs)

(c) CDCR California Correctional Health Care Services - Health Care Department Operations Manual 4.1.6 Prison Rape Elimination Act confirms there is no cost to the victim for the SANE exam. This process of access to a SANE exam is included in the PREA Guides developed for Initial Contact, Watch Commander Guide, Transportation Guide. Additionally, the auditor reviewed one incident in which the inmate was transported to the hospital for this exam.

(d) (e) The facility assures that if the inmate requests, a victim advocate will be available; it is also included in the state authority noting that there is a directory of rape crisis centers - https://www.valor.us/get-help/wpbdp_category/california/. For access to a rape crisis advocate, the facility provides access to a service statewide, regardless of where the inmate is housed (all conservation camps) via telephone where follow up counseling can continue. There is an MOU with this organization to support this.

(f) The agency is responsible for investigating allegations of sexual abuse therefore this provision is not applicable.

(g) This provision is not applicable.

Summary of evidence to support findings: Policies, training curriculum, response guidelines, and review of one SANE exam, verification of no charge for examinations, review of the California Attorney General website, interviews with investigations all provided the auditor with sufficient evidence to support all provisions of the standard provisions. The auditor finds the facility compliant with the standard provisions.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.12 Investigation · DOM 15080.2 & 3 · Justification Memo Policies to ensure referrals of allegations for investigations · Interviews Director of Adult Institutions · Interviews Investigative staff · Review of investigations, list of investigations · Publication that describes the investigative responsibilities · Observations · PAQ · FAQ <p>The PAQ indicates there have been twenty (20) allegations resulting in administrative investigations and fourteen referred to criminal investigations in the past 12 months.</p> <p>The following policy excerpts support compliance with the requirements of this standard:</p> <p>DOM 54040.12 Investigation states, <i>All allegations of sexual violence, staff sexual misconduct, and sexual harassment shall be investigated and the findings documented in writing. No standard higher than the preponderance of the evidence is to be used when determining whether allegations of sexual abuse or sexual harassment are sustained. In addition, all allegations require completion of the Survey of Sexual Violence (SSV-IA) form. 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. The departure of the alleged suspect or victim from employment or control of CDCR shall not provide a basis for terminating an investigation.</i></p> <p>15080.2 Office of Internal Affairs <i>The Office of Internal Affairs (OIA) is the departmental entity with authority to investigate allegations of employee misconduct when appropriate. The Chief, Office of Civil Rights (OCR), OIA, serves as an advisor to the Secretary on policies and procedures for implementing the CDCR Equal Employment Opportunity (EEO / Sexual Harassment policy in accordance with State</i></p>

and federal law.

Every allegation of employee misconduct within the California Department of Corrections and Rehabilitation (CDCR or Department) shall be promptly reported, objectively reviewed, and investigated when appropriate.

31140.6 Authority to Conduct Investigations Pursuant to Government Code Section 11182, the Secretary of the Department delegates the authority to initiate and conduct investigations to the Assistant Secretary, OIA.

Justification Memo Policies to ensure referrals of allegations for investigations states,

Inmate on Inmate Sexual Violence and Harassment: All investigations of sexual abuse or sexual harassment are conducted by the Institutions Investigative Services Unit (ISU). The findings are then documented on a confidential Memorandum and an SSV-IA form. If the allegations are found to be substantiated, ISU collaborates with the District Attorney to make a determination on prosecution. Staff sexual Conduct and staff sexual harassment: The collection of preliminary information concerning an investigation of sexual abuse or sexual harassment is conducted by the Institutions Investigative Services Unit (ISU). The findings are then documented on a confidential Memorandum and an SSV IA form. If the allegations are found to have potentially occurred, ISU then refers the case to the Office of Internal Affairs (OIA), an entity within CDCR with authority to investigate all staff misconduct allegations. The OIA completes the investigation and works with the District Attorney to make a determination on prosecuting the suspect. Applicable sections for review are as follows; Department Operations Manual (DOM), Chapter 5, Article 44, Section 15080.2, states in part: The Office of Internal Affairs (OIA) is the departmental entity with authority to investigate allegations of employee misconduct when appropriate. The Chief, Civil Rights Operations (CRO), OIA, serves as an advisor to the Secretary on policies and procedures for implementing the CDCR Equal Employment Opportunity (EEO / Sexual Harassment policy in accordance with State and federal law. Department Operations Manual (DOM), Chapter 3, Article 14, Section 31140.6, states in part: Pursuant to Government Code Section 11182, the Secretary of the Department delegates the authority to initiate and conduct investigations to the Assistant Secretary, OIA.

Evidence reviewed/analyzed by provision:

(a) (b) (c) Policy supports that all allegations of sexual abuse and sexual harassment are referred for an administrative investigation and/or a criminal investigation. A separate entity is not used for investigations; they are all addressed by either the Internal Affairs Unit (IAU) or Institutions Investigative Services Unit (ISU). Policy describes this process and is available to review on the agency website: <https://www.cdr.ca.gov/prea/> and the regulations and policy page. Interviews with investigations further concluded that all allegations of sexual abuse and sexual harassment are referred for an administrative investigation and/or a criminal investigation. The interview with the Director of Adult Institutions confirmed that his agency is committed to ensuring that all allegations of sexual abuse or sexual harassment are investigated by trained agency investigators.

	<p>Fifteen investigations were reviewed for the previous twelve-month review period:</p> <p>Staff/Inmate sexual abuse: 5</p> <p>Inmate/inmate sexual abuse: 9</p> <p>Staff/inmate sexual harassment: 3</p> <p>Inmate/inmate sexual harassment: 1</p> <p>Not PREA/consensual actions: 2</p> <p>Five open investigations were not reviewed</p> <p>Summary of findings:</p> <p>Substantiated: 2</p> <p>Unsubstantiated: 13</p> <p>Unfounded: 2</p> <p>Review of the investigations allowed the auditor to conclude the following: If there are potential criminal allegations, they are addressed in that manner. Therefore, an administrative and criminal investigation is conducted. This supports clarification with the FAQ issued January 2023. Evidence of use of Miranda was viewed in the files.</p> <p>(d) (e)These are not applicable to this operation.</p> <p>Summary of evidence to support findings: Policies, review of investigations reported, review of the agency website, interviews with the Director of Adult Institutions, interviews with investigators (two) allowed the auditor to conclude there is sufficient evidence to support a finding of compliance.</p>
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040 Policy · DOM 54040.4 Education and Prevention · Training curriculum Introduction and In-service Staff Responsibilities · Staff training records

- Electronic training acknowledgement
- Interview with the Training Lieutenant
- Interviews random staff – forty (40) total to include one from each Conservation Camp
- Observations
- PAQ
- FAQ

The PAQ indicates that all employees who have contact with inmates were trained on PREA requirements as outlined in the provision.

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040 Policy states, The California Department of Corrections and Rehabilitation (CDCR) is committed to providing a safe, humane, secure environment, free from inmate-on-inmate sexual violence, staff sexual misconduct, and sexual harassment. This will be accomplished by maintaining a program to address education/prevention, detection, response, investigation, and tracking of these behaviors and to address successful community re-entry of the inmate. CDCR shall maintain a zero tolerance for sexual violence, staff sexual misconduct and sexual harassment in its institutions, community correctional facilities, conservation camps, and for all inmates under its jurisdiction. All sexual violence, staff sexual misconduct, and sexual harassment is strictly prohibited. This policy applies to all inmates and people employed by the CDCR, including volunteers and independent contractors assigned to an institution, community correctional facility, conservation camp, or parole. Retaliatory measures against employees or inmates who report incidents of sexual violence, staff sexual misconduct or sexual harassment as well as retaliatory measures against those who cooperate with investigations shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. Retaliatory measures include, but are not limited to, coercion, threats of punishment, or any other activities intended to discourage or prevent a staff or inmates from reporting the incident(s) or cooperating with investigation of an incident(s).

DOM 54040.4 Education and Prevention states, All staff, including employees, volunteers, and contractors, shall receive instruction related to the prevention, detection, response, and investigation of inmate sexual violence, staff sexual misconduct, and sexual harassment. This training will be conducted during new employee orientation, annual training, and will be included in the curriculum of the Correctional Training Academy. The training will be gender specific based on the inmate population at the assigned institution. Participation in the training will be documented on a CDCR 844, Training Participation Sign-in Sheet. Employees shall also be trained in how to conduct cross-gender pat-down searches, transgender pat-down searches, and unclothed body cavity searches. When conducting these types of

searches, employees shall ensure that these searches are conducted in a professional, respectful manner, and in the least intrusive manner possible consistent with security needs. Searches shall be conducted in accordance with policy, procedure and training as per CCR, Title 15, Section 3287(b). Institutions shall train all staff on how to communicate professionally with inmates, including inmates who identify themselves as Lesbian, Gay, Bi Sexual, Transgender, Intersex, and Gender Non-Conforming in accordance with Inmate/Staff Relations Training, on file with the Peace Office Selection and Employee Development (POSED).

Evidence reviewed/analyzed by provision:

(a) The auditor reviewed the training curriculums for PREA. They address the following:

- Zero tolerance for sexual abuse and sexual harassment
- Staff Responsibilities
- Inmates right to be free of Sexual Abuse and Sexual Harassment
- Inmate and staff right to be free from retaliation
- Dynamics of Sexual Abuse and Sexual Harassment
- Common Reactions
- How to Detect sexual abuse and sexual harassment/how to respond
- Inmate Staff interactions on how to avoid inappropriate relationships
- Professional Communication
- Mandatory Reporting

All topics required by the provision are addressed.

(a)The interview with the Training Lieutenant confirmed that the training is provided in person and on the Learning Management System for refresher training. This training is provided annually. All staff interviews confirmed this and knowledge of the required topics therefore provide evidence for the auditor to support the finding of exceeds compliance. Additionally, the Training Lieutenant and the random interviews provided assurance to the auditor that no staff has contact with inmates until they have completed this training, demonstrating support for the FAQ issued October 2014.

(b) Training was tailored to the gender of the facility including conservation camps - males.

(c) All employees have received the training. The auditor can conclude this based on observation of data prints confirming receipt of the training, interview with the Training Lieutenant and all random staff who confirmed receipt of the training

	<p>annually.</p> <p>(d)Employees who complete the training sign electronically noting the following: Your self-certification will serve as official documentation that you have completed and understand the training. If you do not understand the training material, do not click below or proceed further. You will need to see additional assistance from your supervisor. Documentation was provided demonstrating this.</p> <p>Summary of evidence to support findings: Policies, review of the training curriculum, training records, interview with the Training Lieutenant and all random staff provide the auditor with sufficient evidence to support the finding of compliance, exceeds compliance as the full training if required annually.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.4 Education and Prevention · DOM 101090.7 Volunteer Orientation · DOM 101090.6.2 Volunteer Application Packet and Files · PREA On-the Job Training Module · Justification Memo - Volunteer and contractor training · Volunteer/contractor information sheet · Volunteer Application Packet and Files · Interview contractual staff - three · Interview with volunteers - two · Review contractor training records · Interview with the Volunteer Coordinator · Observation of volunteer documentation, to include conservation camps · Verification of volunteer training and clearance at each conservation camp · PAQ

The PAQ indicates there are seventy-eight (78) volunteers and contractors who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response.

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.4 Education and Prevention states, *All staff, including employees, volunteers, and contractors, shall receive instruction related to the prevention, detection, response, and investigation of inmate sexual violence, staff sexual misconduct, and sexual harassment. This training will be conducted during new employee orientation, annual training, and will be included in the curriculum of the Correctional Training Academy. The training will be gender specific based on the inmate population at the assigned institution. Participation in the training will be documented on CDCR 844, Training Participation Sign-in Sheet.*

DOM101090.7 Volunteer Orientation confirms that volunteers receive training on the Pison Rape Elimination Act

Justification Memo - Volunteer and contractor training

All volunteer/contract staff is given 1 hour of mandatory training in regards to Inmate/Staff Interaction. The overall direction of the training is to aid staff in understanding the dynamics of establishing positive, professional interactions with inmates in the performance of their duties. The training also informs staff how to:

- Maintain professional distance while maintaining effective communication with inmates.*
- Determine the fine-line between establishing rapport with the inmates.*
- Avoid becoming overly familiar and/or other inappropriate behavior.*
- Identify the consequences of denying inmates' rights.*
- Identify and react appropriately to manipulation by an inmate.*

Although all volunteer/contract staff are required to complete the same training, specific staff such as nursing staff who work 8-hour shifts with little to no custody staff supervision at times, are mandated by the institutions to complete more extensive training based on their level of contact with inmates. Whereas, other contract staff such as self-help group volunteers maintain the 1-hour mandatory training.

DOM 101090.6.2 Volunteer Application Packet and Files states, *A file similar to the state employee official personnel file shall be maintained on each volunteer in the Human Resources Office, the Community Resources Manager's Office, or designee office and stored in a locked cabinet. Volunteer records shall be recorded in the volunteer tracking system, which may be made available to the Watch Office*

Evidence reviewed/analyzed by provision:

(a) (b) (c) Volunteers and contractors are provided with a three-page document which they are required to review and sign that addresses the following: review of the law, policy, retaliation, professional behavior, preventative measures, detection and reporting. They sign acknowledging they will understand and further report immediately any concerns. They also sign an acknowledgement regarding the

	<p>questions in standard 117.17 (a) and note they have a continuing duty to promptly report and such behaviors to their employer and the Appointing Authority (Warden or Health Care Administrator). The auditor interviewed staff who oversee the Volunteer Approval process who verified the process as described in policy. Access to all volunteer files was provided to the auditor; files were randomly selected, reviewed which verified the process.</p> <p>The auditor interviewed a contractual staff who provides treatment for drug abuse, who confirmed the requirement and completion of the training for contractual staff, background check requirements, understanding of zero tolerance, and what to do if an inmate reports sexual abuse to her. Two agency nurses were interviewed who also understood PREA as described and the added receipt of specialized training for medical and mental health staff. Additionally, two volunteers (one who conducts bible study and one who assists with the shelter dog program) were interviewed who confirmed receipt of the training and verification of zero tolerance and what actions to take if they become aware of any sexual abuse or sexual harassment. When interviewing the staff who monitor contractual staff to ensure they are appropriately trained, a spread sheet demonstrating this tracking was provided, and access to the volunteer files was provided to the auditor.</p> <p>While at the thirty-one conservation camps, the auditor reviewed with the camp supervisor whether they had volunteers and how they ensure they have sufficient clearance (background check and completion of the training). It was demonstrated that this information is available to all camps via computer printout. Additionally, many camps who had volunteers maintained a file at the site to verify “gate clearance” prior to providing the services. Conservation camp volunteers were basically those who provided AA/NA or bible study.</p> <p>Summary of evidence to support findings: Policies, Volunteer and Contractor Information packet, interviews with the Volunteer Coordinator, contractors, volunteers and camp supervisors, observation and review of volunteer documentation provided the auditor with ample evidence to support the finding of compliance with all provisions of this standard.</p>
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.4 Education and Prevention · Transgender Brochure – Senate Bill 132 (English and Spanish)

- PREA Information for Orientation Handbook (English and Spanish)
- PREA brochure – English and Spanish
- Review of PREA Video - JDI
- Shine the light on Sexual Abuse poster
- Demonstration of the intake process
- Demonstration of Orientation
- Interviews Intake staff
- Interviews with staff who conduct Orientation
- Documentation of receipt of PREA information, effective communication, disabilities, accommodations, randomly requested from SCC and Conservation camps

The PAQ indicates that 4250 inmates were admitted that were given information at intake, 3322 stayed past 30 days who received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.4 Education and Prevention states,

Inmate Education Verbal and written information shall be provided to inmates which will address: . . . Prevention/Intervention.

- Reporting.
- Treatment and Counseling.

Initial inmate orientation on PREA will be provided to the inmate population in reception centers (RC) via either written or multi-media presentation on a weekly basis in both English and Spanish. Approved PREA posters which contain departmental policy, and the sexual violence, staff sexual misconduct, and sexual harassment reporting telephone numbers shall be posted in designated locations throughout the institution and parole offices. At a minimum, these areas shall include all housing units, medical clinics, law libraries, visiting rooms, program offices, and inmate work areas. The PREA brochure entitled "Sexual Violence Awareness" and the PREA booklet entitled "Sexual Abuse/Assault – Prevention and Intervention" will be distributed during initial processing in RC institutions. Both the brochure and booklet shall be available through Receiving and Release or the correctional counselors at each institution, and the information will also be included in each institution's inmate orientation handbook. Appropriate provisions shall be made to ensure effective communication for inmates not fluent in English, those with low literacy levels, and

those with disabilities. Institutions may consider the use of inmate peer educators to enhance the inmate population's knowledge and understanding of PREA and sexually transmitted diseases. PREA inmate education shall be documented on a CDC Form 128-B, General Chrono. The inmate shall be asked to sign the CDC Form 128-B indicating they receive the training. Refusal to sign will be noted by staff on the CDC Form 128-B. The CDC Form 128-B shall be forwarded to Inmate Records for appropriate scanning into the Electronic Records Management System (ERMS).

Evidence reviewed/analyzed by provision:

(a)(e) The video is shown to incoming inmates at the intake operation while they are awaiting individual processing: PREA: What You Need to Know, produced by Just Detention International (JDI); it is approximately sixteen minutes long and discusses the following: confined persons right to be free from sexual abuse and sexual harassment, there is a zero tolerance to any form of sexual abuse or sexual harassment, right to report privately and safely, free medical, mental health and trained sexual abuse counseling, definitions of sexual harassment, sexual abuse, avoiding behaviors that will help maintain safety, third party reports, the facility's requirement to continually provide information on how to report, including outside the facility; and reasonable communication with sexual abuse advocacy groups.

