

PREA Facility Audit Report: Final

Name of Facility: Wasco State Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/02/2025

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: Julie Ustruck Wetzel	Date of Signature: 06/02/2025

AUDITOR INFORMATION	
Auditor name:	Ustruck Wetzel, Julie
Email:	Julie.UstruckWetzel@wisconsin.gov
Start Date of On-Site Audit:	04/07/2025
End Date of On-Site Audit:	04/10/2025

FACILITY INFORMATION	
Facility name:	Wasco State Prison
Facility physical address:	701 Scofield Avenue, Wasco, California - 93280
Facility mailing address:	Bakersfield,

Primary Contact

Name:	Joseph Diaz
Email Address:	joseph.diaz@cdcr.ca.gov
Telephone Number:	6614484104

Warden/Jail Administrator/Sheriff/Director	
Name:	Christian Pfeiffer
Email Address:	Christian.Pfeiffer@cdcr.ca.gov
Telephone Number:	(661) 758-8400 x7000

Facility PREA Compliance Manager	
Name:	Joseph Diaz
Email Address:	joseph.diaz@cdcr.ca.gov
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Name:	Isidro Leyva
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Name:	Thomas Miller
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Telephone Number:	661-758-8400 x6801/6
Name:	Jennifer Marines
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Telephone Number:	661-758-8400 x6804

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

Telephone Number:	661-758-8400 x7014
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Facility Characteristics	
Designed facility capacity:	4448
Current population of facility:	3757
Average daily population for the past 12 months:	3656
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/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 80
Facility security levels/inmate custody levels:	Level III, MSF, Reception Center
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	1190
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	67
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	13

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

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

45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-04-07
2. End date of the onsite portion of the audit:	2025-04-10

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:	<p>An interview was conducted with Kern County Forensics Services, LLC, the agency responsible for conducting sexual assault examinations.</p> <p>Attempts were made to interview staff from Open Door Network who serve as the advocacy agency using the online contact form and leaving a voice mail message. No further contact was made with Open Door Network.</p>

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	4448
15. Average daily population for the past 12 months:	3656
16. Number of inmate/resident/detainee housing units:	30

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

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

<p>18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</p>	<p>3470</p>
<p>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:</p>	<p>128</p>
<p>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:</p>	<p>15</p>
<p>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:</p>	<p>4</p>
<p>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:</p>	<p>59</p>

<p>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:</p>	<p>199</p>
<p>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:</p>	<p>9</p>
<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>20</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>5</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>This disability roster provided by CDCR included individuals identified with hearing, speech, vision, and mobility challenges. Many of the individuals experienced more than one of the challenges listed.</p>

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
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:	1190
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:	49
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:	67
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:	In the PAQ, WSP indicated 13 volunteers and 67 contractors are approved to provide services to incarcerated persons at WSP. However, documents received by WSP during post audit list 49 volunteers. A list of contractors was not received. However, a list of 38 medical and mental health registry staff was received.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	30

<p>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input checked="" type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>
<p>If "Other," describe:</p>	<p>In additional to housing assignment, race, and ethnicity, individuals were selected based on program, job assignment, custody, and level. Additionally, a sample of both RC (reception) and GP (general population) were selected. Within reception those with a classification were assumed to have been at the facility longer than someone in reception who was unclassified. Both classified and unclassified persons were selected for interview.</p>
<p>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Random interviewees were initially selected by using the Inmates By Housing Area Roster. The roster provides cell/bed number, inmate name, CDCR #, race/ethnicity, level, custody, program, and job assignment. One person was selected for an interview for every 100 people in the facility, rounding up. For instance, Facility A listed 760 incarcerated persons. Eight individuals were selected for random interview. Every 95th name was selected, ensuring a diverse sample of noted characteristics.</p>
<p>37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<p>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):</p>	<p>All incarcerated individuals were interviewed using the random interview questions for a total of 58 random interviews. Of those selected for interview, at least 5 were transferred from WSP to other CDCR institutions. Additionally, several individuals refused to be interviewed. To accommodate for refusals and transfers, other available and random individuals were selected while on site.</p>
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Targeted Inmate/Resident/Detainee Interviews

<p>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>28</p>
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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:</p>	<p>2</p>
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<p>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:</p>	<p>4</p>
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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:	2
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:	4
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:	7
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:	8
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:	0