The auditor observed this, and it was supported by the interview with the Intake Sergeant and supported by inmate interviews. A document is completed indicating the following: review of the video, PREA brochure, Inmate Orientation Handbook with PREA reporting information and the opposite Gender Announcement explained. Additionally checked are the following: Effective Communication (determined by the score received when tested at the reception prison and having the inmate summarize the information), disability needs, and accommodations. During the onsite audit it was discovered that this documentation process had not been consistent. Corrective action was immediately taken and additionally requested evidence of this process was requested and received, to include inmates at the conservation camps.

(b)(e) Orientation is conducted individually with counseling staff typically within fourteen (14) days while inmates are being prepared for the initial classification meeting. This was confirmed by interviews with three counselors who perform this duty. Randomly requested documentation supporting this process was requested and received, noting that it is a narrative report in the chronological (Chrono) report for inmates.

(c) The PAQ reports that all inmates received education on PREA in 2019 which assures they all have been educated to date. The auditor found this credible.

(d) The PAQ reports that to ensure that all inmates receive information accessible to their needs, the following occurs: written information is provided in English and Spanish, a PREA DVD plays with subtitles in Spanish and ASL, the video is loud to ensure those who are visually impaired can hear it. See comments to 115.16.

(f) Key information is readily available at SCC through posters visible throughout the facility, stenciled information and posters located in each phone booth, provided on

	<p>inmate tablets (SCC) as observed by the auditor during the onsite audit and confirmed through interviews with inmates (eighty total). At this time, conservation camp inmates do not have tablets. However, upon arrival, they receive a brief orientation with the camp staff and are provided with additional PREA information. This was confirmed by interviews with conservation camp inmates and conservation camp staff and recorded in individual folders developed for each inmate. The auditor randomly picked two folders at each Conservation Camp and verified this occurrence at the conservation camps.</p> <p>Summary of evidence to support findings: Policies, education materials provided to inmates, review of the video shown at intake, demonstration of the intake process with the intake sergeant, interview with the intake sergeant, interview with counselors documentation randomly requested of the intake process and orientation) and interviews with the randomly selected inmates who confirmed the process of knowledge and understanding of their rights under the PREA law, all provided ample evidence for the auditor conclude that the facility, including the camps are compliant with all provisions of this standard.</p>
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115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.3 Prison Rape Elimination Policy Definitions · DOM 54040.4 Education and Prevention · PREA Specialized Training curriculum · Basic Investigators Course · Training records · Interviews Investigative staff · Review of investigations · PAQ # of investigators agency <p>The PAQ indicates there are currently forty-six agency investigators trained to handle and respond to sexual abuse allegations.</p> <p>The following policy excerpts support compliance with the requirements of this standard:</p>

DOM 54040.3 Prison Rape Elimination Policy Definitions states the following: *Locally Designated Investigator (LDI) The Investigative Services Unit Investigator or other designated institutional staff who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct.*

DOM 54040.4 Education and Prevention states, *All employees who are assigned to investigate sexual violence and/or staff sexual misconduct will receive specialized training per PC Section 13516(c). The curriculum utilized in the class must be POSED approved. The Hiring Authority or PREA Compliance Manager (PCM) shall ensure employees investigating incidents of sexual violence and/or staff sexual misconduct are properly trained. Participation in the training will be documented on a CDCR 844, Training Participation Sign-in Sheet.*

Evidence reviewed/analyzed by provision:

(a) (b) (c) The CDCR Basic Investigator Training/Specialized PREA Training covers the following topics: Overview of PREA, legal liability, DOJ National Standards, Sexual abuse/sexual harassment by an inmate, sexual abuse/sexual harassment committed by a staff; definitions, professional behavior, detection, notification to/from other confinement operations, third-party reporting, custody supervisor responsibilities, victim advocate and victim support person, watch commander responsibilities, Transportation responsibilities, Evidence officer responsibilities; forensic medical exam; suspect processing, types of investigations, crime scene preservation/evidence collection; interviews(victim considerations, mental illness/psychiatric symptoms, disabilities, developmental disabilities, hearing impairment, LGBTI victims, elderly victims, victim advocate for the investigatory interview; witness interviews, suspect interviews, report writing, criminal prosecution, what makes a successful case, reporting to inmates, communications with Internal Affairs, Tracking - Data collection, PREA Data Storage and retention, independent review of completed cases. There are seventy-two (72) pages.

Basic Investigators Course Specialized PREA Training for Locally Designated Investigators (LDI) (one hundred ninety-two (192) slides). It addresses sufficient information to qualify as regular PREA training and also address techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

The training curriculum specifically addresses the following: In addition to the general training provided to all employees pursuant to PREA Standard, Section 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse

	<p>investigations, which mirrors the standard requirements. Documentation was provided showing that investigators assigned to conduct sexual abuse investigations have received specialized training on conducting sexual abuse investigations and regular PREA training.</p> <p>(d) Not applicable to this agency</p> <p>Finding of compliance is based on the following: Policy, interviews, review of training curriculum and training documentation all provided sufficient evidence to support a finding of compliance with all provisions.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.4 Education and Prevention · Memo: Health Care Services · Specialized medical and mental health training curriculum eLearning Module located in the agency Learning Management System 11057450 · Training records for medical and mental health staff · Interviews with medical staff and mental health staff · PAQ <p>The PAQ indicates that the facility has 179 medical and mental health staff, 98% have received specialized training.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>DOM 54040.4 Education and Prevention states, <i>Staff Training All staff, including employees, volunteers, and contractors, shall receive instruction related to the prevention, detection, response, and investigation of inmate sexual violence, staff sexual misconduct, and sexual harassment. This training will be conducted during new employee orientation, annual training, and will be included in the curriculum of the Correctional Training Academy. The training will be gender specific based on the inmate population at the assigned institution. Participation in the training will be documented on a CDCR 844, Training Participation Sign-in Sheet.</i></p> <p>Evidence reviewed/analyzed by provision:</p>

	<p>(a) The auditor reviewed the training lesson which has the following objectives: You will identify potential signs of sexual abuse and sexual harassment. You will identify how and whom to report allegations or suspicions of sexual abuse and sexual harassment. You will identify methods to respond effectively and professionally to victims of sexual abuse/sexual harassment. You will identify the steps required to preserve evidence of sexual abuse. Interviews with medical and mental health staff confirmed receipt of the training (three mental health staff, three medical staff).</p> <p>(b) Not applicable, another agency provides this service.</p> <p>(c) (d) A training completion spreadsheet was provided demonstrating that staff have received training (regular and specialized) and are continually monitored for ensuring this training is provided.</p> <p>Summary of evidence to support findings: Policy, review of training curriculum, training records and interviews provide the auditor with sufficient evidence to support a finding of compliance.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Title 15 Inmate Housing · DOM 54040.6 Inmate Housing · Risk Assessment tool · Risk Assessment Instructions · Randomly requested intake and follow up assessments · California Penal Code Section 667.5c definitions · Memo: PREA Risk Re-Screening – Correctional Counselor Responsibilities – 30-day review process · Interviews Staff who perform risk screens · Risk assessments initial, 30-day reassessment, when warranted or referred-randomly requested · Interview PREA Coordinator

- Interview with the PCM
- Mental health Referral
- Observation/demonstration of risk assessment
- Observation of storage of information
- PAQ
- FAQ

The PAQ indicates that 4153 inmates were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility, 3322 inmates remained past 30 days) who 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.

The following policy excerpts support compliance with the requirements of this standard:

Title 15 Inmate Housing states, *(a) Upon arrival at an institution, facility, or program reception center, a designated custody supervisor shall screen an inmate for an appropriate housing assignment. The screening authority involved in the review and approval of an inmate's housing assignment must evaluate all factors to be considered when completing the Initial Housing Review, including but not limited to:*

- Inmate name, CDC number, and Personal Identification number.
- Personal factors such as race, date of birth, age, weight, height, birth place, and whether the inmate is a foreign national.
- Receiving Institution.
- County of commitment.
- Out to court return and escape history.
- Length of sentence.
- Enemies and victimization history.
- Criminal influence demonstrated over other inmates.
- Previous housing status.
- Reason(s) for prior segregation.
- History of "S" suffix determination pursuant to CCR subsection 3377.1(c).
- History of in-cell assaults and/or violence.
- Security Threat Group affiliation.
- Involvement in a race based incident(s).
- Nature of commitment offense.
- Documented reports from prior cellmate(s) that the inmate intimidated, threatened, forced, and/or harassed him or her for sex.
- Documentation that the cellmate(s) refused to return to a cell occupied by the inmate because of fear, threats, or abuse perpetrated by the inmate.
- Documentation that the inmate has been the victim of a sexual assault or was previously single celled.
- Adjudicated Department Rules Violations Reports (RVR) where the inmate was found guilty as a perpetrator in an act of physical abuse, sexual abuse, sodomy, or other act of force against a cellmate.

DOM 54040.6 Inmate Housing states, *This process will include completion of the PREA Screening Form, which includes questions related to sexual violence and victimization. Upon the inmate's arrival at his/her assigned institution, this information will again be assessed and a PREA Screening Form will be updated as necessary. Inmates will not be disciplined for refusing to answer, or not disclosing complete information related to mental, physical, or developmental disabilities, their*

sexual orientation, sexual victimization or perception of vulnerability.

Evidence reviewed/analyzed by provision:

(a)(b) Policy, interviews with Intake staff and demonstration of intake support that an initial intake screen is completed immediately upon arrival, in a private setting, to assess risk of sexual abuse or risk of sexual victimization. The auditor confirmed this process with all eighty-two (82) inmates interviewed; only one indicated this had not occurred.

(c)(d) (e)An example of the risk assessment was provided with the pre-audit documentation. The objective screening tool used considers the following information:

Risk of being sexual victimization

- mental, physical, development disability
- age
- physical build
- first incarceration
- convictions for sex offense against an adult or child
- perception of or self identifies as gay, lesbian, bisexual, transgender, intersex or gender nonconforming, subjective assessment by the screener
- crimes exclusively nonviolent
- previous experience as a victim of sexual abuse community and/or while incarcerated

The risk screen developed and used at this facility addresses all of these requirements of the provision. The facility reports that they do not hold inmates who are detained solely for civil immigration. The screen is completed upon arrival by the intake sergeant. It does meet the requirements of the FAQ in that staff can make a subjective opinion of whether the inmate is perceived as gay, lesbian, bisexual, transgender, intersex or gender nonconforming.

(e) The screening tool addresses the following:

Risk of being Sexually Abusive

- prior acts of sexual abuse
- history of committing institutional sexual abuse, convicted of or known history
- History of conviction for violence

This meets the required criteria in the standard provision. The questions are asked

verbally and in private according to the interview with the person who conducts risk assessments, random inmate interviews and demonstration of the intake process. The form provides an avenue in which a mental health referral is processed based on the results and the inmate response to accepting the referral.

(f) The auditor interviewed the staff who complete the 30-day reassessment - three counseling staff. It was confirmed to the auditor that this occurs in person, privately and the inmate is verbally asked the questions again. This practice does meet the expectations clarified in the FAQ that requires that the 30-day reviewed be conducted in person with the inmate. This is documented in the Chrono during the initial meeting with the counselor in which the inmate is prepared for his initial classification committee meeting. The auditor requested and received inmate Risk assessments demonstrating completion of the Risk Survey initially and within 30 days if they are still confined. These documents spanned over one year demonstrating institutionalization of the process.

Policy and interviews with the random staff assured the auditor that staff are observant and would communicate any information to the PCM that may initiate an updated (when warranted referral, receipt of additional information or request) risk assessment. No examples were available to support this as they have not had a reason to update a risk assessment. The auditor found this credible.

(h) The interview with the intake staff/staff who conduct risk assessments confirmed to the auditor that they would not require an inmate to answer sensitive questions - (d)(1), (7), (8), or (d)(9) if they did not want to respond. This was additionally confirmed by randomly asking inmates during their interview.

(i) Per the interview with the PREA Coordinator, PCM and observation of the inmate record storage area, electronic versions of the risk assessments are maintained in the Strategic Offender Management System (SOMS) Electronic Record Management System (ERMS). Authorized staff can access the outcome of the risk assessment but cannot ascertain the responses to the specific questions. This was additionally demonstrated through conversations with camp staff during the onsite visit.

Summary of evidence to support findings: Policy, analysis of the risk assessment tool and instructions, review of risk assessments, interviews with intake staff and counseling staff, interview with the PREA Coordinator and PCM, observation of secure controls in the PALMS, interviews with inmates all provided the auditor with sufficient evidence for a finding of compliance.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence

related to this standard:

- 62010.8.3 Initial Classification Committee
- 62010.9 Classification Responsibility Due Process
- Memo: Use of Screening Information
- PREA Screening Instructions
- DOM 62080.14 Transgender or Intersex Inmates
- DOM 54040.14.2 Transgender Biannual Reassessment for Safety in Placement and Programming
- Memo: Transgender Biannual Reassessment for Safety in Placement and Programming
- Observations of living conditions
- Transgender brochure - English and Spanish
- Interview PREA Coordinator
- Interview with staff who conduct the risk screen
- Interviews transgender/intersex inmates

The following policy excerpts support compliance with the requirements of this standard:

62010.8.3 Initial Classification Committee *Each institution shall establish an initial classification committee to review and initiate a suitable program for each inmate within 14 days after arrival at the institution. Composition Initial classification committees shall consist of:* • Captain (chairperson). • CC-III or captain (alternate chairperson). • CC-II or CC-I (committee recorder). • Assignment lieutenant. • Educational or vocational program representative. • Other staff as required. *Functions Initial classification committees shall:* • Initiate an educational, vocational training, or work program and privilege group designation. • Evaluate case factors and assist the inmate to understand institution expectations, available programs, and resources. • Designate the degree of custody necessary to control the inmate. • Refer complex cases to the ICC. (Institutional Classification Committee chaired by the Warden) • Recommend transfer of a new arrival determined to be inappropriately placed. • Grant worktime credits to which the inmate is entitled while in transit.

62010.9 Classification Committee Responsibility Due Process *Each classification committee shall:* • Inform the inmate of the purpose of the hearing and introduce committee members. • Encourage the inmate to participate in the hearing discussion. • Make decisions based on evaluation of available information and mutual agreement of the committee members. • Inform the inmate of the decision.

DOM 54040.4 Per 28 CFR, Standard §115.42, upon request, transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. In order to minimize cross gender exposure, staff of the opposite biological sex shall announce their presence when entering the housing unit. This announcement is required at the beginning of each shift and/or when the status quo within the housing unit changes. This policy shall be included in each institution's orientation handbook. This will allow the inmate to take into consideration that staff of the opposite gender may be present when performing bodily and bathing functions.

DOM 62080.14 Transgender or Intersex Inmates states, on the Medical Classification Chrono, shall be referred to a classification committee for review of all case factors and determination of appropriate institutional placement and housing assignment.

DOM 54040.14.2 Transgender Biannual Reassessment for Safety in Placement and Programming states, On a bi-annual basis, Division of Adult Institutions (DAI) staff will send each PREA Compliance Manager (PCM) a list of identified transgender and intersex inmates, as known to the Department. This list will reflect the institution's respective inmates, along with the month of the inmate's next scheduled annual classification review. If an inmate is due to be seen for his/her annual classification review during the identified review period (August through January or February through July), the assigned caseworker will ask the inmate about any threats they have received during the pre-committee interview. In addition to interviewing the inmate, the assigned caseworker shall review the inmate's case factors in SOMS and ERMS for any additional information, which may indicate the inmate, has any placement or programming concerns. After the annual review is completed, the assigned caseworker will document his/her actions, as they relate to the PREA Biannual Assessment, in the Classification Committee Chrono. If the inmate is not scheduled to be seen for his/her annual classification review during the identified review period (August through January or February through July), the assigned caseworker shall conduct a Transgender Biannual Assessment-PREA and complete a pre-formatted CDC Form 128-B, General Chrono. This form includes information to be asked of the inmate during a face-to-face interview to assess any threats to their safety. In addition to interviewing the inmate, the assigned caseworker shall review the inmate's case factors in SOMS and ERMS for any additional information, which may indicate the inmate, has any placement or programming concerns. If, during the interview for either the annual review or the Transgender Biannual Assessment-PREA, the inmate discloses threats to safety, the assigned caseworker shall immediately notify a Custody Supervisor. Any information related to a PREA allegation shall be documented and forwarded to the institution's Locally Designated Investigator according to the DOM, Article 44, Prison Rape Elimination Policy. The PCM shall coordinate with the Classification and Parole Representative to ensure the assessments are completed. The PCM shall maintain a copy of the biannual list with the dates where the annual classification reviews or the PREA Biannual Assessments were completed. The PCM will forward a copy of this list to the PREA Captain in the Division of Adult Institutions within five days of completion of the review period.

Evidence reviewed/analyzed by provision:

(a)(b) The auditor observed and concluded that with the oversight of the Classification Committee and the alert system in the SOMS, the facility is able to manage proper placement of inmates who screen as risk of victimization from those deemed at risk of sexual abuse. The facility has separate operations in which they can be separated which would ensure they do not get placed together for work or programming activities. A memo has been issued clarifying this process.

(c) Policy supports that the facility, in deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems. Due to the mission of the facility, it is unlikely that they will house transgender inmates who wish to participate in the conservation camp program as their medical needs cannot be addressed properly at those operations. However, it is possible, but during the audit there was no situation that warranted a case-by-case review for placement; the auditor found this credible. PREA Information for Orientation Handbook English and Spanish provides detailed information for transgender intersex to include a request to be housed at the institution consistent with your gender identity. This is issued to all inmates upon arrival and is included with information in the inmate issued tablets.

(d)(e) Per the Transgender Biannual Reassessment for Safety in Placement and Programming memo, the PCM receives a list twice a year identifying transgender and intersex inmates known to the department. The Correctional Counselor is guided to address inmate safety concerns, concerns with housing and programming. The auditor found credible that there have been no inmates identified as transgender/intersex were house at the facility for over six months.

(f) Policy supports the requirement of this provision. No request for a separate shower has been received. The auditor found this credible after conducting the preaudit and onsite audit.

(g) During the audit process of touring, reviewing documentation and interviewing staff, to include the PFREA Coordinator, it is determined that this facility does not have dedicated facilities, units, or wings solely on the basis of such identification or status as transgender, intersex, homosexual, bi-sexual, gay or lesbian.

Summary of evidence to support findings: Policies, interviews with the PREA Coordinator, staff who complete the risk assessment/participate in the Classification Committee (counselors) and observations during the audit provided sufficient evidence for the auditor to support a finding of compliance with this standard.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

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

- Title 15 3335 Administrative Segregation
- DOM 54040.6 Inmate Housing
- Observations of Restricted Housing (RH)
- Interview Warden
- Interviews staff who supervise RH
- PAQ

The PAQ states that no inmate has been placed in involuntary protective custody due to their high risk of sexual victimization. The auditor found no evidence to dispute this during the audit process.

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.6 Inmate Housing states, Inmates at high risk for sexual victimization, as identified on the PREA Screening Form, shall not be placed in segregated housing unless an assessment of all available alternatives has been completed, and a determination has been made that there is no available alternative means of separation from likely abusers. Inmates at high risk for sexual victimization shall have a housing assessment completed immediately or within 24 hours of placement into segregated housing. If temporary segregation is required, the inmate shall be issued an Administrative Segregation Placement Notice, explaining the reason for segregation is the need to complete a housing assessment based on the high risk for sexual victimization. If a determination is made at the conclusion of the assessment that there are no available alternative means of separation from likely abusers, the inmate will be retained in segregated housing and issued an Administrative Segregation Placement Notice, explaining the reason for retention. The assigned counseling staff shall schedule the inmate for appearance before the Institution Classification Committee for discussion of his/her housing needs. The inmate's retention in segregation should not ordinarily exceed 30 days. If retention is continued beyond 30 days, staff shall ensure compliance with DOM Section 54040.14.1, PREA Victims-Non Disciplinary Segregation.

Title 15 3335. Administrative Segregation. When an inmate's presence in an institution's General Population (GP) inclusive of the Restricted Custody General Population (RCGP) facility presents an immediate threat to the safety of the inmate or others, endangers institution security or jeopardizes the integrity of an investigation of an alleged serious misconduct, criminal activity, or the safety of any person, the inmate shall be immediately removed from the GP and placed in administrative segregation. Administrative segregation may be accomplished by confinement in a designated Administrative Segregation Unit (ASU) or, in an emergency, to any single cell unit capable of providing secure segregation. CDCR staff shall not place inmates

into a SHU, ASU, or the SDP solely on the basis of their validation status. (a) Non Disciplinary Segregation. (1) Non Disciplinary Segregation (NDS) means temporary segregated housing placement for administrative reasons to include but are not limited to: (A) ASU placement for investigation of safety concerns not resulting from misconduct warranting a Rules Violation Report. (B) Investigation not related to misconduct or criminal activity. (C) Being a relative or an associate of a prison staff member. (D) Investigation related to being the victim of a Prison Rape Elimination Act (PREA) incident 1. If the placement in NDS is related to being the victim of a PREA incident, the inmate will be afforded all programs, privileges, and education in accordance with section 3044 and subsection 3190(b)(5)(C), of Title 15 of the CCR. If these are restricted, assigned staff shall document: 1) the opportunities that have been limited; 2) the duration of the limitation; and 3) the reasons for such limitations. 2. The facility shall assign such inmates to NDS only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If the period of segregation exceeds 30 days, reasoning shall be documented on an automated Classification Committee Chrono (05/19), which is incorporated by reference. 3. Every 30 days, the facility shall afford each such inmate with a review by the assigned custody supervisor to determine whether there is a continuing need for segregation from the general population. The review shall be documented on the CDC Form 128-B (Rev. 4/74), General Chrono. If the custody supervisor determines the need for continued segregation no longer exists, the inmate shall be referred to the Institution Classification Committee for a program review.

Evidence reviewed/analyzed by provision:

(a) (b) (c) (d) (e) Policy reflects compliance with the provisions of the standards. The PAQ states that no inmates have been placed in restrictive housing for protective custody to separate a victim from their abuser. The auditor found no reason to dispute this fact during the audit process. Due to the physical plant, the facility has numerous options for placing an inmate for separation from their abuser without having to resort to placement in protective housing status. The interview with the Warden confirmed that restrictive housing will be used as a last resort. Interviews with one supervisor of the restrictive area and one officer who was working in this area support that they have no knowledge of inmates who are alleged victims, or at risk of victimization ever being placed in this unit. Review of the investigations provided documentation that suspected perpetrators and when it is unclear who is a victim are placed in a holding cell, which based on the situation, the auditor found acceptable.

Summary of evidence to support findings: Based upon the written authority, observations and interviews, the auditor finds the facility is substantially compliant with this standard.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard

Auditor Discussion

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

- Title 15 3401.5 Staff Sexual Misconduct
- Title 15 3401.6 Staff Sexual Harassment
- DOM 54040.4 Inmate Education
- DOM 54040.7 Detection Notification and Reporting
- PREA Information for Orientation Handbook English and Spanish
- PREA Sexual Violence Awareness Brochure English and Spanish
- Sexual Abuse Assault prevention and intervention
- PREA Intake Information
- Shine the Light Poster - English and Spanish
- Intake receipt of orientation information regarding PREA
- PREA Confidential Correspondence with Rape Crisis Centers Mailroom instructions
- Training Module PREA 11053499
- Review of the investigations
- Interviews random staff
- Interviews random inmates
- Test of telephone for reporting outside entity - OIG
- Observations - posters with PREA information

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.4 Inmate Education states, *Verbal and written information shall be provided to inmates which will address: . . . Prevention/Intervention. Reporting. Treatment and Counseling. Initial inmate orientation on PREA will be provided to the inmate population in reception centers (RC) via either written or multi-media presentation on a weekly basis in both English and Spanish. Approved PREA posters which contain departmental policy and the sexual violence, staff sexual misconduct, and sexual harassment reporting telephone numbers shall be posted in designated locations throughout the institution and parole offices. At a minimum, these areas shall include all housing units, medical clinics, law libraries, visiting rooms, program*

offices, and inmate work areas. The PREA brochure entitled "Sexual Violence Awareness" and the PREA booklet entitled "Sexual Abuse/Assault - Prevention and Intervention" will be distributed during initial processing in RC institutions. Both the brochure and booklet shall be available through Receiving and Release or the correctional counselors at each institution, and the information will also be included in each institution's inmate orientation handbook. Appropriate provisions shall be made to ensure effective communication for inmates not fluent in English, those with low literacy levels, and those with disabilities. Institutions may consider the use of inmate peer educators to enhance the inmate population's knowledge and understanding of PREA and sexually transmitted diseases. PREA inmate education shall be documented on a CDC Form 128-B, General Chrono. The inmate shall be asked to sign the CDC Form 128-B indicating they received the training. Refusal to sign will be noted by staff on the CDC Form 128-B. The CDC Form 128-B shall be forwarded to Inmate Records for appropriate scanning into the Electronic Records Management System (ERMS).

Title 15 3401.5 Staff Sexual Misconduct states, Reporting Requirements. Any employee who observes, or who receives information from any source concerning staff sexual misconduct, shall immediately report the information or incident directly to the hiring authority, unit supervisor, or highest-ranking official on duty. Failure to accurately and promptly report any incident, information or facts which would lead a reasonable person to believe sexual misconduct has occurred may subject the employee who failed to report it to disciplinary action.

Title 15 3401.6 states, Reporting Requirements. Any employee who observes, or who receives information from any source concerning staff sexual harassment shall immediately report the information or incident directly to the hiring authority, unit supervisor, or highest-ranking official on duty. Failure to accurately and promptly report any incident, information or facts which would lead a reasonable person to believe staff sexual harassment has occurred may subject the employee who failed to report it to disciplinary action.

DOM 54040.7 Detection Notification and Reporting states, . . . in writing, utilizing the Inmate Appeals Process, through the sexual assault hotline, or through a third party. CDCR employees have a responsibility to protect the inmates in their custody. All staff are responsible for reporting immediately and confidentially to the appropriate supervisor any information that indicates an inmate is being, or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment. In addition to reporting, employees have a responsibility to assist the inmate and refer him/her to medical/mental health for evaluation. Staff shall ensure the reporting of information is done as soon as possible and in a confidential manner. A CDCR Form 837, Crime Incident Report, shall be submitted for each allegation of Sexual Violence against an inmate by an inmate in compliance with DOM Section 51030.3, except as described in DOM Section 54040.7.3. An inmate may report sexual violence, staff sexual misconduct, or sexual harassment that occurs under the jurisdiction of the CDCR to any staff member. If the staff who receives the report is non-custody, he/she shall immediately notify his/her supervisor and the Watch Commander. Each employee who observes the incident or is provided a report by the victim must complete required reports. An inmate may also report sexual violence, staff sexual

misconduct, or sexual harassment that occurs under the jurisdiction of the CDCR, to the Ombudsman for Sexual Abuse in Detention Elimination in the Office of the Inspector General.

*Sexual Abuse/Assault Prevention and Intervention: Know your Rights and Responsibilities (English and Spanish), issued to each inmate upon arrival at SCC and additionally when arriving at the Conservation camps provides the following information: Address to the Center for Non-Violent Community, phone number *4357# (*HELP#) address for Just Detention International, telephone numbers and addresses to Office of Internal Affairs , address to OIG PREA Ombudsman, Officer of Inspector General with the direct dial number *7732# (*PREA#)noting the OIG will keep your name anonymous upon request.*

PREA Information for Orientation Handbook English and Spanish provides the same information and is available in the inmate issued tablet and provided on posters visible to the auditor throughout the facility (SCC) and all Conservation Camps (Mt. Bullion, Vallecito, Pine Grove, Growlersberg, Washington Ridge, Ben Lomand, Gabilan, Miramonte, Mountain Home, Owens Valley, Fenner Canyon, Francisquito, Acton, Holton, Julius Klein, Prado, Oak Glen, Bautista, La Cima, Delta, Konocti, Parlin Fork, Eel River, Alder, Deadwood, Trinity River, Sugar Pine, Intermountain, Antelope, Ishi, and Salt Creek).

Evidence reviewed/analyzed by provision:

(a)(b) This provision requires that the agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Numerous educational materials, posters and inmate manuals provide inmates with the knowledge that they can report verbally to any staff, in writing to include a grievance, third party on behalf of another inmate, and by calling the phone number for the Office of Inspector General (OIG), anonymous, confidential reporting number where no personal identification number (PIN) is required. This information was visibly observed at all operations at SCC and at all thirty-one conservation camps. The auditor tested this reporting process at thirteen conservation camps and once from an inmate phone at SCC. Confirmation of receipt of the report was received via email to the PREA Coordinator then forwarded to the auditor. Two investigations were initiated by the inmate calling this number. Inmate interviews demonstrated to the auditor that they are aware of the multiple avenues available to them for reporting any concerns with sexual abuse and sexual harassment. All inmate interviews demonstrated that the inmates are well informed on how to report PREA, especially given that the information is visibly available and also provided in the inmate tablets for those housed at SCC. The inmates confirmed, the auditor observed that they have access to telephones from tablets, inmate phones in housing units and phone booths in the recreation yard. The conservation camps had three to four phone booths for use. Inmate interviews said they were operatable, and when not working, they are fixed immediately. All random staff interviews demonstrated understanding that reports of sexual abuse and sexual harassment can be received by inmates

anonymously, third party, verbally, in writing, from outside family/friends and grievances. The facility reports they do not house inmates retained solely for civil immigration, but policy (DOM 54040.7) does afford access to consular officials and Department of Homeland Security.

(c) In addition to policy, the training module reinforces that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. This policy applies to all inmates and persons employed by CDCR and includes volunteers and independent contractors assigned to an institution, community correctional facility, conservation camp, or parole. All staff are responsible for reporting immediately and confidentially, 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. In addition to this reporting, you have a responsibility to assist the inmate and refer them to medical/mental health for evaluation. Review of the investigations demonstrated reports made by security staff, mental health staff, third party phone calls received, one suspicion (possible detection of sexual abuse), grievance (two) and as indicated by the OIG reporting line.

(d) Random staff interviews revealed to the auditor their awareness that if they needed to, they too could call the OIG office to make a report. Posters informing staff of reporting numbers for any concerns were visible in staff occupied areas of the facility by the auditor,

Summary of evidence to support findings: Policies, educational materials provided to inmates, testing of the outside reporting line, inmate interviews, staff interviews, review of the investigations, observation/confirmation of access to telephones all provided ample evidence to support a finding of compliance.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Title 15 Article 8 3084 Incarcerated Person Sexual Safety · DOM 54040.7.2 Notification via Third Party Reporting of Misconduct Against an Employee, Contractor, or Volunteer · DOM 54040.15.1 Alleged Victim – False Allegations · Grievance Form · Interview Warden

- Interview with Grievance Coordinator
- Interview with inmates (law library clerk and random informal conversations)
- PAQ

The PAQ provided the following information:

one grievance regarding sexual abuse

one grievance alleging sexual abuse that reached final decision with 90 days

zero grievances alleging sexual abuse that involved extensions

zero emergency grievances

zero grievances alleging imminent risk of sexual abuse

zero grievances written in bad faith

zero third party grievances where the inmate declined third-party assistance

zero grievances alleging imminent sexual abuse

The following policy excerpts supports compliance with the requirements of this standard:

Title 15 Article 8 Incarcerated Person Sexual Safety states, *Staff-on-Incarcerated Person Sexual Misconduct, and Sexual Harassment of Incarcerated Persons. (a) A grievance in whole or part containing allegations of incarcerated person-on-incarcerated person sexual violence, staff-on-incarcerated person sexual misconduct, or sexual harassment of incarcerated persons shall be immediately reviewed by the Hiring Authority or designee. The incarcerated person shall not be required to use any informal grievance process, or otherwise attempt to resolve with staff, an alleged incident of incarcerated person-on-incarcerated person sexual violence or staff-on-incarcerated person sexual misconduct. When the grievance alleges or indicates that the incarcerated person may be in substantial risk of imminent incarcerated person-on-incarcerated person sexual violence, or imminent staff-on-incarcerated person sexual misconduct, then a risk assessment shall be immediately undertaken. (b) An incarcerated person shall not submit a grievance on behalf of another person unless the grievance contains an allegation of incarcerated person-on-incarcerated person sexual violence, staff-on-incarcerated person sexual misconduct, or sexual harassment of any incarcerated person. (c) Staff-on-Incarcerated Person Sexual Misconduct. (1) There shall be no time limit for allegations of staff-on-incarcerated person sexual misconduct. (2) A risk assessment determination of all staff-on-incarcerated person sexual misconduct related grievances shall be immediately completed by the Hiring Authority to determine if the incarcerated person is in substantial risk of imminent staff-on-incarcerated person sexual misconduct. If the assessment results in a determination that the incarcerated person is in substantial risk of imminent staff-on incarcerated person sexual misconduct, the Hiring Authority shall take immediate corrective action. (3) The Hiring Authority shall provide an initial*

response to the incarcerated person within 48 hours. (4) An initial risk assessment shall be documented within 48 hours and the completed risk assessment determination by the Hiring Authority shall be documented within 5 calendar days describing whether the incarcerated person was determined to be in substantial risk of imminent staff-on-incarcerated person sexual misconduct and the action taken in response to the grievance. (5) The incarcerated person may consider an absence of a timely response at any level a denial at that level. (d) Incarcerated Person-on-Incarcerated Person Sexual Violence. (1) There shall be no time limit for allegations of incarcerated person on-incarcerated person sexual violence. (2) A risk assessment determination of all incarcerated person-on incarcerated person sexual violence related grievances shall be immediately completed by the Hiring Authority to determine if the incarcerated person is in substantial risk of imminent incarcerated person-on-incarcerated person sexual violence. If the assessment results in a determination that the incarcerated person is in substantial risk of imminent incarcerated person-on-incarcerated person sexual violence, the Hiring Authority shall take immediate corrective action. (3) The Hiring Authority shall provide an initial response to the incarcerated person within 48 hours. (4) An initial risk assessment shall be documented within 48 hours and the completed risk assessment determination by the Hiring Authority shall be documented within 5 calendar days describing whether the incarcerated person was determined to be in substantial risk of imminent incarcerated person-on-incarcerated person sexual violence and the action taken in response to the grievance. (5) The incarcerated person may consider an absence of a timely response at any level a denial at that level. NOTE: Authority cited: Section 5058, Penal Code.

Reporting Requirements. Any employee who observes, or who receives information from any source concerning staff sexual harassment shall immediately report the information or incident directly to the hiring authority, unit supervisor, or highest-ranking official on duty. Failure to accurately and promptly report any incident, information or facts which would lead a reasonable person to believe staff sexual harassment has occurred may subject the employee who failed to report it to disciplinary action.