<p>47. 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>47. 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>Using the PREA Log, auditors were able to identify individuals who reported sexual abuse in the facility. Based on the log, investigatory file review, and Inmates By Housing Area roster, auditors determined there was one person remaining at WSP who reported sexual abuse. He was transferred from WSP prior to the interview. WSP is a reception site, with individuals transferring out within 60 days of arrival.</p>
<p>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:</p>	<p>0</p>
<p>48. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input 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 checked="" type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<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 Alleged 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>WSP indicated they did not place incarcerated persons in segregated housing who were at risk of sexual abuse or who alleged to have suffered sexual abuse. There was no indication through staff and incarcerated person interviews to suggest this is a practice at WSP. Attempts were made to interview individuals in segregated housing, however those who were asked to be interview refused.</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>Given the dynamics of the population, It was not uncommon for informal conversations and formal interviews to be refused. Auditors were more successful with interviews when the incarcerated person was brought to a central location rather than auditors conducting interviews on housing units or in areas with entrances visible to the population.</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>13</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 checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>If "Other," describe:</p>	<p>Interviews were conducted with uniform (custody) and non-uniform (free) staff assigned to various areas of the institution such as administration and each facility. Additionally, both male and female staff were interviewed.</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>At the beginning of each watch, WSP provided a roster of custody staff on site, which listed job assignment and rank. Staff from each yard and each shift were selected for interview to ensure a represented sample of staff. Given this attempt to reach staff on all shifts and yards, random staff were primarily uniform custody staff.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>23</p>

56. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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 type="checkbox"/> Other
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:	2
62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other

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

- All custody uniform staff interviewed using the random question protocols were also asked to describe their actions as a first responder.
- The agency head was interviewed by Auditor Dawn Landers on October 22, 2024. This interview was referenced in the WSP audit report.
- The PREA Coordinator was interviewed by Auditor Leigha Weber on November 7, 2024. This interview was referenced in the WSP audit report.
- The Contract Administrator was interviewed by Auditor Leigha Weber on November 6, 2024. This interview was referenced in the WSP audit report.
- The WSP Warden was interviewed virtually by this writer pre-onsite using the Warden interview protocols.
- The PREA Compliance Manager was interviewed virtually pre-onsite by this writer using the PCM, Unannounced Rounds, and Institution PREA Review Committee interview protocols.
- Additionally, the following interviews were conducted virtually pre-onsite utilizing specialized interview protocols: Investigative Sergeant who is also responsible for retaliation monitoring, Human Resource Manager, Medical Supervisor, Training Manager, and Mailroom Supervisor.
- WSP does not house anyone under the age of 18 years old and as such, interviews were not conducted with staff supervising youthful inmates or those staff who provide education and programming to youthful inmates.

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.

64. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
68. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

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).

During the tour, the phone reporting system was tested on two facilities. Auditors called the phone number listed near the phones in which an incarcerated person may use to report incidents of sexual abuse or sexual harassments. Auditors left messages, indicating the reason for the call. The following day, the PCM acknowledged one of the phones calls as the information was passed to the Warden. The second call was acknowledged three days later. During the tour, auditors tested the process for incarcerated persons to receive support services through the local rape crisis center using the phone number listed near the phones. The auditor spoke to a person who indicated the call line is essentially a referral source. A pin number was not needed for the call to be made. Auditors also utilized the language line to interpret incarcerated person interviews in Romanian. The process was easily navigated and staff were familiar with the process. Additionally, auditors utilized staff interpreters for Spanish. Additionally during the tour, signage was observed throughout the institution, specifically noting signage near the phones providing incarcerated persons reporting information as well as audit notices. It should be noted, phone numbers for PREA incident reporting and support services were commonly found stenciled/painted on the walls near the phones. During the tour, staff walked auditors through the work change process and the intake process which includes the PREA screening and education. Auditors engaged in informal conversations with staff and inmates. Of note, inmates at WSP have tablets which contain PREA and other institution information. Inmates spoke with and showed auditors relevant information on their tablets.

Documentation Sampling

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

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?