The grievance Coordinator shall ensure that a written grievance decision is completed no later than 60 calendar days after receipt of the grievance, unless other statutory or regulatory authority requires a response in less than 60 calendar days, and contains one of the following decisions as to each claim in the grievance: (1) "Denied," meaning that the Reviewing Authority found by a preponderance of the evidence available that all applicable rules were followed; (2) "Granted," meaning that the Reviewing Authority found by a preponderance of the evidence available that all applicable rules were not followed, in which case the Reviewing Authority shall order an appropriate remedy; (3) "No Jurisdiction,"

DOM 54040.7.2 Notification via Third Party Reporting of Misconduct Against an Employee states, Against an Employee, Contractor, or Volunteer When a third party, on behalf of an inmate, makes an allegation of staff sexual misconduct or sexual harassment against a departmental employee, contractor, or volunteer, that

allegation or complaint shall be submitted in writing to the Hiring Authority of the area in which the individual is assigned. Complaints against departmental employees should be filed in accordance with CCR 3391. The term "third party" includes inmates, family members, attorneys, or outside advocates. Inmates will file complaints against staff utilizing the CDCR appeals forms. Complaints determined to involve personnel from other agencies or institutions shall be forwarded to the proper Hiring Authority through the chain of command for appropriate response. When a third party files such a complaint on behalf of an inmate, a supervisory employee shall take the alleged victim to a private setting to discuss the complaint and assess immediate housing needs. Third party reports of staff sexual misconduct or staff sexual harassment shall be forwarded to the Hiring Authority. The Hiring Authority shall forward the documented third party report of the allegation to a Locally Designated Investigator (LDI). The LDI will conduct inquiry work until sufficient information is obtained to warrant an Office of Internal Investigations (OIA) investigation, or the information collected refutes the allegation, as determined by the Hiring Authority. The inquiry and/or investigative information will be thoroughly documented on a Confidential Memorandum. The Confidential Memorandum shall be maintained with the investigatory file. Standard investigatory procedures will be utilized and the complaint will be logged on the CDCR Form 2140, Internal Affairs Allegation Log. Any allegation of staff sexual misconduct or staff sexual harassment believed to constitute an emergency shall be reported immediately to a supervisor. The supervisor shall notify the Watch Commander who shall immediately notify the Hiring Authority. Notification to the OIA, Regional Office, Special Agent in Charge (SAC) or OIA Administrative Officer of the Day (AOD) shall also be made when immediate investigative action is necessary. In the event of such an emergency, staff shall follow-up with a written report within one (1) day of learning the information. Examples that constitute an emergency are as follows: • Possible loss of life or serious bodily injury; • Serious breach of facility security; • Further aggravation of a potentially dangerous situation; • Activities which seriously compromise or jeopardize an investigation; • An illegal activity which may occur imminently. 54040.7.3

Notification via Third Party Reporting of Sexual Violence or Sexual Harassment Against an Inmate When a third party, on behalf of an inmate, makes an allegation of sexual violence or sexual harassment against an inmate, that allegation or complaint shall be submitted in writing to a custody supervisor. The Custody Supervisor shall forward the documented third party report of the allegation to the Locally Designated Investigator (LDI) for investigation and determination of the appropriate disposition. Complaints determined to involve inmates from other agencies or institutions shall be forwarded to the proper hiring authority through the chain of command for appropriate response. Any allegation believed by staff to constitute an emergency shall be reported immediately to a supervisor. See examples listed in previous section. The allegation will be investigated and documented on a Confidential Memorandum or CDC Form 128-B, General Chrono utilizing standard investigatory procedures, as outlined in DOM, Chapter 5, Article 44, Section 54040.12. If warranted the suspect may be subject to administrative/criminal proceedings per DOM, Chapter 5, Article 44, Section 54040.11. Completion of a CDCR 837, Crime Incident Report is required on third party reports and anonymous reports only if the allegation is substantiated.

DOM 54040.15.1 Alleged Victim - False Allegations states, *Following the investigation into sexual violence or staff sexual misconduct, if it is determined that the allegations made were not in good faith or based upon a reasonable belief that the alleged conduct occurred, the inmate making the allegations may be subject to disciplinary action. A charge of "making a false report of a crime," a Division "E" offense, is appropriate only if evidence received indicates the inmate knowingly made a false report. An allegation deemed unsubstantiated or unfounded based on lack of evidence, does not constitute false reporting.*

Evidence reviewed/analyzed by provision:

(a) (b) (c)(d) (e) (f) (g) Policies noted above address all requirements of all provisions of the standard. The agency commits to responding within 60 days, exceeding the requirement, and extensions are not allowed. Two grievances resulted in investigations that were completed within the 60 days for the agency to conduct the Sexual Abuse Incident Review. The auditor discussed the grievance process with the inmate law library clerk who provided no indication of any problems with grievances alleging sexual abuse or any problems with inmates obtaining a grievance form. The interview with the Grievance Coordinator confirmed this as well. The auditor randomly informally questioned inmates about access to grievance and all confirmed there are aware of no issues. This included numerous inmates at the Conservation Camps (Mt. Bullion, Vallecito, Pine Grove, Growlersberg, Washington Ridge, Ben Lomand, Gabilan, Miramonte, Mountain Home, Owens Valley, Fenner Canyon, Francisquito, Acton, Holton, Julius Klein, Prado, Oak Glen, Bautista, La Cima, Delta, Konocti, Parlin Fork, Eel River, Alder, Deadwood, Trinity River, Sugar Pine, Intermountain, Antelope, Ishi, and Salt Creek), who have a process for grievances where inmates place them in a red secured box which is picked up weekly by the delivery process and replaced therefore supporting that camp staff cannot tamper with any grievances a conservation camp inmate attempts to file. The auditor observed the "Red Box" at all thirty-one conservation camps visited. The auditor learned that Title 15 is the authority for all matters in the prison and are updated and provided to the inmate population when updated.

Summary of evidence to support findings: Policy, Title 15, interview with the law library clerk, interview with the Grievance Coordinator random informal conversations with inmates regarding access to grievances and observation of grievance boxes gave the auditor sufficient evidence to support a finding of compliance with all provisions of this standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence

related to this standard:

- DOM 54040.8.2 Victim Advocate and Victim Support Person
- Mailroom correspondence Confidentiality instructions
- PREA Orientation Handbook - English and Spanish
- PREA Sexual Violence Awareness Brochure - English and Spanish
- Sexual Abuse Assault Prevention and Intervention Information to inmates - English and Spanish
- MOU CDCR and Center for a Non-Violent Community
- Observations of phone number on posters located in inmate phones.
- PREA Postings English and Spanish
- Interviews random inmates - eight two total
- Interview with Mailroom staff
- Review of access to mail and telephones - testing of the confidential toll-free number

The following policy excerpts supports compliance with the requirements of this standard:

DOM 54040.82 Victim Advocate and Victim Support Person states, *Victims of alleged sexual violence or staff sexual misconduct have the right under PC 264.2, PC 679.04, and/or 28 CFR, Standard §115.21 to a Victim Advocate and Victim Support Person for both forensic medical examination (where evidentiary or medically appropriate) and for the investigatory interview. Victim Advocate and Victim Support Person for Medical Examination In incidents where an inmate has alleged sexual violence or staff sexual misconduct, the watch commander or designee shall immediately notify the local Rape Crisis Center whenever a victim of a sexual violence or staff sexual misconduct, is treated at the local SART location and/or transported to an outside hospital for any forensic examination. The victim has the right to have a victim advocate present and a victim support person of the victim's choosing (see PC Sections 679.04 and PC 264.2 and/or 28 CFR, Standard §115.21) at the forensic medical examination. In most cases, the victim advocate will be from the local rape crisis center. The victim support person may be excluded from the examination if the watch commander/designee or medical provider determines that the presence of the victim support person would be detrimental to the purpose of the examination or poses a threat to the safety and security of the institution or outside hospital. If a victim support person is excluded, the watch commander/designee or medical provider who made the decision shall document the reason (i.e., if time for the support person to attend would result in a significant delay and/or the person requested would present a risk to the safety/security of the institution) on the CDCR Form 837 if the allegation is against another inmate or on a confidential*

memorandum if the allegation is against staff. A Memorandum of Understanding (MOU) between the Institution and Local Rape Crisis Center (Victim Advocate) shall be established to ensure that both agencies understand their roles and responsibilities when responding to sexual violence or staff sexual misconduct. Victim Advocate and Victim Support Person for Investigatory Process Victims of alleged sexual violence or staff sexual misconduct, have the right to have a victim advocate and a victim support person of the victim's choosing (see PC Sections 679.04 and 264.2 and/or 28 CFR, Standard §115.21) present at any investigatory interview, interview by law enforcement, the district attorney, or defense attorneys. If the investigator or the district attorney determines that the presence of the victim support person would be detrimental to the interview, the victim support person may be excluded from the interview. The victim must be notified verbally or in writing of this right by the attending investigator or the district attorney prior to the interview. Reasons for exclusion of the victim support person are the same as identified previously in the medical examination process and shall be documented as required above. Victim Advocates for Emotional Support Services The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available. This information is available to the inmate population in the PREA Brochure entitled "Sexual Violence Awareness" and the PREA booklet entitled "Sexual Abuse/Assault - Prevention and Intervention". It should also be included in each institution's inmate orientation handbook. For persons detained solely for civil immigration purposes, information for the appropriate immigrant services agency shall be provided by staff. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

Evidence reviewed/analyzed by provision:

(a) (b) (c) The Orientation Handbook informs inmates of the following: Privacy Written correspondence between an inmate and a rape crisis center advocate or OIG/OIA is confidential pursuant to CAL. EVID. CODE § 1035.4. The outside of envelope must state "Evid. Code 1035.4 Confidential/Privileged Communication" to be processed in this manner. All telephone calls from the inmate telephone system require a PIN. However, calls placed to the local rape crisis center or OIA/OIG will be redirected to a non-recorded, secure, and private phone line. You may remain anonymous upon request when reporting to OIA/OIG. In-person or virtual visits with a rape crisis center advocate may be arranged by the facility's PREA Compliance Manager in as private and confidential manner as possible. When a report of sexual abuse or sexual harassment is received in any format, it will be handled with an appropriate degree of confidentiality and referred to the applicable staff member(s) for inquiry or investigation. Reports of abuse that involve a child, elder, or dependent adult will be forwarded to the authorities in accordance with mandatory reporting laws.

Mailroom Correspondence, observed by the auditor when visiting the mailroom instructs mailroom staff regarding the notation of confidential CAL. EVID. CODE § 1035.4.s not be read and only opened in the presence of the addressee. This process was confirmed by the interview with mailroom staff.

- The MOU between CDCR and Center for a Non-violent Community (CNVC) supports the following: security clearances for contractor personnel training, follow up and ongoing Emotional Support Services related to Sexual abuse as requested by the incarcerated inmate regardless of status of an investigation
- Toll free non-recorded calls using the inmate telephone system to this organization, in person crisis counseling sessions
- Maintain documentation for each Victim Advocate of the individual's qualifications for Sexual Assault Counselor in California Evidence Code § 1052.2
- Respond to requests from Institution staff to provide a Victim Advocate for hospital accompaniment for incarcerated victims during the forensic medical examination process and investigative interview(s).
- Provide Emotional Support Services Related to Sexual Abuse in response to requests from incarcerated victims through one or more of the following methods: a. toll-free, non-recorded, non-monitored calls utilizing the inmate telephone system to Center for a Non-Violent Community (CNVC)'s hotline number.. b. confidential written correspondence to and from Victim Advocates pursuant to CALIFORNIA EVIDENCE CODE § 1035.4 - outside of envelope must state "Evidence Code 1035.4 Confidential/Privileged Communication"; c. in-person crisis counseling sessions between incarcerated victims and Contractor Personnel utilizing meetings prearranged by the PCM or designee; d. telephone calls to Contractor personnel via chaplain, counselor, psychologist, or ISU staff as resources and scheduling allow.
- Inform Institution Chief of Mental Health Services or designee via the watch commander, of any emergency mental health needs of the incarcerated victim, with proper consent or as required by reporting laws, and without disclosing anything beyond immediate concern.
- Maintain confidentiality as required by state and federal laws for sexual assault counselors pursuant to CALIFORNIA EVIDENCE CODE § 1035.8.

In addition to other requirements. The agreement is 12 pages long. It includes the Prison Rape Elimination Policy

The auditor tested this phone number at thirteen conservation camps from the inmate phone and quickly connected to a human voice asking if the auditor wanted to talk to a counselor. No inmate PIN was required. Inmate interviews all confirmed to the auditor their awareness of a poster with a turquoise ribbon (noting information for the victim advocate), but only three indicated to the auditor what it was. The other seventy-nine (79) indicated they haven't read the poster as they have no need for the information provided. The auditor finds this typical when conducting audits. Further discussion indicated approximately seventy-six (76) of the inmates interviewed believed it was confidential; a mailing address was provided, and the call was free (as all calls are now free). The others indicated "it should be" confidential. The auditor confirmed that information is provided in the Inmate Handbook and other written materials provided to the inmates, noting the call is free, not recorded, not

	<p>monitored.</p> <p>Summary of evidence to support findings: Policies, MOU with victim advocate organization, directions for Confidential mail, interview with the mailroom staff, observations of posters throughout SCC and all conservation camps, testing of the phone line access - no personal identification required, review of information provided to the inmate population all provided sufficient evidence for the auditor to support a finding of compliance.</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.7.2 Notification via Third Party Reporting of misconduct Against an Employee, Contractor, or Volunteer · DOM 54040.73 Notification via Third Party Reporting of Sexual Violence or Sexual Harassment Against an Inmate · Agency website - PREA Reporting Information - Prison Rape Elimination Act (PREA) · Interview with Warden · Interview with the PREA Coordinator · Random staff interviews · Review of investigations · Testing of third-party reporting · FAQ <p>The following policy excerpts demonstrate compliance with the provisions of the standards.</p> <p>DOM 54040.7.2 Notification via Third Party Reporting of misconduct Against an Employee, Contractor, or Volunteer and DOM 54040.73 Notification via Third Party Reporting of Sexual Violence or Sexual Harassment Against an Inmate state the following: <i>54040.7.2 Notification via Third Party Reporting of Misconduct Against an Employee, Contractor, or Volunteer When a third party, on behalf of an inmate, makes an allegation of staff sexual misconduct or sexual harassment against a departmental employee, contractor, or volunteer, that allegation or complaint shall be submitted in</i></p>

writing to the Hiring Authority of the area in which the individual is assigned. Complaints against departmental employees should be filed in accordance with CCR 3391. The term "third party" includes inmates, family members, attorneys, or outside advocates. Inmates will file complaints against staff utilizing the CDCR appeals forms. Complaints determined to involve personnel from other agencies or institutions shall be forwarded to the proper Hiring Authority through the chain of command for appropriate response. When a third party files such a complaint on behalf of an inmate, a supervisory employee shall take the alleged victim to a private setting to discuss the complaint and assess immediate housing needs. Third party reports of staff sexual misconduct or staff sexual harassment shall be forwarded to the Hiring Authority. The Hiring Authority shall forward the documented third party report of the allegation to a Locally Designated Investigator (LDI). The LDI will conduct inquiry work until sufficient information is obtained to warrant an Office of Internal Investigations (OIA) investigation, or the information collected refutes the allegation, as determined by the Hiring Authority. The inquiry and/or investigative information will be thoroughly documented on a Confidential Memorandum. The Confidential Memorandum shall be maintained with the investigatory file. Standard investigatory procedures will be utilized and the complaint will be logged on the CDCR Form 2140, Internal Affairs Allegation Log. Any allegation of staff sexual misconduct or staff sexual harassment believed to constitute an emergency shall be reported immediately to a supervisor. The supervisor shall notify the Watch Commander who shall immediately notify the Hiring Authority. Notification to the OIA, Regional Office, Special Agent in Charge (SAC) or OIA Administrative Officer of the Day (AOD) shall also be made when immediate investigative action is necessary. In the event of such an emergency, staff shall follow-up with a written report within one (1) day of learning the information. Examples that constitute an emergency are as follows: Possible loss of life or serious bodily injury; Serious breach of facility security; Further aggravation of a potentially dangerous situation; Activities which seriously compromise or jeopardize an investigation; An illegal activity which may occur imminently. 54040.7.3

Notification via Third Party Reporting of Sexual Violence or Sexual Harassment Against an Inmate When a third party, on behalf of an inmate, makes an allegation of sexual violence or sexual harassment against an inmate, that allegation or complaint shall be submitted in writing to a custody supervisor. The Custody Supervisor shall forward the documented third-party report of the allegation to the Locally Designated Investigator (LDI) for investigation and determination of the appropriate disposition. Complaints determined to involve inmates from other agencies or institutions shall be forwarded to the proper hiring authority through the chain of command for appropriate response. Any allegation believed by staff to constitute an emergency shall be reported immediately to a supervisor. See examples listed in previous section. The allegation will be investigated and documented on a Confidential Memorandum or CDC Form 128-B, General Chrono utilizing standard investigatory procedures, as outlined in DOM, Chapter 5, Article 44, Section 54040.12. If warranted the suspect may be subject to administrative/criminal proceedings per DOM, Chapter 5, Article 44, Section 54040.11. Completion of a CDCR 837, Crime Incident Report is required on third party reports and anonymous reports only if the allegation is substantiated.

The agency website has the following information under the tab "Reporting": PREA Reporting Information

All allegations of sexual abuse should be reported and will be investigated. To report, do one of the following:

Use the Facility Locator to find the contact information for the facility in question
Call or mail the Office of Internal Affairs by region:

Northern Region

P.O. Box 3009

Sacramento, CA 95812

(916) 464-3805

Central Region

5016 California Avenue, Suite 210 Bakersfield, CA 93309

(661) 335-7338

Southern Region

9035 Haven Avenue, Suite 105

Rancho Cucamonga, CA 91730

(909) 466-1052 unable to reach

Call or mail the Office of the Inspector General PREA Ombudsperson at:

Office of the Inspector General

10111 Old Placerville Road, Suite 110

Sacramento, CA 95827

(800) 700-5952

Provide as much detail as possible, such as:

Inmate victim's name and CDCR number

Perpetrator's name and ID number (if available)

Facility at which the incident occurred

When/where the incident occurred (date, time, location - i.e. cell, showers, etc.)

Incident description

Your name, contact information and relationship to the inmate/victim

Evidence reviewed/analyzed by provision:

Policies and the website provide detailed options and support for a third party to report any concerns they may have regarding sexual abuse or sexual harassment occurring the prison. Review of the investigations confirmed that two were initiated by a person calling and making a third-party complaint from outside the facility. The investigations revealed that they were immediately communicated to the appropriate staff (PCM and investigators) and an investigation was immediately initiated. The interview with the Warden and PCM provided responses supporting that all third-party allegations will be received and immediately addressed. All random staff interviews confirmed their awareness that they are to report and respond to third party allegations without hesitation. The auditor tested the reporting line by calling the phone number for Internal Affairs Northern Region, leaving a message and getting a return phone call three hours later.

	<p>Summary of evidence to support findings: Policy, review of the website, interviews with the Warden, PREA Coordinator and random staff, review of investigations, and testing of the phone number provided on the website all provided the auditor with ample evidence to support a finding of compliance with this standard. The auditor finds that the website supports the clarifications of the FAQ issued October 2015 such that the public can reasonably access the information on how to make a report of sexual abuse or sexual harassment on behalf of an inmate.</p>
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115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 64040.4 Staff Training · DOM 64040.7 Detection, Notification, and Reporting · DOM 54040.7 &8 Response · Training Curriculum · Review of investigations · Interview with the PREA Coordinator · Interview with investigators · Informed consent for mental health · Observations · Interviews random staff · Interview with medical and mental health professionals <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p><i>DOM 64040.4 Staff Training states, All staff, including employees, volunteers, and contractors, shall receive instruction related to the prevention, detection, response, and investigation of inmate sexual violence, staff sexual misconduct, and sexual harassment. This training will be conducted during new employee orientation, annual training, and will be included in the curriculum of the Correctional Training Academy. The training will be gender specific based on the inmate population at the assigned institution. Participation in the training will be documented on CDCR 844, Training</i></p>

Participation Sign-in Sheet.

DOM 64040.7 Detection, Notification, and Reporting Inmates may report violations of this policy to any staff member verbally or in writing, utilizing the Inmate Appeals Process, through the sexual assault hotline, or through a third party. first-response duties, or the investigation of the inmate's allegations. CDCR employees have a responsibility to protect the inmates in their custody. All staff are responsible for reporting immediately and confidentially to the appropriate supervisor any information that indicates an inmate is being, or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment.

DOM Section 54040.7 All staff are responsible for reporting immediately and confidentially to the appropriate supervisor any information that indicates an offender is being, or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment. An inmate may report sexual violence, staff sexual misconduct, or sexual harassment that occurs under the jurisdiction of the CDCR to any staff member. If the staff who receive the report is non-custody, he/she shall immediately notify his/her supervisor and the Watch Commander. Each employee who observes the incident or is provided a report by the victim must complete the required reports. Any staff member, with significant concern that an inmate may be subject to sexual victimization, shall immediately notify a custody supervisor who will refer that inmate for a mental health evaluation per existing policy regarding mental health referrals. This referral will be completed using the CDCR Form 128-MH5, Mental Health Referral Chrono.

DOM 54040.8 Response states, 54040.8 54040.8 Response It is the expectation that all staff shall maintain professional behavior when interacting with an alleged victim of sexual violence or staff sexual misconduct and display sensitivity to the potential emotional impact of the It is the expectation that all staff shall maintain professional behavior when interacting with an alleged victim of sexual violence or staff sexual misconduct and display sensitivity to the potential emotional impact of the situation. All staff are reminded that this is a very serious situation. Incident specific information shall be treated as confidential, and disclosure made only situation. All staff are reminded that this is a very serious situation. Incident specific information shall be treated as confidential, and disclosure made only permitted or required by law. permitted or required by law.

Evidence reviewed/analyzed by provision:

(a) (b) In accordance with policy and reinforced in the training curriculum, the agency does 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. And, apart from reporting to designated supervisors or officials, staff shall not reveal 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,

	<p>and other security and management decisions.</p> <p>Training module reinforces the following: Incident-specific information will be treated as confidential, and disclosed only to employees who have a “need to know” and to other persons and entities as permitted by law.</p> <p>All random staff interviews confirmed without hesitation their awareness of reporting knowledge, suspicion, retaliatory actions or any staff neglect that led to this behavior and noted the requirement to maintain confidentiality.</p> <p>(c) The informed consent for mental health care form includes a review of items that are reportable to include engaging in acts of sexual misconduct or have been sexually assault or harassed by other inmates or staff. The Prison Rape Elimination Act Authorization for Release of Information notes the following: This form shall be completed if a patient over the age of 18 has alleged to California Health Care Services staff to be a victim of sexual violence or misconduct that occurred outside of an institutional setting for the purpose of reporting the incident to the appropriate law enforcement agency, prosecutor’s office and any other appropriate agency.</p> <p>(d) At this facility, no inmate is housed who is under the age of 18 years old.</p> <p>(e) Review of the investigations and interview with two investigators confirm that they have received reports of possible sexual abuse or sexual harassment immediately.</p> <p>Finding compliance is based on the following: Policy supports the requirements of the standard provision. Based on information noted above and overall observations during the audit, the auditor found staff credible and concludes that the annual training assures staff awareness of this requirement. Review of investigations supported that allegations were reported immediately and with follow-up in writing. The auditor concludes there is sufficient evidence to support a finding of compliance.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM Section 54040.7.3 · Observations · Interviews Director of Adult Institutions · Interview Warden

	<ul style="list-style-type: none"> · Interview random staff · Review of the investigations · PAQ <p>The PAQ indicates there has been no time the facility determined that a inmate was at risk of imminent sexual abuse. The auditor found no reason to dispute this during the audit process.</p> <p>The following policy excerpts demonstrate compliance with the provisions of the standards.</p> <p><i>DOM Section 54040.7.3. Any staff member, with significant concern that an inmate may be subject to sexual victimization, shall immediately notify a custody supervisor who will refer that inmate for a mental health evaluation according to the existing policy regarding mental health referrals. This referral will be completed using the CDCR Form 128-MH5, Mental Health Referral Chrono.</i></p> <p>Evidence reviewed/analyzed by provision:</p> <p>The interview with the Director of Adult Institutions and the Warden confirmed that an inmate at imminent risk of sexual abuse or any imminent risk of harm shall have immediate action taken to ensure his safety. This can include a transfer. All staff interviews confirmed to the auditor that they would take immediate action if they believed an inmate was at imminent risk of sexual abuse. Staff confirmed that this request to intervene before something has occurred would be supported, and action would be taken to protect the inmate before the suspected event occurred. Review of the investigations support that immediate action was taken to ensure the inmate safety after learning of any potential sexual abuse or sexual harassment that has been reported.</p> <p>Finding the standard compliant is based on the following: Information noted above and overall observations during the audit, the auditor found staff credible and that to protect inmate is an integral part of the culture of this facility.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.7.4 Notification from/to Other Confinement Facilities Interview with Director of Adult Institutions

	<ul style="list-style-type: none"> · Interview Warden · Review of the notification · Review of the investigation · PAQ <p>The PAQ indicates that one allegation was received that an inmate was abused while confined at another facility, one allegation of sexual abuse was received from another facility.</p> <p>The following policy excerpt supports compliance with the requirements of this standard:</p> <p><i>54040.7.4 Notification from/to Other Confinement Facilities Upon receiving an allegation that an inmate was the victim of sexual violence or staff sexual misconduct while confined at another institution/confinement facility, the hiring authority where the allegation was received shall notify the hiring authority of the institution or appropriate office of the agency where the alleged sexual violence or staff sexual misconduct occurred. This initial notification will be made via telephone contact or electronic mail and will be followed up with a written summary of the alleged victim's statements. Such initial notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The institution or facility where the alleged sexual violence or staff sexual misconduct is reported will be responsible for completing the SSV-IA form.</i></p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a), (b) (c) (d) Interview with the Warden revealed understanding of the requirement to immediately report (within 72 hours) by his office, noting one example of this has occurred. Review of one investigation demonstrated that an allegation was received and reported to the facility where the alleged abuse occurred.</p> <p>Summary of evidence to support findings: Policy, interviews, review of the notification/ investigation provided the auditor with sufficient evidence to support a finding of compliance.</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.8 Response

- PREA Response Checklists – Initial Contact Guide , Custody Supervisor Checklist,

- Training curriculum

- Observations

- Random staff interviews

- Informal interviews with food service staff, industry staff, maintenance staff, commissary staff, laundry staff, warehouse staff and ecology staff

- PAQ

The PAQ indicates that during the previous 12 months:

There were fourteen allegations of sexual abuse

- o Fourteen times the first security staff member to respond separated the alleged victim and abuser

- o Two times where staff were notified within a time period that still allowed for the collection of physical evidence

- o Two times staff were notified within a time period that still allowed for the collection of physical evidence.

- o Of these allegations where staff were notified within a time period that still allowed for the collection of physical evidence, two times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence

- o Of these allegations where staff were notified within a time period that still allowed for the collection of physical evidence, two times the first security staff member to respond to the report requested 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:

- o Of these allegations where staff were notified within a time period that still allowed for the collection of physical evidence, two times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating:

- o There were zero incidents of alleged sexual abuse in which a non-security staff member was the first responder

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.8 Response states, *Initial Contact Upon the initial contact with an*

employee, that employee will take the alleged victim to a private secure location. The Initial Contact Guide has been developed to assist employees in completing the tasks associated with initial contact. The employee shall request the victim does not: Shower; Remove clothing without custody supervision; Use the restroom facilities and/or; Consume any liquids.

Evidence reviewed/analyzed by provision:

(a)(b) The Initial contact Guide addresses the following: Request the victim, Ensure the suspect does not shower, brush teeth, remove clothing without custody supervision, use restroom, consume liquids. Review of investigations demonstrated these guides were used where applicable. Interviews with random security staff demonstrated their awareness of the process for ensuring usable physical evidence. Informal interviews with food service staff, industry staff, maintenance staff, commissary staff, laundry staff, warehouse staff and ecology staff demonstrated to the auditor their understanding of their role if they are the first to be informed of a sexual abuse allegation (keep the inmate with them until a security staff can take over supervision, ask them not to do anything that would destroy evidence.) The facility identified a security staff who acted as a first responder for an incident that led to an outside visit to the hospital for a SANE exam approximately eighteen months earlier supported strong knowledge and practice of the requirements as articulated to ensure usable physical evidence is maintained.

Summary of evidence to support findings: Policies, Initial Contact Guide, review of investigations, interviews with security staff and non-security staff, interview with staff who has acted as a first responder, all provide sufficient evidence to support a finding of compliance.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response Checklists – Initial Contact Guide, Custody Supervisor Checklist, Watch Commander’s Checklist, Transportation Checklist · Review of investigations · Interview with the Watch Commander · Training Curriculum · Random staff interviews

	<ul style="list-style-type: none"> · Interview Warden · Interviews with Conservation Camp supervisors · Observations of PREA evidence kits at each Conservation Camp to include copies of the Response Checklists <p>The PREA Response Checklists encompass the facility's Coordinated Response Plan as they address the initial contact, custody supervisor checklist, watch commander's checklist which involves the reporting and involvement of the medical and mental health staff and investigators. Review of the investigations provided documentation showing use of the guides where applicable to the situation. The interview with the Watch Commander and observation of the checklists at her workstation further confirmed the process is in place and readily available when needed. Each Conservation Camp maintains a PREA Evidence kit in which these checklists are also readily available. The Training Curriculum reinforces the use of the Response Checklists.</p> <p>Summary of evidence to support findings: Policy, review of the Coordinated Response Plan, interviews with the Watch Commander and Conservation Camp supervisors, observation of the PREA evidence kits and Response Plan all provided ample evidence to support a finding of compliance.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Interview Director of Adult Institutions · Interview with Warden · Review of union contracts · Observations · PAQ <p>The PAQ indicates that the facility has not entered into a collective bargaining on the agency's behalf.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a)(b) The following union contracts were reviewed:</p>

	<p>BU06 CCPOA (Peace Officers Association)</p> <p>BU-8-MOU-07-01 Cal Fire Local 2281</p> <p>SEIU MOU Service Employees International Union</p> <p>BU-12-MOU-07-01 through to 2026</p> <p>The interview with the Director of Adult Institutions and Warden confirmed that there are no restrictions from removing a potential abuser from assignment pending an investigation.</p> <p>Summary of evidence to support findings: The interview with the Director of Adult Institutions, Warden, the PAQ and review of the contracts provided the auditor with sufficient evidence to support that the facility/agency is not restricted from removing alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The auditor finds the facility compliant with the standard provisions.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.1 Policy · Title 15 3401.5. Staff Sexual Misconduct · DOM 54040.13 Allegation Follow-up Interviews · DOM 5400.3 Definitions · Interview with the Director of Adult Institutions · Interview with the Warden · Interview with designated staff members charged with monitoring for retaliation (investigators) · Protection Against Retaliation form (PAR) Staff · Protection Against Retaliation form (PAR) Inmate · Documentation of retaliation monitoring with each investigation (sexual abuse) · Interview with inmates who reported abuse

· PAQ

The PAQ indicates that there were no reported incidents of retaliation occurred. The auditor found no reason to dispute this during the audit process.

The following policy excerpts support compliance with the requirements of this standard:

Title 15 3401.5 states, Retaliation Against Employees. Retaliatory measures against employees who report incidents of staff sexual misconduct shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. Such retaliatory measures include, but are not limited to, unwarranted denials of promotions, merit salary increases, training opportunities, or requested transfers; involuntary transfer to another location/position as a means of punishment; or unsubstantiated poor performance reports. Retaliation Against Inmates/Parolees. Retaliatory measures against inmates/parolees who report incidents of staff sexual misconduct shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. Such retaliatory measures include, but are not limited to, coercion, threats of punishment, or any other activities intended to discourage or prevent an inmate/parolee from reporting sexual misconduct. Protection Measures. Multiple protection measures shall be considered to protect inmate victims who report staff sexual misconduct or cooperate with staff sexual misconduct investigations including but not limited to housing changes or transfers for inmate victims, removal of alleged staff from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting staff sexual misconduct or sexual harassment or for cooperating with investigations.

DOM 54040.1 Policy states, This policy applies to all inmates and persons employed by the CDCR, including volunteers and independent contractors assigned to an institution, community correctional facility, conservation camp, or parole. Retaliatory measures against employees or inmates who report incidents of sexual violence, staff sexual misconduct or sexual harassment as well as retaliatory measures against those who cooperate with investigations shall not be tolerated and shall result in disciplinary action and/or criminal prosecution. Retaliatory measures include, but are not limited to, coercion, threats of punishment, or any other activities intended to discourage or prevent a staff or inmates from retaliation.

54040.13 Allegation Follow-up For at least 90 days following a report of sexual violence or staff sexual misconduct, the institutional PCM shall monitor the conduct and treatment of inmates or employees who reported the sexual violence or staff sexual misconduct and of the victim to ensure there are no changes that may suggest retaliation. The PCM may delegate these monitoring functions to staff assigned to the Investigative Services Unit or to a supervisory staff member and has the discretion to assign this monitoring in other circumstances: If the reported conduct is sexual harassment, when a volunteer or independent contractor made the report of sexual violence, staff sexual misconduct, or sexual harassment, or if any person fears retaliation for cooperating with an investigation. The assigned supervisor shall notify the institutional PCM of any such changes. The PCM shall act promptly (in

accordance with DOM Article 14, Section 31140.22) to remedy any such retaliation and ensure a CDCR Form 2304 or 2305, Protection Against Retaliation, is initiated. Items to be monitored on the CDCR Form 2304 or 2305 include periodic inmate status checks, inmate disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff. The monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. The PCM shall ensure all Protection Against Retaliation forms are maintained as required in the Records Retention Schedule. The obligation to monitor shall terminate if the investigation determines that the allegation is unfounded or proven false. When the inmate is transferred to another institution within the 90-day monitoring period, the CDCR Form 2304 shall be forwarded to the receiving institution. The PCM/designee at the sending institution shall make contact with the PCM/designee at the receiving institution to provide an overview of the case, noting the remaining monitoring timeframes. Upon completion of the monitoring period, the PCM/designee at the receiving institution shall return the completed CDCR Form 2304 to the PCM/designee at the sending institution for retention in the file and audit purposes.

DOM 5400.3 Definitions – “Need to Know” When the information is relevant and necessary in the ordinary performance of that employee or contractor’s official duties.

Evidence reviewed/analyzed by provision:

(a)(b)(c)(d)(e)(f) Policies and the interview with the Director of Adult Institutions and the Warden demonstrated strong support for zero tolerance towards any form of retaliation for reporting or witnessing sexual abuse and sexual harassment. The investigators are designated as the people responsible for retaliation monitoring. The interview with one investigator confirmed she does check in with the inmates regularly and would extend the monitoring beyond 90 days if deemed warranted. Retaliation Monitoring Forms were reviewed with each investigation. The form addresses the requirements of the provisions. The completed forms reflected that monitoring starts at the initiation of the report, involved face to face meetings and review of housing changes, program reports, and disciplinary reports. The investigator indicated she has not had to monitor staff who may fear retaliation yet but would if deemed necessary in accordance with the requirements of the standard.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Interview with the Director of Adult Institutions, Warden and investigator in addition to review of completed Retaliation Monitoring documents demonstrated compliance with all provisions of the standard. The PAQ indicates this has not occurred; the auditor found this credible. The auditor finds the facility compliant with the standard provisions.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard

Auditor Discussion

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

- Title 15 3335. Administrative Segregation
- Interview Director of Adult Institutions
- Interview staff who supervise restrictive housing – all security officers
- Review of the investigations
- PAQ

The PAQ indicates there has been no incident where inmates who suffered sexual abuse were held in involuntary segregated housing in the past twelve months. The auditor found no reason to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Title 15 3335. Administrative Segregation. When an inmate's presence in an institution's General Population (GP) inclusive of the Restricted Custody General Population (RCGP) facility presents an immediate threat to the safety of the inmate or others, endangers institution security or jeopardizes the integrity of an investigation of an alleged serious misconduct, criminal activity, or the safety of any person, the inmate shall be immediately removed from the GP and placed in administrative segregation. Administrative segregation may be accomplished by confinement in a designated Administrative Segregation Unit (ASU) or, in an emergency, to any single cell unit capable of providing secure segregation. CDCR staff shall not place inmates into a SHU, ASU, or the SDP solely on the basis of their validation status. (a) Non Disciplinary Segregation. (1) Non Disciplinary Segregation (NDS) means temporary segregated housing placement for administrative reasons to include but are not limited to: (A) ASU placement for investigation of safety concerns not resulting from misconduct warranting a Rules Violation Report. (B) Investigation not related to misconduct or criminal activity. (C) Being a relative or an associate of a prison staff member. (D) Investigation related to being the victim of a Prison Rape Elimination Act (PREA) incident 1. If the placement in NDS is related to being the victim of a PREA incident, the inmate will be afforded all programs, privileges, and education in accordance with section 3044 and subsection 3190(b)(5)(C), of Title 15 of the CCR. If these are restricted, assigned staff shall document: 1) the opportunities that have been limited; 2) the duration of the limitation; and 3) the reasons for such limitations. 2. The facility shall assign such inmates to NDS only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If the period of segregation exceeds 30 days, reasoning shall be documented on an automated Classification Committee Chrono (05/19), which is incorporated by reference. 3. Every 30 days, the facility shall afford each such inmate with a review by the assigned custody supervisor to determine

whether there is a continuing need for segregation from the general population. The review shall be documented on the CDC Form 128-B (Rev. 4/74), General Chrono. If the custody supervisor determines the need for continued segregation no longer exists, the inmate shall be referred to the Institution Classification Committee for a program review.