Yes

No

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

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

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

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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	10	10	10	10
Staff-on-inmate sexual abuse	2	2	2	2
Total	12	2	2	12

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	2	2	2	2
Staff-on-inmate sexual harassment	5	5	5	5
Total	7	7	7	7

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	2	1	0	0	0
Staff-on-inmate sexual abuse	2	0	0	0	0
Total	4	1	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	2	4	3	1
Staff-on-inmate sexual abuse	2	0	0	0
Total	4	4	3	1

Sexual Harassment Investigation Outcomes

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

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	2	0
Staff-on-inmate sexual harassment	6	0	0	0
Total	6	0	2	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:	6
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<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 checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual 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>6</p>
<p>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<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>0</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 type="radio"/> No</p> <p><input checked="" 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 type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" 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 checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<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>2</p>
<p>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<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:	2
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.	<p>WSP local investigators conduct all inmate on inmate sexual harassment and sexual abuse allegations, while OIA conducts investigations involving staff. WSP maintains files with Initial information and referral information for staff involved cases, however, the ongoing investigations and the official record is maintained with OIA. The PREA log also maintains allegations received by WSP staff that occurred at other institutions. Although WSP is involved in the investigation, this auditor did not include those investigations in the total number. This auditor did review two files in which incarcerated persons reported sexual abuse having occurred at other institutions. This was to confirm the timeliness of Warden to Warden notifications and mental health response.</p>

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.

- Yes
 No

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

2

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

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

1

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

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

Wisconsin Department of Corrections

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

Yes

No

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • Department of Corrections and Rehabilitation (CDCR) Department Operations Manual (DOM) Chapter 5, Article 44 Prison Rape Elimination Act Policy • California Code of Regulations Title 15, Section 3401.5 Staff Sexual Misconduct • Penal Code of California 289.6 3. Documents <ul style="list-style-type: none"> • Prison Rape Elimination Act Implementation correspondence; Memo and routing slip dated August 13, 2015 - 6 pages

- PREA Information for Orientation Handbook - 2 pages
- Institution PREA Review Committee blank form - 2 pages
- Email to Institution Wardens dated August 13, 2015 Subject: Prison Rape Elimination Act (PREA) Implementation
- California Department of Corrections and Rehabilitation Division of Adult Institutions Female Offender Program and Services/Special Housing Mission Organizational chart effective October 2024
- California Department of Corrections and Rehabilitation Organization Chart effective August 30, 2024

4. Interviews

- PREA Coordinator
- PREA Compliance Manager (PCM)

5. Site Review

Findings:

Subsection (a):

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

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

DOM Chapter 5, Article 44 Section 54040.12 states that all allegations of sexual violence, staff, sexual misconduct, and sexual harassment will be investigated. Specifically, DOM Chapter 5, Article 44 addresses incarcerated person Disciplinary Process in Section 54040.15, noting the potential for criminal prosecution and classification determinations. DOM Chapter 5, Article 44 does not specifically address staff discipline, other than to note that staff misconduct is reported to the Hiring Authority. CCR Title 15 Section 3401.5 defines staff sexual misconduct and addresses and notes that the employee is subject to disciplinary action and/or criminal prosecution.

Subsection (b):

CDCR employs a state-wide PREA Coordinator housed in the Female Offender Programs and Services/Special Housing. The PREA Coordinator is a Captain classification and reports directly to the Correctional Administrator. The PREA Coordinator reports having sufficient time to manage statewide PREA responsibilities and notes that the Coordinator role is exclusively reserved for PREA Compliance. He also credits additional staff designated to assist in carrying out PREA compliance responsibilities. In addition to the PREA Coordinator, PREA Compliance Unit employs two lieutenants and various other staff to support PREA efforts statewide.

Subsection (c):

CDCR has identified 35 PREA Compliance Managers (PCM) and additional backup PREA Compliance Managers to support PREA initiatives within each institution and the Contract Beds Unit. The PCM position at WSP is held by an Associate Warden, who reports directly to the Warden. The PCM reports having enough time to address PREA responsibilities. He describes his specific responsibilities coordinating efforts to meet the PREA standards and notes his team is directly involved with training, responding to incidents of sexual abuse and sexual harassment, and addressing any needed corrective action.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure

3. Documents

- Memorandum dated February 1, 2022 from PREA Coordinator to PREA Auditors; Subject: Contracting with other entities for the confinement of inmates - 115.12
- Standard Agreement between CDCR and Mental Health Systems effective July 1, 2020 through June 30, 2025; 201 pages
- Standard Agreement between CDCR and Epidaurus DBA Amity Foundation effective July 1, 2024 through June 30, 2033; 193 pages
- Standard Agreement between CDCR and St. John's Program for Real Change effective July 1, 2021 through June 30, 2026; 202 pages
- Standard Agreement between CDCR and WestCare California effective July 1, 2024 through June 30, 2025; 207 pages
- Standard Agreement between CDCR and Los Angeles Centers for Alcohol and Drug Abuse L.A. Cada) effective July 1, 2023 through June 30, 2026; 198 pages
- Standard Agreement between CDCR and WestCare California effective July 1, 2020 through June 30, 2025; 200 pages
- Standard Agreement between CDCR and Los Angeles Centers for Alcohol and Drug Abuse effective Upon Approval through June 30, 2025; 183 pages
- Standard Agreement between CDCR and Tri County Treatment effective Upon Approval through June 30, 2033; 2 pages
- Standard Agreement between CDCR and Turning Point of Central California effective July 1, 2024 through June 30, 2027; 2 pages
- Standard Agreement between CDCR and HEALTHRIGHT 360 effective July 1, 2024 through June 30, 2026; 28 pages
- Standard Agreement between CDCR and Geo Reentry, Inc. effective Upon Approval through June 30, 2033; 2 pages
- Standard Agreement between CDCR and CORECIVIC INC effective July 1, 2024 or Upon Approval, through June 30, 2033; 187 pages
- Standard Agreement between CDCR and Epidaurus DBA Amity Foundation effective Upon Approval through June 30, 2033; 60 pages
- CDCR Special Terms and Conditions Exhibit D; 27 pages
- Memorandum dated December 30, 2022 to Male Community Re-Entry Program (MCRP) Providers and Custody to Community Re-Entry Program (CCTRP) Providers Subject: Compliance to Prison Rape Elimination act (PREA); 2 pages
- CDCR Special Terms and Conditions Exhibit D; 27 pages
- Memorandum dated December 30, 2022 to Male Community Re-Entry Program (MCRP) Providers and Custody to Community Re-Entry Program (CCTRP) Providers Subject: Compliance to Prison Rape Elimination act (PREA); 2 pages
- Contract Compliance Review Report Prison Rape Elimination Act -Mental Health Systems Casa Aurora dated May 16, 2023
- Contract Compliance Review Report Prison Rape Elimination Act - Amity Foundation La Entrada dated May 9, 2023

- Contract Compliance Review Report Prison Rape Elimination Act - Westcare CCTRP San Diego dated May 10, 2023
- Contract Compliance Review Report Prison Rape Elimination Act - CCTRP La Cada Santa Fe Springs dated June 8, 2023
- Contract Compliance Review Report Prison Rape Elimination Act - Saint John's Program CCTRP - Sacramento dated April 18, 2023
- Contract Compliance Review Report Prison Rape Elimination Act - WestCare CCTRP - Stockton dated April 20, 2023
- PREA Facility Audit Report Final: The GEO Group dated August 2, 2021
- Contract Compliance Review Report Prison Rape Elimination Act - HealthRight 360 LA-1 MCRP-HR360 dated June 7, 2023
- Contract Compliance Review Report Prison Rape Elimination Act - Amistad De Los Angeles dated May 17, 2023
- Contract Compliance Review Report Prison Rape Elimination Act - GEO Group Inc Long Beach MCRP dated June 8, 2023
- PREA Facility Audit Report Final: Boston Avenue Residential Reentry Center dated February 23, 2023
- Contract Compliance Review Report Prison Rape Elimination Act - Butte County Probation Tri-County Treatment dated January 10, 2023
- Contract Compliance Review Report Prison Rape Elimination Act - Turning Point of Central California Kennemer Center dated December 20, 2022
- Contract Compliance Review Report Prison Rape Elimination Act Blank; 5 pages
- CDCR Public Website

4. Interviews

- Contract Administrator

5. Site Review

Findings:

Subsection (a):

According to the PAQ, CDCR holds thirteen contracts for the placement and care of incarcerated persons. All thirteen contracts include Exhibit D, Special Terms and Conditions which addresses CDCR's commitment to the PREA standards and the expectation that the contracted agency "adopt and comply with the PREA standards, 28 Code of Federal Regulations (CFR) Part 115 and with the CDCR's Department Operations Manual, Chapter 5, Article 44". Exhibit D further addresses both CDCR staff and outside audit personnel conducting audits to ensure compliance with the PREA standards.