Evidence reviewed/analyzed by provision:

Interviews with staff who regularly supervise special housing and Warden both confirmed to the auditor that placement for an inmate who is alleged to have suffered sexual abuse has not occurred. Warden reinforced that there are numerous options available to ensure a safe placement before use of special management. He noted that policy is in place should the options reviewed lead to that placement to ensure the provisions of the standard are met. See comments to 115.43.

Summary of evidence to support the finding of compliance: Policy reflects compliance with the provisions of the standards. The PAQ indicates they have not had to use restrictive housing to protect an inmate who is alleged to have suffered sexual abuse. The interview with the Warden and staff who regularly supervise Restrictive Housing confirmed this has not occurred. Review of the investigations supported this. The auditor finds the facility compliant with the standard provisions.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM Article 14 Internal Affairs Investigations · DOM 54040.7.2 Notification Via Third Party Reporting of Misconduct Against an Employee, Contractor, or Volunteer · DOM 54040.8.1 Custody Supervisor Responsibilities · DOM54040.12 Investigation · Title 15 3316 Referral for Criminal Prosecution · Observations of written agreements with county prosecutor conservation camps · Interview with investigators · Interview with Warden

- Interview with the PREA Coordinator
- Interview with inmates who reported sexual abuse
- PAQ

PAQ indicates no substantiated allegations of conduct that appeared criminal were referred for prosecution since the last PREA audit. The auditor found no reason to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

DOM Article 14 Internal Affairs Investigations:

31140.4.12 Locally Designated Investigators Locally designated investigators shall be responsible for the following: Conducting investigations, as assigned by OIA regional offices, in a manner that provides a complete and thorough presentation of all facts regarding the allegation or complaint; Maintaining integrity and the confidentiality of the investigative process, unless prior approval to discuss a case with the Hiring Authority is obtained through the SAC; Cooperating with and providing continual real-time consultation among OIA, the Vertical Advocate for designated cases, and the BIR for cases the BIR is monitoring; Identifying issues related to allegations of employee misconduct and assisting the Hiring Authority, Vertical Advocate for designated cases, and the SAIG for cases monitored, Updating case activity in CMS.

31140.5 Employee Expectations & Reporting Each employee shall report misconduct or any unethical or illegal activity in a timely manner. Failure to report employee misconduct or any unethical or illegal activity in an investigation or allegation inquiry shall be grounds for corrective action, disciplinary action, or both. Employees shall not make false statements when questioned, interviewed, or in reports submitted.

31140.5.1 Employee Duty to Cooperate Each employee of the CDCR is required to comply and cooperate as follows: . . . If requested to make a statement in any official internal investigation conducted by the Department, employees shall make full, complete, and truthful statements. Failure or refusal to make statements or making false statements during Department Internal Affairs investigations may result in disciplinary action. Employees shall not take any action which would interfere with, delay, distort, or unduly influence any official investigation conducted by the Department or any other government agency. Any employee who knowingly gives false evidence, withholds evidence, or interferes in any way during such an investigation, or requests or encourages another to do so, may be subject to disciplinary action. Employees have a duty to cooperate with investigators of the Department and with officials from other law enforcement agencies who are conducting a criminal investigation. Employees shall make full, complete, and truthful statements. Failure to cooperate may result in disciplinary action. 31140.6 Authority to Conduct Investigations Pursuant to Government Code Section 11182, the Secretary of the Department delegates the authority to initiate and conduct investigations to

the Assistant Secretary, OIA.

31140.14 Allegation Inquiry

31140.20 Criminal Investigations *A criminal investigation should be conducted for an allegation of employee misconduct when there is reason to believe the employee has committed a violation of criminal law and an outside law enforcement agency is not conducting an investigation.*

DOM 54040.7.2 Notification Via Third Party Reporting of Misconduct Against an Employee, Contractor, or Volunteer states, *Third party reports of staff sexual misconduct or staff sexual harassment shall be forwarded to the Hiring Authority. The Hiring Authority shall forward the documented third party report of the allegation to a Locally Designated Investigator (LDI). The LDI will conduct inquiry work until sufficient information is obtained to warrant an Office of Internal Investigations (OIA) investigation, or the information collected refutes the allegation, as determined by the Hiring Authority. The inquiry and/or investigative information will be thoroughly documented on a Confidential Memorandum. The Confidential Memorandum shall be maintained with the investigatory file. Standard investigatory procedures will be utilized and the complaint will be logged on the CDCR Form 2140, Internal Affairs Allegation Log. Any allegation of staff sexual misconduct or staff sexual harassment believed to constitute an emergency shall be reported immediately to a supervisor. The supervisor shall notify the Watch Commander who shall immediately notify the Hiring Authority. Notification to the OIA, Regional Office, Special Agent in Charge (SAC) or OIA Administrative Officer of the Day (AOD) shall also be made when immediate investigative action is necessary. In the event of such an emergency, staff shall follow-up with a written report within one (1) day of learning the information. Examples that constitute an emergency are as follows: Possible loss of life or serious bodily injury; Serious breach of facility security; Further aggravation of a potentially dangerous situation; Activities which seriously compromise or jeopardize an investigation; An illegal activity which may occur imminently.*

54040.8.1 Custody Supervisor Responsibilities

54040.12 Investigation

Title 15 3316 Referral for Criminal Prosecution

The numerous policies noted delineate what the expectations are and who is responsible for meeting them, showing responsibility and expectations of all staff regarding investigations and specifically investigations regarding sexual abuse and sexual harassment.

Evidence reviewed/analyzed by provision:

(a) LDI Investigator training supports the following: Investigations into allegations of sexual violence, staff sexual misconduct and sexual harassment must be prompt, thorough, objective, and conducted by investigators who have completed specialized training in sexual abuse investigations. This training meets the standard, as well as

the mandate found in PC Section 13516.

(b) All investigators receive training. See 115.34

(c) LDI Investigator training supports the following: Investigators will gather direct and circumstantial evidence, including physical and DNA evidence; interview victims, suspects (inmate on inmate), and witnesses; and review prior complaints and reports of sexual abuse.

(d) LDI Investigator training supports the following: Where criminal charges are possible, do not compel an interview. If an interview is necessary, contact OIA. Additionally, the PREA law requires consultation with the DA when prosecution is probable.

(e) LDI Investigator training supports the following: Investigators shall assess reliability of victim, suspects and witnesses on an individual basis, rather than determining reliability based on an individual's status as inmate or staff.

The auditor reviewed the investigations and concluded they support compliance with this provision. Additionally, polygraph tests are prohibited in accordance with the and therefore not used in any aspect of the investigation for sexual abuse or sexual harassment. Review of investigations supported that the credibility of victim, suspect or witness is based on alignment with established facts. This requirement was confirmed by the interview with the investigators.

(f) The interview with the investigators did confirm that staff actions are reviewed in every case. Review of investigations supports that they are in standardized, written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

(g) Criminal investigations are documented; they were reviewed by the auditor. Additionally, each conservation camp maintains an agreement with the local prosecutor regarding any prosecutable sexual abuse offenses.

(h) Substantiated allegations of conduct that appears to be criminal would be referred for prosecution. Use of Miranda Warnings was present for allegations that were potentially criminal.

(i) LDI Investigator training supports the following: The Federal PREA Standard Section 115.71 requires specific retention schedules for inmate and personnel records which relate to a PREA incident. All records are retained for the entire period of time that the suspect is incarcerated or employed by the agency, plus an additional five years.

(j) LDI Investigator training supports the following: The departure of the alleged suspect or victim from the employment or control of CDCR shall not provide a basis for terminating an investigation. The departure of an alleged abuser or victim from employment or control of the agency does not provide a basis for terminating an investigation, as confirmed by the interview with the two investigators. No investigations reviewed indicated that the investigation continued as the alleged victim or perpetrator had not left the facility.

	<p>(k) Auditor is not required to audit this provision.</p> <p>(l) The interview with Warden and the PREA Coordinator indicated the agency does not use outside investigators.</p> <p>Summary of evidence to support findings: Based on review of the policies, agency manual, investigations and interviews with the Warden and investigators, the auditor concludes that investigators address investigations promptly, thoroughly, in a manner which will hold up in court, and with a review of incidents to address staff actions and assesses credibility.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.12 Investigation · DOM 3030.13.1 Investigation Findings · LDI Investigator training · Observations · Interviews Investigative staff · Review of investigations using preponderance of evidence (administrative) <p>The following policy excerpts support compliance with the requirements of this standard:</p> <p>DOM 54040.12 Investigation states, <i>No standard higher than the preponderance of the evidence is to be used when determining whether allegations of sexual abuse or sexual harassment are sustained.</i></p> <p>33030.13.1 Investigative Findings <i>The findings of each allegation shall be determined by the Hiring Authority in consultation with the Vertical Advocate for designated cases and the SAIG for cases the BIR is monitoring. The findings and their explanations are as follows: NO FINDING: The complainant failed to disclose promised information to further the investigation; the investigation revealed that another agency was involved and the complainant has been referred to that agency; the complainant wishes to withdraw the complaint; the complainant refuses to cooperate with the investigation; or the complainant is no longer available for clarification of facts/issues. NOT SUSTAINED: The investigation failed to disclose a preponderance of evidence to prove or disprove the allegation made in the complaint. UNFOUNDED:</i></p>

The investigation conclusively proved that the act(s) alleged did not occur, or the act(s) may have, or in fact, occurred but the individual employee(s) named in the complaint(s) was not involved. EXONERATED: The facts, which provided the basis for the complaint or allegation, did in fact occur; however, the investigation revealed that the actions were justified, lawful, and proper. SUSTAINED: The investigation disclosed a preponderance of evidence to prove the allegation(s) made in the complaint.

Evidence reviewed/analyzed by provision:

LDI Investigator training supports the following: No standard higher than the preponderance of the evidence is to be used when determining whether allegations of sexual abuse or sexual harassment are sustained. The interviews with two investigators supported this. The auditor reviewed fifteen completed investigations and supported the findings of unsubstantiated and substantiated based on a preponderance of evidence.

Summary of evidence to support findings: Policies, interviews, review of investigations, all provided sufficient evidence to support a finding of compliance.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Title 15 3316 Referral for Criminal Prosecution · DOM 54040.12.5 Reporting to Inmates · LDI Training · Notification to Inmate post investigation form CDC 128-B · Interview Warden · Inmate Notifications · Sexual Abuse Incident Review reports · PAQ <p>The PAQ indicates the following:</p> <p>nine investigations (criminal and administrative) of alleged sexual abuse competed</p> <p>nine investigations of alleged sexual abuse competed where inmates were notified of</p>

the results (verbally or in writing)

zero sexual abuse investigations completed by an outside agency

zero notifications of the results of an investigation completed by an outside agency

zero substantiated cases of staff sexual abuse

zero notifications made pursuant to those

nine notifications provided to inmates

nine of those that are documented

The following policy excerpts supports compliance with the requirements of this standard:

54040.12.5 Reporting to Inmates *Following an inmate's allegation that a staff member has committed sexual misconduct against an inmate, the alleged victim shall be informed as to whether the allegation has been substantiated, unsubstantiated, or unfounded. The PCM or designee shall inform the inmate (unless the allegation has been determined to be unfounded) whenever the alleged abuser has been: the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at facility; indicted on the alleged sexual misconduct; or convicted of the alleged sexual misconduct. Inmate on Inmate Following an investigation into an inmate's allegation that he or she suffered from sexual violence by another inmate, institution shall inform the alleged victim if the allegation has been substantiated, unsubstantiated or unfounded. The institution shall also inform the alleged victim whenever the alleged abuser has been: . . . indicted on the alleged sexual violence; or convicted of the charge. The agency's obligation to report/inform the inmate of changes shall terminate if the inmate is released from the agency's custody. As a reminder, investigative staff shall ensure the inmate abuser is referred to mental health as soon as an allegation of inmate-on-inmate sexual abuse has been substantiated and/or knowledge of previous inmate-on-inmate sexual abuse arises, which has not previously been addressed utilizing the CDCR Form 128 MH5, Mental Health Referral Chrono, to request a PREA Perpetrator Routine mental health contact.*

Evidence reviewed/analyzed by provision:

(a)(b)(c)(d)(e)(f) The LDI training manual reinforces the following: Reporting to Inmates: Inmate on Inmate DOM Section 54040.12.5 states, "Following an investigation into an inmate's allegation that he or she suffered from sexual violence by another inmate, institution shall inform the alleged victim if the allegation has been substantiated, unsubstantiated, or unfounded. The institution shall also inform the alleged victim whenever the alleged abuser has been: • Indicted on the alleged sexual violence; or • Convicted of the charge" Staff on Inmate DOM Section 54040.12.5 states, "Following an inmate's allegation that a staff member has committed sexual misconduct against an inmate, the alleged victim shall be informed as to whether the allegation has been substantiated, unsubstantiated, or unfounded.

	<p>The PCM or designee shall inform the inmate (unless the allegation has been determined to be unfounded) whenever the alleged abuser has been: • No longer posted within the inmate’s unit • No longer employed at the facility; • Indicted on the alleged sexual misconduct; or • Convicted of the alleged sexual misconduct.” “The agency’s obligation to report/inform the inmate of changes shall terminate if the inmate is released from the agency’s custody.”</p> <p>Review of the investigations confirmed that it is documented that the inmate was notified of the outcome of a sexual abuse investigation. The interview with investigators confirmed that they are the entity responsible for making/assuring the notification is made. The sexual abuse incident review has notation for ensuring the notification is made. The interview with the Warden reinforced the facility’s commitment to notifying the inmate of the outcome of an investigation whether the abuser was an inmate or was a staff member.</p> <p>Summary of evidence to support findings: Policies address all requirements of the standard provisions. Investigator training reinforces the requirement for notification. The Sexual Abuse Incident Review Committee reports further addresses that the notification has been made. Interviews with Warden and the investigators confirmed the process. Documentation of notification was found in the investigation documents. The PAQ statistics were credible to the auditor after conducting the pre audit and onsite audit activities. The auditor finds there is ample evidence to support the finding of compliance with all provisions of the standard.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Title 15 3401.5 & 6 Staff Misconduct Staff Sexual Harassment · Title 15 3316 Referral for Criminal Prosecution · DOM 31140.20 Criminal Investigations · DOM 33030.15 Types of Adverse Action Penalties · DOM 33030.16 Employee Disciplinary Matrix Penalty Levels · DOM 33030.18 Mitigating and Aggravating Factors · 33030.20 Imposition of Penalty and Consultation · Interview Warden

- Inmate Notification form

- PAQ

The PAQ indicates zero staff have violated agency sexual abuse or sexual harassment policies, zero staff have been terminated or resigned prior to termination for violating agency sexual abuse or sexual harassment policies in the last twelve-month review period. Zero staff from the facility have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse). Zero staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies

The following policy excerpts support compliance with the requirements of this standard:

Title 15 3401.5 & 6 Staff Misconduct

3401.6. Staff Sexual Harassment

Title 15 3316 Referral for Criminal Prosecution

DOM 31140.20 Criminal Investigations

DOM 33030.15 Types of Adverse Action Penalties

33030.16 1 Official Reprimand Employee Disciplinary Matrix Penalty

33030.18 Mitigating and Aggravating Factors

33030.20 Imposition of Penalty and Consultation

DOM 54040.12.3 Reporting to Outside Agencies

The auditor reviewed all policies and determined that it supports the requirement of the standard, in great detail.

(a)(b)(c)(d) Dialogue with the Warden, investigators, and PREA Coordinator support that all allegations against staff for sexual abuse, sexual harassment, retaliation or neglect would be investigated and disciplinary action would be commensurate with the circumstances up to termination for sexual abuse. Review of the seven policy excerpts allowed the auditor to conclude that staff misconduct is taken very seriously in this agency. The PAQ notes that no staff have been terminated for sexual abuse or sexual harassment towards an inmate in the past 12 months. The auditor found no evidence to dispute this during the audit process. This conclusion was based on formal interviews and informal conversations with staff and inmates.

Summary of evidence to support a finding of compliance: Policies, interviews, PAQ and observations provided the auditor with sufficient evidence to conclude that the agency/facility is compliant with all provisions of the standard.