Subsection (b):

	<p>Although language is, and has been present in the current contracts, formal PREA compliance monitoring began in 2022. PREA compliance monitoring was documented in the PAQ for one contracted facility in 2022 and 10 in 2023 using the Contract Compliance Review Report Prison Rape Elimination Act. This five-page checklist addresses all areas of the PREA standards. Completed forms indicated methods of evaluation and noted areas in which practices were observed or corrective action was made. Additionally, two of the facilities completed formal PREA audits, one in 2021 and one in 2023.</p> <p>In an interview on November 6, 2024, the Contract Administrator confirmed that years in which facilities are not audited, the agency uses the contract monitoring tool to monitor compliance. He furthered that each facility has a CDCR CCIII (Corrections Counselor III) onsite to monitor daily operations and policy compliance. The Contract Administer reported that 12 facilities were audited year 2 of cycle 4, however, only two “passed”. These audit reports were not submitted in the PAQ, however ten are posted on the CDCR public website. CDCR has developed a schedule for contract monitoring for this audit year.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.13 Supervision and monitoring	
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • OP 116 Emergency Correctional Officer Vacancy Coverage Plan, 6 pages 3. Documents <ul style="list-style-type: none"> • Staff Codes for Staff Vacancies, 20 pages • Notice of Unusual Occurrence/Incident Administrative Contact Report dated October 1, 2023, 3 pages • California Department of Corrections and Rehabilitation In-Service Training (IST) Prison rape Elimination Act (PREA) Participant Workbook Version 2.0 Course Code: 11054378; 62 pages

- Rounds Log Book photos, 3
- Wasco State Prison - Reception Center Staffing Plan Analysis dated April 4, 2025

4. Interviews

- PREA Coordinator
- Warden
- PREA Compliance Manager

5. Site Review

- Log Books

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.18 addresses the institutional staffing plan for each facility operated by CDCR. Section 54040.18 requires each facility develop, document and make its best effort to comply with the staffing plan to protect incarcerated persons against sexual abuse. Facilities are required to consider the 11 factors as noted in 28 C.F.R. Part 115 Section 115.13.

According to the PAQ, since the last audit, the average daily population is 3656 and the institutional staff plan is designed for the average daily population of 4448. The 2024 average daily population was 3521. WSP operates with a current staffing plan updated on April 4, 2025. The staffing plan includes the 11 factors noted in the 28 C.F.R. Part 115 Section 115.13 and DOM. The Warden discussed the staffing plan and considerations in its development.

Subsection (b):

The Warden indicated there is a contingency plan if not able to fill posts by modifying programming. The Emergency Correctional Officer Vacancy Coverage Plan dated January 22, 2025 specific to WSP, details a plan to reduce programs to maintain adequate staffing levels when staffing levels are below minimum due to off grounds appointments, staff absenteeism, or vacant posts that could not be filled utilizing the overtime recruitment process. The operating procedure identifies how the institution will fill vacancies, notification and documentation when WSP operates under modification of programs. Notably, documentation is made using the Notice of Unusual Occurrence/Incident by the Watch Commander and distributed to the Warden. A completed Notice of Unusual Occurrence/Incident was submitted for review outlining vacant shifts, reasons for the vacancies, and efforts made to fill the vacancies.

According to the PAQ, in the past twelve months, WSP has not deviated from the staffing plan, requiring modified programs.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.17.1 requires at a minimum, an annual review of the staffing plan. During this annual review, the PREA Coordinator, PCM, and the Program Support Unit assess the staffing plan, the facility's deployment of video monitoring technology, and resources assigned to ensure adherence to the staffing plan. The Prison Rape Elimination Act (PREA) Annual Data Collection Tool and Staffing Plan Review dated January 22, 2024 was submitted and reviewed. The staffing plan review indicated all areas of the staffing plan were considered according to the PREA standards. The current WSP staffing plan was reviewed on January 15, 2025 and includes the 2024 average daily population and 2024 data for incidents of sexual abuse. The staffing plan was finalized April 4, 2025 and is signed by the PCM, the Warden, and the PREA Coordinator.

The PREA Coordinator confirmed his involvement with the annual staffing plan review.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.4 addresses Security Rounds as a means of identifying and deterring sexual violence, staff sexual misconduct and sexual harassment. A custody supervisor is required to conduct weekly unscheduled security checks. The security checks are documented in the Unit Log Book in red pen and indicates date, time, and location in which the security check was completed. By policy, staff are prohibited from alerting other staff of the security rounds unless such announcement is related to a legitimate operational function of the facility.

The California Department of Corrections and Rehabilitation In-Service Training (IST) Prison Rape Elimination Act (PREA) Participant Workbook Version 2.0 Course Code: 11054378 consisting of 62 pages was submitted for review. Page 19 confirms that staff are trained regarding security rounds expectations as noted in the DOM. However, training is silent regarding the prohibition of staff alerting other staff that the security rounds are occurring. Random staff conversations during the tour did not indicate staff were alerted or alerted other staff when supervisors conducted rounds. Although no staff offered that notifying other staff of supervisory rounds was prohibited.

Additionally, three log book pages were submitted for review, verifying security rounds are completed on all three watches. They were noted in red ink and identified the staff, date, and time. Furthermore, during the tour of the facility, log books on each housing unit were reviewed, and confirmed security rounds being completed on all three watches. It should be noted rounds were conducted more frequently during second and third watch and less frequently on Facility M.

Recommendation: 115.13 (d) When updating In-service training for PREA, include in the lesson plan that staff are prohibited from alerting other staff of the security rounds, unless the announcement is related to legitimate operational function of the

	<p>facility. Although this may be common practice and not specific to PREA, this training is an opportunity to reinforce the expectation.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure 3. Documents 4. Interviews <ul style="list-style-type: none"> • PREA Coordinator • Warden 5. Site Review <p>Findings:</p> <p>Subsection (a):</p> <p>WSP does not house any incarcerated person under the age of 18 years old, as noted in the PAQ and confirmed by the PREA Coordinator, Warden, and random WSP staff.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44
- CDCR Department Operations Manual Chapter 5, Article 19 - Arrest, Search, and Seizure

3. Documents

- Memorandum dated February 8, 2019 subject: Changes in the use of the ADANI CONPASS low dose scanner, 2 pages
- California Department of Corrections and Rehabilitation In-Service Training (IST) Prison rape Elimination Act (PREA) Participant Workbook Version 2.0 Course Code: 11054378; 62 pages
- Memorandum dated November 6, 2020 subject: Overview of Senate Bill 132 - Training; 3 pages
- Memorandum dated September 24, 2019 subject: Policies and procedures related to working with transgender and gender non-conforming inmates; 6 pages
- CDCR In-Service Training (IST) version 2.0 Working Successfully with Transgender, Intersex, and Non-Binary Inmates Lesson Plan; 72 pages
- CDCR Overview of Senate Bill 132; 44 slides
- Course Enrollments "Working Successfully with Transgender Inmates 2024 - Online - OJT - 11063366" dated February 24, 2025
- Course Enrollment "Working Successfully with Transgender, Intersex, and Non-Binary Inmates 2021 - ILC - IST - 11060835" dated February 24, 2025

4. Interviews

- Random Staff
- Incarcerated Persons

5. Site Review

Findings:

Subsection (a):

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

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

Subsection (b):

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

Subsection (c):

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

Subsection (d):

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

WSP is comprised of six facilities, five of which are currently in use. Facility A houses general population and is comprised of five housing units. The cells are two person wet cells with common showers on each tier. Facility A also contains a work change area in which incarcerated persons pass through going to and from their housing unit to work and vocational education. Staff in work change are male, as this is an area in which unclothed searches may take place. When unclothed searches are taking place, a privacy screen is utilized and the area is closed for pass through. Facility C houses newly arrived incarcerated individuals and is comprised of four housing units, with each housing unit having two wings. The housing units are two tiers in a dorm style. Toilets and showers are located in the corners of each tier and designed to

provide privacy. Facility D houses incarcerated individuals who are in reception. This facility contains EOP, special needs, and segregation housing unit. It is comprised of six housing units, with each housing unit having two wings. The housing units are two tiers, with cells containing sinks and toilets. Common showers are located on each tier and are individual stalls which provide privacy. Housing unit H also houses newly arrived incarcerated persons and is comprised of 4 housing units. They are one level barracks style with toilets and showers in an open bay. Although open bay style, incarcerated persons may use the facilities without being observed by female staff. Facility M is located outside of the fence and houses incarcerated individuals in the firefighting program. Further, incarcerated persons with medical needs reside in CTC. All housing units utilize monitoring technology and mirrors to enhance supervision. Housing units of similar design, mirror each other in camera and mirror placement. Camera and mirror views allow incarcerated persons privacy when showering, toileting, or changing clothes. Further, an opposite gender notice is affixed to the entrance of each housing unit.