115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

- DOM 31140.20 Criminal Investigations
- DOM 54040.12.4 Reporting to Outside Agencies for Contractors
- DOM 101090.9 Rejection and Termination
- Interviews Warden
- Interview with the Health Care Hiring authority
- Interview with the Volunteer Coordinator
- Interviews with contractual staff/volunteers
- PAQ

The PAQ notes that no contractor or volunteer has been involved in an investigation regarding sexual abuse or sexual harassment towards an incarcerated individual. The auditor found no evidence to dispute this statement during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

DOM 31140.20 Criminal Investigations

DOM 54040.12.4 Reporting to Outside Agencies for Contractors states, *Any contractor or volunteer who engages in staff sexual misconduct shall be prohibited from contact with inmates and shall be reported to relevant licensing bodies by the hiring authority or designee. prohibited from contact with inmates and shall be reported to relevant licensing bodies by the hiring authority or designee.*

DOM 101090.9 Rejection and Termination states, *The Hiring Authority may limit or discontinue activities of any volunteer or volunteer group which may impede the security or orderly operation of the institution or region. A report explaining the occurrence and outcome shall be (a) The Hiring Authority may limit or discontinue activities of any volunteer or volunteer group which may impede the security or orderly operation of the institution or region. A report explaining the occurrence and outcome shall be routed to the Hiring Authority with a copy to the Community Resources Manager or designated manager. Volunteer misconduct includes acts of over-familiarity with inmates or the family and friends of inmates in addition to other examples.*

	<p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) The auditor interviewed the Warden who provided assurances he can and will prohibit contact from a volunteer or contractor if allegations of sexual abuse are made. Interviews with two volunteers and contractual staff supported knowledge and understanding that they are held to the same law, and they understand the consequences of any action determined to be sexual abuse towards an inmate. The PAQ supports there have been volunteers or contractors have been terminated for sexual abuse or sexual harassment towards an inmate in the past twelve months. Review of investigations concluded that this has not occurred. Based on this in addition to formal and inform conversations, the auditor found this credible.</p> <p>Summary of evidence to support the finding of compliance: Policy excerpts quoted above meet the requirements of the standard. Interviews with the Warden, volunteers, contractual staff, review of investigations and the PAQ allowed the auditor to conclude that this has not occurred, and volunteers and contractual staff are well informed of the repercussions should they participate in any behavior constituting sexual abuse or sexual harassment. The auditor finds the standard compliant.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Title 15 3323 Disciplinary Credit Forfeiture Schedule · DOM 54040.15 Disciplinary Process · DOM 3317 Mental Health Assessment for Disciplinary Hearings · DOM 54040.15.1 Alleged Victim - False Allegations · Title15 3007 Sexual Behavior · Interview Warden · Interviews with mental health staff · Interview with disciplinary staff · PAQ <p>The PAQ indicates there have been three administrative findings of inmate-on-inmate sexual abuse, zero criminal findings inmate on inmate abuse. The auditor found no reason to dispute this during the audit process.</p>

The following policy excerpts supports compliance with the requirements of this standard:

Title 15 3323 Disciplinary Credit Forfeiture Schedule lists the following rule violations as serious rule violation: Battery, including sexual battery causing serious injury, Rape, attempted rape, sodomy, attempted sodomy, oral copulation, and attempted oral copulation against the victim's will, Indecent Exposure with prior court conviction, Assault or battery, including sexual assault or battery, on a prisoner with no serious injury, and sexual disorderly conduct.

DOM 54040.15 Disciplinary Process *Upon completion of the investigative process, the existing disciplinary process, which includes referral for criminal prosecution and classification determinations, shall be followed. If the allegation of sexual violence warrants a disciplinary/criminal charge, a CDCR Form 115, Rules Violation Report shall be initiated. The inmate who is charged will be entitled to all provisions of CCR Section 3320 regarding hearing procedures and time limitations and CCR Section 3316, Referral for Criminal Prosecution.*

DOM 3317. Mental Health Assessments for Disciplinary Hearings. *A Mental Health Assessment is a means to incorporate clinical input into the disciplinary process when mental illness or developmental disability/cognitive or adaptive functioning deficits may have contributed to behavior resulting in a Rules Violation Report. Mental Health Assessments shall be considered by the hearing officer or senior hearing officer during disciplinary proceedings when determining whether an inmate shall be disciplined and when determining the appropriate method of discipline.*

Evidence reviewed/analyzed by provision:

(a) (b) (c) Policy supports compliance with disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Sanctions shall be 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. The auditor interviewed mental health staff and the disciplinary staff who both confirmed that disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. The disciplinary staff confirmed that sanctions are commensurate with the nature and circumstances of the offense and aggravating and mitigating factors.

(d) Interviews with mental health staff confirmed there is not therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, specifically, but these behaviors can be addressed individually with mental health staff. It is not a requirement to participate.

(e) The interview with the Disciplinary Coordinator confirmed that an inmate would not be disciplined for sexual contact with staff unless there is a finding that the staff member did not consent to such contact.

	<p>(f)DOM 54040.15.1 Alleged Victim - False Allegations states, Following the investigation into sexual violence or staff sexual misconduct, if it is determined that the allegations made were not in good faith or based upon a reasonable belief that the alleged conduct did not occur constitutes false reporting.</p> <p>(g) Title15 3007 defines Sexual Behavior: Inmates may not participate in illegal sexual acts. Inmates are specifically excluded in laws, which remove legal restraints form acts between consenting adults. Inmates must avoid deliberately placing themselves in situations and behaving in a manner which is designed to encourage illegal sexual acts. This clarifies the difference between nonconsensual sexual acts and sexual abuse.</p> <p>Summary of evidence to support findings: Policy reflects compliance with the provisions of the standards. The interview with Warden supported those sanctions are proportionate to the nature and circumstance and mental disability/illness is considered when determining sanctions in accordance with policy. The interview with mental health staff supports that the inmate will be referred for appropriate counseling if found guilty of sexual misconduct. Based on analysis of the evidence, the auditor finds the facility to be compliant with the requirements of this standard.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.7 Mental Health Referrals and Detection, Notification, and Reporting · CDCR California Correctional Health Care Services · Demonstration of the intake process · The Prison Rape Elimination Act Authorization for Release of Information · Interviews inmates who disclose sexual victimization at risk screening · Interview staff responsible for risk screening (intake sergeant and three counseling staff) · Interview with medical and mental health staff · PAQ <p>The PAQ indicates that 100% of inmates who disclosed prior victimization during screening who were offered a follow up meeting with medical/mental health</p>

practitioner and 100% of inmates who have previously perpetrated sexual abuse were offered a follow-up meeting with a mental health practitioner.

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.7 Mental Health Referrals Initial Custody Intake or Subsequent Screening Information Regarding Prior Sexual Victimization and/or Prior Perpetration of Sexual Abuse: Regarding Prior Sexual Victimization and/or Prior Perpetration of If it is reported by an inmate during the initial custody intake screening or at any other occasion during their confinement within the CDCR; that they have experienced prior sexual victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with mental health staff. If the inmate accepts the offer to meet with mental health, custodial staff shall If it is reported by an inmate during the initial custody intake screening or at any other occasion during their confinement within the CDCR; that they have experienced prior sexual victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with mental health staff. If the inmate accepts the offer to meet with mental health, custodial staff shall ensure the inmate is referred to mental health by utilizing the CDCR 128 MH5: Mental Health Referral Chrono to request a PREA Routine mental health contact. This referral shall be completed by mental health staff by conducting a face-to-face contact with the inmate in a confidential environment within fourteen (14) calendar days of the referral.

DOM 54040.7 Detection, Notification, and Reporting Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health An inmate may report sexual violence, staff sexual misconduct, or sexual harassment that occurs under the jurisdiction of the CDCR to any staff member. If the staff who receives the report is non-custody, he/she shall immediately notify his/her supervisor and the Watch Commander. Each employee who observes the incident or is provided a report by the victim must complete required reports. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, and program assignments, or as otherwise required by Federal, State, or local law.

CDCR California Correctional Health Care Services states, Initial Intake or Subsequent Screening Information Regarding Prior Sexual Abuse and/or Prio Perpetration of Sexual ABUSE - Mental Health Referrals confirms that staff shall ensure a follow-up meeting with mental and medical staff if arranged. If the patient declines, this shall be documented. If the patient agrees, this consult will occur within 14 calendar days. This process includes a review of informed consent and follow up care will be determined. To further reinforce confidentiality, the direction specified that another inmates name is not to be included in another inmate record.

	<p>Evidence reviewed/analyzed by provision:</p> <p>(a)(b) As indicated in comments regarding §115.41, the intake process initiates a mental health referral if the inmate indicates agreement to it for those who present as having experienced sexual abuse or those who have abused. Interview and demonstration of the intake process demonstrated that a referral is made to mental health for inmates who have expressed having been sexually abused or having a history of sexual abuse if they agree to it. Interviews with the counseling staff who completed the second assessment demonstrated knowledge of the requirement and indicated they have made such referrals as this information may not be expressed during the intake assessment. The interview with mental health staff confirmed that they receive the referrals and complete an assessment within fourteen days, typically within seven days. There is a mental health referral form that specifies these referrals. Inmates interviewed indicated they believe they were offered a referral but clearly confirmed that access to mental health is easy to get. This included inmates at the conservation camps.</p> <p>(c) This is not applicable to this facility as it is a prison.</p> <p>(d) The interview with mental health staff confirmed that any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. This requirement is reinforced in DOM 54040.8.</p> <p>(e) The auditor reviewed the Informed Consent for Mental Health Care form. The informed consent for mental health care form includes a review of items that are reportable to include engaging in acts of sexual misconduct or have been sexually assaulted or harassed by other inmates or staff. The Prison Rape Elimination Act Authorization for Release of Information notes the following: This form shall be completed if a patient over the age of 18 has alleged to California Health Care Services staff to be a victim of sexual violence or misconduct that occurred outside of an institutional setting for the purpose of reporting the incident to the appropriate law enforcement agency, prosecutor’s office and any other appropriate agency.</p> <p>Summary of evidence to support findings: Policies, interviews with medical and mental health staff, the intake sergeant, counselors, review of consent forms, review of intake risk assessment and follow up assessments, and the PAQ provided the auditor with sufficient evidence to support a finding of compliance with all requirements of the standard provisions.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard

Auditor Discussion

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

- DOM 54040.8.3 Medical Services Responsibilities
- DOM 54040.7 Mental Health Referrals
- California Correctional Health Care Services Health Care DOM
- Memo: No copayment for Health Care Services
- Sexual Abuse Response Plan
- Mental Health Referral Chrono
- Review of medical records demonstrating follow up care post SANE exam, prophylactic treatment
- Review of investigations demonstrating medical and mental health follow up
- Interview with medical and mental health staff
- Interviews with conservation camp supervisors

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.8.3 Medical Services Responsibilities states, *Responsibilities Medical Services Responsibilities California Correctional Health Care Services (CCHS) medical staff will provide indicated emergency medical response. The assigned Registered Nurse will initiate the CDC Form 7252, Request for Authorization of Temporary Removal for Medical Treatment and have it delivered to the Watch Office or designated area to expedite the transportation process. To the extent possible, staff in the Triage and Treatment Area (TTA) will maintain physical separation and visual separation between the victim and suspect(s). California Correctional Health Care Services (CCHS) medical staff will provide indicated emergency medical response. The assigned Registered Nurse will initiate the CDC Form 7252, Request for Authorization of Temporary Removal for Medical Treatment and have it delivered to the Watch Office or designated area to expedite the transportation process. To the extent possible, staff in the Triage and Treatment Area (TTA) will maintain physical separation and visual separation between the victim and suspect(s). CCHCS medical staff will conduct follow-up testing for sexually transmitted infections/diseases, HIV, Hepatitis B and/or C, and pregnancy (if appropriate) as indicated. As required in Penal Code Section 2638, immediate HIV/AIDS, and sexually transmitted infections prophylactic measures will be provided. In addition, information regarding sexually transmitted infections, HIV and pregnancy options, will be discussed with the victim and suspect. CCHCS medical staff will conduct follow-up testing for sexually transmitted infections/diseases, HIV, Hepatitis B and/or C, and pregnancy (if*

appropriate) as indicated. As required in Penal Code Section 2638, immediate HIV/AIDS, and sexually transmitted infections prophylactic measures will be provided. In addition, information regarding sexually transmitted infections, HIV and pregnancy options, will be discussed with the victim and suspect. Licensed health care staff shall determine and identify any injuries sustained by the alleged victim and suspect, assess and identify if they are urgent/emergent, and provide immediate emergency medical care to the alleged victim and suspects. The injuries sustained by the alleged victim and suspect shall be documented on a CDCR Form 7219, Medical Report of Injury or Occurrence and CDCR Form 837-C for use in the inmate disciplinary process. Licensed health care staff shall determine and identify any injuries sustained by the alleged victim and suspect, assess and identify if they are urgent/emergent, and provide immediate emergency medical care to the alleged victim and suspects. The injuries sustained by the alleged victim and suspect shall be documented on a CDCR Form 7219, Medical Report of Injury or Occurrence and CDCR Form 837-C for use in the inmate disciplinary process and provide to custody. The Chief Medical Executive, or designee shall review the medical documentation of the incident. process and provide to custody. The Chief Medical Executive, or designee shall review the medical documentation of the incident.

DOM 54040.7 Mental Health Referrals Mental Health Referrals Post-SANE (Sexual Assault Nurse Examiner) Forensic Medical Examination- Mental Health Emergent Referral: Inmates reporting sexual assault and who were referred to a contracted SANE forensic medical examination, even if the inmate refused the examination, shall be referred for an emergency mental health evaluation. The Mental Health Emergent Referral shall be completed utilizing the CDCR Form 128 MH5: Mental Health Referral Chrono, requesting a PREA Emergency mental health contact. If this Referral is made after hours the on-call clinician shall be contacted to respond to the institution. The emergent referral must be completed by mental health within four (4) hours of the inmate victims return to the facility following the SANE forensic medical examination or their refusal to participate in the SANE examination.

California Correctional Health Care Services Health Care DOM provides specific directions to be followed for events involving a SANE exam and/or sexual abuse treatment. It includes the following:

Obtain consent and treatment

Medical evaluation of both the alleged victim and alleged abuser

Physical exam

Assessment for likelihood of STI's/STD, order appropriate tests for the alleged victim

Provide appropriate prophylactic treatment, immunizations

Provide additional treatment

Record in the medical health record

Evidence reviewed/analyzed by provision:

	<p>(a) The auditor confirmed that inmate victims of sexual abuse do 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. This was confirmed by review of policy excerpts and interviews with medical and mental health staff, review of medical documents provided in the investigation packets, review of a medical record demonstrating post follow up care and SANE services received, including access to prophylactic care, and policies supporting this.</p> <p>(b)(c) SCC does provide medical care twenty-four hours a day, seven days a week (24/7). For conservation camp inmates, staff have access to the medical staff at SCC 24/7 and can provide transport to the nearest appropriate hospital for medical emergency care, prophylactic treatment and SANE services. During the visits to the camp, the auditor discussed this with camp supervisors who demonstrated knowledge of where these services would be rendered. The auditor reviewed one medical record which demonstrated access to SANE examination, offer of prophylactic treatment and emergency medical treatment.</p> <p>(d) California Correctional Health Care Services Health Care DOM reinforces the fact that there is no cost to the alleged victim for medically necessary emergency and follow-up treatment services, regardless of whether they name the alleged abuser(s) or cooperate with any investigation arising from the incident.</p> <p>Summary of evidence to support findings: Policies, interviews with medical and mental health staff, camp supervisors, review of medical documentation provided ample evidence for the auditor to conclude that the facility is compliant with all provisions of the standard.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.8.3 Medical Services Responsibilities · DOM 54040.7 Mental Health Referrals · California Correctional Health Care Services Health Care DOM · Observations made during the tour · Interview with medical and mental health staff

· Interview inmate who reported abuse/medical and mental health follow up documents

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.8.3 Medical Services Responsibilities states, *CCHCS medical staff will conduct follow-up testing for sexually transmitted infections/diseases, HIV, Hepatitis B and/or C, and pregnancy (if appropriate) as indicated. As required in Penal Code Section 2638, immediate HIV/AIDS, and sexually transmitted infections prophylactic measures will be provided. In addition, information regarding sexually transmitted infections, HIV and pregnancy options, will be discussed with the victim and suspect.*

DOM 54040.7 Mental Health Referrals *Mental health shall conduct a mental health evaluation of all known inmate on-inmate abusers within sixty (60) calendar days of the facility having learned of such abuse history.*

Evidence reviewed/analyzed by provision:

(a) (b) Mental Health Referral Chrono demonstrates the referral process for inmates who are determined to have a victimization history or abusiveness history to be seen by mental health within 14 calendar days. Interviews with mental health providers confirmed to the auditor receipt of the referral and a meeting with the inmate if wanted.

(c) Review of the medical follow up records and interviews with medical and mental health staff provided evidence to the auditor that the facility does provide such victims with medical and mental health services consistent with the community level of care.

(d)(e) This is not applicable to this facility. They do not house females.

(f) Policy supports this process. The auditor reviewed one medical record which demonstrated access to SANE examination, offer of prophylactic treatment and emergency medical treatment.

(g) California Correctional Health Care Services Health Care DOM reinforces the fact that there is no cost to the alleged victim for medically necessary emergency and follow-up treatment services, regardless of whether they name the alleged abuser(s) or cooperate with any investigation arising from the incident.

(h) Policy supports this. The mental health referral forms afford a referral for an evaluation of a sexual abuser within 60 days of the referral being submitted. No incident warranted a referral for this evaluation. The auditor found this credible after reviewing all the facility investigative files.

Summary of evidence to support findings: Policies, review of medical records, interviews with medical and mental health staff all provided ample evidence to support the finding of compliance.

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

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

- DOM 54040.17 Institutional PREA Review Committee
- Institutional PREA Review Committee form and Subsequent Institutional PREA Review Committee form
- Interview with Warden
- Interview with members of the Sexual Abuse Incident Review Team – Chief Deputy Warden
- Interview with the PCM
- Completed PREA Incident Reviews
- PAQ

The PAQ indicates that there were nine criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents.