Subsection (e):

DOM Chapter 5, Article 19, Section 52050.16.7 addresses unclothed and clothed body searches of transgender and intersex incarcerated persons. The process is outlined and provides clear direction to staff that if staff are unable to determine the genital status of an incarcerated person through medical records or an interview with the incarcerated person, the incarcerated person is placed on single-cell status until a medical evaluation is completed. Submitted training materials verify that staff are trained not to search or physically examine a transgender person for the sole purpose of determining genital status and provides other options for making the determination. All random staff interviewed acknowledged a policy, or at a minimum, stated they are not allowed to conduct an unclothed search of an incarcerated person to determine genital status. Incarcerated persons interviewed confirmed they were not searched for the sole purpose of determining genital status.

Subsection (f):

WSP submitted training documents and memorandums for review. These memorandums, training lesson plans and power points consistently contained language outlining how a search should be completed as well as addressing staff professional and respectful communication and conduct. The PAQ indicated that 98% of security staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex incarcerated persons in a professional and respectful manner. All custody staff interviewed confirmed having completed training to conduct cross gender or transgender clothed searches. Several staff furthered by demonstrating appropriate techniques for clothed body searches. Course Enrollment Training records for the online Working Successfully with Transgender Inmates 2024 training indicates 93% of staff completed the training. These numbers translate to one custody staff not completing the training. A process is in place to address staff who do not complete mandatory annual training. Additionally, Course Enrollment Training Records for in person Working Successfully with Transgender, Intersex, and Non-Binary Inmates 2021 - ILC - IST - 11060835 indicated 87% of staff have

	<p>completed this training.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operation Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> • I Speak Language Identification Guide • Memorandum dated October 6, 2017; Subject: Incarcerated persons with disabilities and incarcerated persons who are limited English proficient • CDCR Disability Code Definitions • Standard Agreement between CDCR and Interpreters Unlimited effective through December 31, 2026; 203 pages • Standard Agreement between CDCR and Focus Language International effective through December 31, 2026; 138 pages • CDCR 128-B General Chrono; 60 completed 4. Interviews <ul style="list-style-type: none"> • Agency Head • Staff • Incarcerated Persons 5. Site Review <p>Findings:</p> <p>Subsection (a):</p>

DOM Chapter 5, Article 44, Section 54040.4 addresses Offender Education and lists a number of PREA educational opportunities for incarcerated persons, including orientation while in reception center either written or multimedia presentations, PREA brochure, PREA Booklet, posters, and offender handbook. Section 54040.4 also states that provisions shall be made to ensure effective communication for those not fluent in English, those with low literacy levels, and those with disabilities. Section 54040.4 furthers that offender peer educators may be used to enhance knowledge and understanding of PREA and sexually transmitted diseases.

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

The agency head confirmed that procedures are in place to ensure all incarcerated persons have equal opportunity to participate in all aspects of CDCR's efforts to ensure sexual safety of incarcerated persons. CDCR offers PREA education in Spanish and contracts for interpretation services available during interviews as well as written transcription. PREA posters are written in a manner easily read. Further, the education video is on the individual tablets allowing incarcerated persons to read, see, or hear the information. Finally, staff are available to aid those with cognitive limitations.

CDCR has the option to use interpreters, provide staff assistance, sign language interpreters, and bilingual materials. CDCR also utilizes "effective communication" when interacting with those who are identified as developmentally disabled, have mental health concerns, have a less than 4th grade reading level, have physical disabilities or language other than English. It is a process of asking open ended questions to ensure the individual has the information.

CDCR 128-B General Chrono documents the receipt of PREA education and Effective Communication. 60 completed CDCR 128-B General Chronos were submitted for review and indicated efforts made to ensure the individual received and understood Prison Rape Elimination Act information. Effective communication was satisfied by checking either the box indicating the "inmate asked questions" or "inmate summed information". These documents contained the incarcerated person's signature.