The following policy excerpts support compliance with the requirements of this standard:

DOM 54040.17 Institutional PREA Review Committee states, *(a) The purpose of this section is to set forth California Department of Corrections and Rehabilitation (CDCR) policy governing the sexual violence and staff sexual misconduct incident review process. The policy has its foundation in Code of Federal Regulations (CFR), tit. 28, Prison Rape Elimination Act (PREA) National Standards. (b) Per 28 CFR, Standard §115.86, each Hiring Authority is required to conduct an incident review of every sexual violence or staff sexual misconduct allegation, including allegations that have not been substantiated. A review is not required for allegations that have been determined to be unfounded. (c) The PREA Compliance Manager (PCM) shall make a good faith effort to reach a judgment on whether staff’s actions prior to, during, and subsequent to the reporting of the incident are in compliance with regulations, procedure, and applicable law and determine if follow-up action is necessary. (d) The PCM shall normally schedule these PREA incidents for review by the Institutional 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. (e) A subsequent IPRC shall be completed whenever an initial IPRC was conducted prior to the completion of the investigation. A subsequent IPRC shall also be completed when the initial IPRC was unable to provide a thorough review, or if requested by the Hiring Authority. (f) It*

shall be the responsibility of the IPRC to conduct the incident review for all allegations, which are alleged to have occurred at the institution, including those that were received from an institution or facility in accordance with Department Operations Manual (DOM) section 54040.7.4. (g) Institutional PREA Review Committee (1) The IPRC is a committee of institution staff, chaired by the respective Institution Head, tasked with reviewing PREA related incidents except those determined to be unfounded. (2) The IPRC shall meet to review PREA incidents on at least a monthly basis, or on a schedule to ensure all cases are reviewed within 60 days of the date of discovery or within 30 days of the conclusion of the investigation. All PREA investigations shall have an IPRC conducted within 30 days of the date of closure of the investigation, even if the case had been reviewed initially upon 60 days of the date of discovery. The IPRC shall ensure the report of its findings and recommendation is completed within 30 days of the conclusion of the investigation. (3) The IPRC shall normally be comprised of the following staff: (A) Hiring Authority or designee, as chairperson and final decision maker. (B) PREA Compliance Manager. (C) At least one other manager. (D) In-Service Training Manager. (E) Health Care Clinician. (F) Mental Health Clinician. (G) Incident Commander or Investigative Services Unit Supervisor. (4) The IPRC shall: (A) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. (B) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility. (C) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. (D) If the staffing plan was not complied with, this fact shall be documented during this review and addressed in the corrective action plan. (E) Assess the adequacy of staffing levels in that area during different shifts. (F) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. (G) Prepare a report of its findings and any recommendations for improvement. (H) Determine a plan to correct findings and document in the report. (I) Document implementation of the Action Plan or reasons for not doing so. (J) Submit the report to the Hiring Authority for final review. (h) The facility shall implement the recommendations for improvement or shall document its reasons for not doing so. The final report shall be provided to the appropriate Associate Director, upon approval of the Hiring Authority, if the findings require physical plant modification or other fiscal resource needs that cannot be addressed through their existing budget (i.e., staffing).

Evidence reviewed/analyzed by provision:

(a) (b) (c) The IPRC has signature lines for the following positions: Chairperson (institution head or designee), PREA Compliance Manager, Designated Managerial Employer, In-Service training Manager, Health Care Clinician, Mental Health Clinician, Incident Commander or ISU Supervisor which ensures that upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners are represented.

(d) The interview with the Chief Deputy Warden confirmed the following: The

	<p>Institutional PREA Review Committee (IPRC) provides direction to ensure that the following are addressed: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the Warden and PREA compliance manager.</p> <p>(e) The form provided includes assessing need for change and indicates if follow up is required. The auditor reviewed the IPRC with the designated investigation as required (sexual abuse substantiated or unsubstantiated) in the investigation files - nine total as indicated in the PAQ. Additionally, when interviewing Warden and the PCM all requirements were discussed and confirmed.</p> <p>Summary of evidence to support findings: Policies, interview with the Warden, Deputy Warden, PCM, review of completed IPRCs and the PAQ all provided ample evidence for the auditor to support the finding of compliance with all provisions of the standard.</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · DOM 54040.3 Definitions · DOM 54040.20 Tracking - Data Collection and Monitoring · SSV form for each investigation · Interview PREA Coordinator · Interview with the PCM · Annual Report - 2024 · SSV last submitted 2022

· Observations

The following policy excerpts supports compliance with the requirements of this standard:

54040.3 Definitions

Aggressor A person who attempts to commit, or commits sexual violence, staff sexual misconduct or sexual harassment. A person who attempts to commit, or commits sexual violence, staff sexual misconduct or sexual harassment.

Bisexual A person who is sexually attracted to both sexes. A person who is sexually attracted to both sexes.

Coercion A threat, however communicated, to commit an offense; to inflict bodily injury in the future on the person threatened or another, to accuse a person of any offense, to harm the credit or business reputation of any person, to take or withhold action as a public servant, or to cause a public servant to take or withhold action. A threat, however communicated, to commit an offense; to inflict bodily injury in the future on the person threatened or another, to accuse a person of any offense, to harm the credit or business reputation of any person, to take or withhold action as a public servant, or to cause a public servant to take or withhold action.

Cross-Gender Of the opposite biological sex. Example: Male Custody Staff patting down female inmates is cross-gender searching. Of the opposite biological sex. Example: Male Custody Staff patting down female inmates is cross-gender searching.

Gay A person who is attracted to people of the same gender. A person who is attracted to people of the same gender.

Gender Expression mannerisms, speech, and social interactions. mannerisms, speech, and social interactions.

Gender Identity Distinct from sexual orientation sense of being male or female. Distinct from sexual orientation sense of being male or female.

Gender Non-conforming Gender characteristics and/or behaviors that do not conform to those typically Gender characteristics and/or behaviors that do not conform to those typically

Intersex An individual born with external genitalia, internal reproductive organs, chromosome patterns, and/or endocrine systems that do not seem to fit typical An individual born with external genitalia, internal reproductive organs, chromosome patterns, and/or endocrine systems that do not seem to fit typical definitions of male or female. definitions of male or female.

Lesbian A female person who is attracted to people of the same gender. A female person who is attracted to people of the same gender.

LGBTI An acronym that refers to sexual minorities, including lesbian, gay, bisexual, transgender and intersex.

Locally Designated Investigator (LDI) The Investigative Services Unit Investigator or other designated institutional staff who have been trained to conduct investigations into allegations of sexual.

Non-consensual Not giving permission for or consent to an action being taken by another person. Inmate Any inmate, ward, parolee, or other person currently under the jurisdiction of the CDCR.

PREA Compliance Manager (PCM) Institutional employee with sufficient time and authority to coordinate the institutions efforts to comply with the CDCR Prison Rape Elimination Policy.

PREA Coordinator Agency wide Coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all institutions.

Rape Refer to PC Section 261. Sexual Violence (committed by inmates) will Encompass: Abusive Sexual Contact of any person without his or her consent, or by coercion, or contact of a person who is unable to consent or refuse intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person.

Nonconsensual Sex Acts Contact of any person without his or her consent, or by coercion, or contact of a person who is unable to consent or refuse AND contact between the penis and vagina or the penis and the anus including penetration, however slight; or contact between the mouth and the penis, vagina, or anus or penetration of the anal or genital opening of another person by the hand, finger, or other object.

Sexual Assault Response Team (SART) A coordinated interdisciplinary team of law enforcement, prosecution, contract medical, and advocacy experts collaborating to meet the forensic needs of the criminal justice system, and the medical and emotional needs of the victim of sexual violence or staff sexual misconduct. In the CDCR, unless an institution has been previously authorized for contracted on-site SART exams, they will utilize the resources available via contract at the local community hospital for SART examination of the victim and inmate-suspect.

Sexual Assault Nurse Examiner (SANE) A nurse who has received specialized training to conduct sexual assault forensic examination of sexual assault victims.

Sexual Harassment by an Inmate (towards an inmate) Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by an inmate toward another inmate.

Staff Sexual Harassment (towards an inmate) Repeated verbal comments or gestures of a sexual nature to an inmate by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

Staff Sexual Misconduct Any threatened, coerced, attempted, or completed sexual

contact, assault or battery between staff and inmates. Any sexual misconduct by staff directed toward an inmate, as defined in California Code of Regulations (CCR), Title 15, Section 3401.5 and Penal between staff and inmates; any sexual behavior between them constitutes sexual misconduct and shall subject the staff member to disciplinary action and/or to prosecution under the law.

Staff Any person employed by the CDCR, including employees, volunteers, and independent contractors assigned to an institution, community correctional facility, conservation camp, parole, or headquarters.

Employee refers to those individuals who are appointed through civil services employment laws and assigned to a CDCR institution.

Transgender sex at birth. Transgender Man A person whose birth sex was female but who understands oneself to be, and desires to live life as a male. Transgender Woman A person whose birth sex was male but who understands oneself to be, and desires to live life as a female.

Victim For purposes of this policy, a victim is an inmate who has been subjected to inmate sexual violence, staff sexual misconduct, or sexual harassment.

Victim Advocate An individual typically employed by a Rape Crisis Center whose primary purpose is the rendering of advice or assistance to victims of sexual assault and who has received a certificate evidencing completion of a training program in the counseling of sexual assault victims issued by an approved counseling center. The Victim Advocate will be summoned to assist the alleged victim of an in-custody sexual assault including rape, sodomy, oral copulation, or forcible acts of sexual penetration for the SANE exam and interview process. The victim advocate will also be summoned for in-custody abusive sexual contact allegations when appropriate. In cases where an outside Victim Advocate is not available, a designated employee will be summoned, if available; an employee who has been certified by a rape crisis center as trained in counseling of sexual assault victims and who either: (1) A psychiatrist, psychologist, licensed clinical social worker, psychiatric mental health counseling, or others listed in Evidence Code Section 1010; or (2) Has the 40 hours of specialized training listed in Evidence Code Section 1035.2 and is supervised by a staff member in subsection (1) above. If a designated employee is utilized as a Victim Advocate proof of required training must be on file in their personnel or IST file.

Victim Support Person inmate, personal friend, or family member including registered domestic partner.

DOM 54040.20 Tracking - Data Collection and Monitoring states, Tracking Data Collection and Monitoring Data Collection and Monitoring The PCM or the Parole Employee Relations Officer shall report investigations into allegations of sexual violence and staff sexual misconduct on the monthly The PCM or the Parole Employee Relations Officer shall report investigations into allegations of sexual violence and staff sexual misconduct on the monthly update of the Yearly Tracking Report (YTR), including whether the perpetrator was a staff member or inmate, disposition and current status. update of the Yearly Tracking Report (YTR), including whether the

perpetrator was a staff member or inmate, disposition and current status. the fifth day of every month. Additionally, the ISU Lieutenant or Locally Designated Investigator shall be responsible for completing the Survey of Sexual Violence-Incident Adult (SSV-IA). The SSV-IA will be submitted to the Department PREA Coordinator no later than two business days from the date of the allegation. This information shall also be provided (via copy of the CDCR Form 837, Crime Incident Report) to the Inmate Information Systems Branch (OISB) for compilation and tracking. The OIA shall maintain records of investigations into allegations of staff/inmate sexual misconduct, and will report by case number, the type of sexual misconduct, subcategory (male staff with female inmate, female staff with male inmate, etc.); whether the allegations were sustained; and whether a DA referral was made. the fifth day of every month. Additionally, the ISU Lieutenant or Locally Designated Investigator shall be responsible for completing the Survey of Sexual Violence-Incident Adult (SSV-IA). The SSV-IA will be submitted to the Department PREA Coordinator no later than two business days from the date of the allegation. This information shall also be provided (via copy of the CDCR Form 837, Crime Incident Report) to the Inmate Information Systems Branch (OISB) for compilation and tracking. The OIA shall maintain records of investigations into allegations of staff/inmate sexual misconduct, and will report by case number, the type of sexual misconduct, subcategory (male staff with female inmate, female staff with male inmate, etc.); whether the allegations were sustained; and whether a DA referral was made. The CDCR shall aggregate the incident-based data at least annually. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Federal Department of Justice. CDCR shall maintain, review, and collect data as needed from all available documents including incident reports, investigation files, and PREA incident reviews. CDCR shall also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. Upon request, the agency shall provide all such data from the previous calendar year to the federal Department of Justice no later than June 30.

Evidence reviewed/analyzed by provision:

(a) (b) (c) (d) (e) (f) The agency has established definitions consistent with definition in §115.5 and §115.6. Additionally, they use the SSV form to collect data for all allegations and were observed when reviewing the investigation files. The auditor reviewed the Annual Report for Calendar Year 2024. Statistics for the following are provided comparing years 2018, 2019, 2020, 2021, 2022, 2023 and 2024: Substantiated, Unsubstantiated, Unfounded, Ongoing investigations: They are additional provided in individual categories based of the type of allegation. A summary is provided for all Facilities, including privately run facilities. The PREA Coordinator reports that the last SSV submitted was in 2022.

Summary of evidence to support findings: Policies, review of investigations (use of the SSV) review of the Annual Report 2023, review of the last SSV submitted, interview with the PREA Coordinator and PCM provided sufficient evidence to support a finding of compliance.

115.88	Data review for corrective action
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 1406 418">The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul data-bbox="256 454 1046 775" style="list-style-type: none"> · DOM 54040.17 Departmental PREA Coordinator · Interview with the Director of Adult Institutions · Interview PREA Coordinator · Link to website - https://www.cdcr.ca.gov/prea/ · Annual Report on the Prison Rape Elimination Act <p data-bbox="256 810 1393 889">The following policy excerpts supports compliance with the requirements of this standard:</p> <p data-bbox="256 925 1469 1585"><i>Departmental PREA Coordinator Departmental PREA Coordinator 28 CFR, Standard §115.88, requires the agency to review data collected pursuant to standard §115.87 in order to assess and improve the effectiveness of its sexual violence prevention, detection, and response policies, practices, and training. On an annual basis: 1. The departmental PREA Coordinator will forward to each institution, a data collection tool which will be utilized by the institutional PCM to summarize information gathered through the Institutional PREA Committee. 2. 3. 4. The institution will complete the data collection tool and return it to the Departmental PREA Coordinator. The Departmental PREA Coordinator will review the information contained on the data collection tool. 4. The Departmental PREA Coordinator will prepare an annual report of the findings and corrective actions for each facility, as well as the agency as a whole. 5. the findings and corrective actions for each facility, as well as the agency The report will be routed through the chain of command to the Agency Secretary for review and approval. 6. Once approved by the Secretary, the annual report will be forwarded to the Office of Public and Employee Communication for placement on the CDCR Website.</i></p> <p data-bbox="256 1621 852 1657">Evidence reviewed/analyzed by provision:</p> <p data-bbox="256 1693 1469 2067">(a) (b) Review of the Prison Rape Elimination Act Annual Report for Calendar Year 2024 does verify that the agency does 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: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. It does include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of the agency’s progress in addressing sexual abuse.</p>

	<p>(c) Annual reports for 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023 and 2024 are available on the agency website as observed by the auditor. It is signed by the agency Secretary. This was confirmed in the interview with the Director of Adult Institutions.</p> <p>(d) No redactions were required on the Corrective Action Plan.</p> <p>Summary of evidence to support findings: Policy, review of the Annual Report, interview with the Director of Adult Institutions and PREA Coordinator provide the auditor with ample evidence to support a finding of compliance.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · 54040.20 & .21 PREA Data Storage and Destruction · Interview PREA Coordinator · Documentation that it is on the website · Retention Schedule <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p><i>54040.21 PREA Data Storage and Destruction CDCR shall ensure that all PREA data collected are securely retained. All aggregated PREA data, from facilities under CDCRs direct control and private facilities with which it contracts, shall be made readily available to the public at least annually through the CDCR website. Before making aggregated PREA data publicly available, all personal identifiers shall be removed. PREA data collected shall be maintained for 10 years after the date of the initial collection.</i></p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) Policy, interview with the Director of Adult Institutions, and PREA Coordinator all demonstrate that the agency ensures that data is securely retained. The PREA Coordinator indicated, the auditor observed that investigations are maintained in paper version, securely maintained in the investigator office. All other relevant PREA documents are securely retained electronically with access limited to a need-to-know basis.</p> <p>(c)(d) Annual reports for 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023 and</p>

	<p>2024 are available on the agency website as observed by the auditor. No redactions were required. This included information on private facilities with which it contracts are included. This also demonstrates they have maintained data for 10 years</p> <p>Summary of evidence to support findings: Policy, review of the agency website, review of Annual Reports, interview with the PREA Coordinator all confirmed that the agency/facility is compliant with all requirements of this standard.</p>
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115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Posters announcing the audit were visible through Sierra Conservation Camp and all Camp operations:</p> <ul style="list-style-type: none"> Mt. Bullion Vallecito Pine Grove Growlersberg Washington Ridge Ben Lomand Gabilan Miramonte Mountain Home Owens Valley Fenner Canyon Francisquutio Acton Holton Julius Klein Prado Oak Glan

Bautista

La Cima

Delta

Konocti

Parlin Fork

Eel River

Alder

Deadwood

Trinity River

Sugar Pine

Intermountain

Antelope

Ishi

Salt Creek

Posters indicated the following:

The (facility name) will be undergoing an audit for compliance with the United States Department of Justice's National Standards to Prevent, Detect, and Respond to Prison Rape under the Prison Rape Elimination Act (PREA) for (facility type) (dates).

Any person with information relevant to this compliance audit may confidentially* correspond with the auditor via the following address:

*CONFIDENTIALITY - All correspondence and disclosures during interviews with the designated auditor are confidential and will not be disclosed unless required by law. There are exceptions when confidentiality must be legally broken. Exceptions include, but are not limited to the following:

- if the person is an immediate danger to her/himself or others (e.g. suicide or homicide);
- allegations of suspected of child abuse, neglect or maltreatment;
- in legal proceedings where information has been subpoenaed by a court of appropriate jurisdiction.

The auditor was allowed access to visit all areas of all operations, interview anyone the auditor deemed relevant, and review and request any documentation which was

	used to support findings and noted throughout the report.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Agency has thirty-five (35) PREA Reports for CDCR facilities as well as community reentry operations available on the agency website. Audit reports are available by cycle for the audit.

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

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

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

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

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

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

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

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

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

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

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

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

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

	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 degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

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

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

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

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

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

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

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

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

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

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

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	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?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

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

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	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).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

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

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

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

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

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

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	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