Subsection (b):

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

A copy of the I-Speak Card was submitted through the PAQ. Institutions maintain a list

of staff who are bilingual and are certified to serve as an interpreter. If staff are not available, interpreter services are available by phone through Interpreters Unlimited or Focus Language International. The Standard Agreement between CDCR and both agencies was reviewed and confirmed the relationship between both organizations. The interpretation services through Interpreters Unlimited was utilized during the audit. The process to obtain services was easily navigated and accommodated the needs of the interview. Additionally, a staff interpreter was utilized for Spanish interpretation.

Fourteen incarcerated persons were interviewed who were identified with a cognitive or physical disability or limited English language. Ten incarcerated persons indicated they received information about sexual abuse and sexual harassment in a manner they were able to understand. Two incarcerated persons who reported not receiving information about sexual abuse and sexual harassment were identified with a cognitive or functional impairment and two limited English speaking/reading. The four incarcerated individuals signed receipt of the CDCR 128-B and checked "inmate summed information", however, interpreters were not used, or at least not documented has having been utilized during the education.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.7 mirrors language 28 CFR 115.16 (c) and Section 54 040.12 further reiterates the standard specific to investigations; "Except in limited circumstances or exigent circumstances, investigators shall not rely solely on incarcerated person interpreters, readers, or other types of incarcerated person assistance during a sexual violence, staff sexual misconduct, or sexual harassment investigation."

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

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 3, Article 6 – Appointments
- CDCR Department Operations Manual Chapter 3, Article 22 - Employee Discipline
- CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

- Hiring Guide for Managers and Supervisors - Phase 6 Selecting Candidates 5
- CDCR 1951 Supplemental Application For All CDCR Employees; blank form
- CDCR 2164 Live Scan Response; blank form
- Personnel Information Bulletin dated September 16, 2016
- Memorandum dated July 14, 2017; Subject: Completion of Background Checks Under the Prison Rape Elimination Policy
- CDCR Special Terms and Conditions Exhibit D
- STD 678 Examination / Employment Application; State of California Application Instructions and State of California Application
- Contractor/Registry files; 5 files
- CDCR 2164; 5 completed medical
- CDCR 1951; 10 completed
- Background check - institution to institution

4. Interviews

- Staff Services Manager (HR)
- Community Resource Manager (Volunteer/Contract Coordinator)

5. Site Review

- HR File Review

Findings:

Subsection (a):

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

- has engaged in sexual violence, or staff sexual misconduct of an inmate in a prison, jail, lockup, community confinement facility, juvenile facility or other institutions;
- has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or;
- has been civilly or administratively adjudicated to have engaged in the activity described immediately above.”

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

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

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

Subsection (b):

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

Subsection (c):

A criminal records check is a requirement for employment with CDCR. Prior to hiring employees who may have contact with inmates, all prior institutional employers are contacted to learn if the candidate was involved in a substantiated incident of sexual abuse or if the candidate resigned during an investigation. If the candidate answers affirmatively to having been the subject of a substantiated allegation of sexual abuse or having resigned during a pending investigation of sexual abuse prior to the

investigation conclusion, then according to The Hiring Guide for Managers and Supervisors, Phase 6, the hiring manager is to stop the hiring process as the candidate is no longer eligible for hire.

In 2017, CDCR issued a memo to CDCR Background Investigators outlining PREA standard requirements and how CDCR resolved to follow the standard. This included completing a criminal background records check before hiring new employees and making best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or resignation during a pending investigation of an allegation of sexual abuse. These requirements are formalized in DOM Section 31060.16 updated in 2021.

The CDCR 1951 Supplemental Application For All CDCR Employees is completed by all applicants, including candidates who transfer classification or are seeking promotion as noted in the Personnel Information Bulletin dated September 16, 2016. Section D of the CDCR 1951, includes a section for applicants to list all previous correctional institution employers for whom they have previously worked. The Staff Services Manager confirmed that criminal background checks are conducted for all newly hired employees and those being considered for promotion. CDCR utilizes the Live Scan System for all employees.

According to the PAQ, 151 people who have contact with inmates were hired during the past year. Auditors were provided the completed CDCR 1951 for 10 new staff, including healthcare, non-custody, custody, and contracted staff. All of the applicants answered "no" to the questions asked in Section D - Compliance with the Federal Prison Rape Elimination Act as noted in 115.17 a & b.

Subsection (d):

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

The PAQ indicates Wasco had 30 contracts for services where criminal background record checks were conducted on all staff who may have contact with incarcerated persons.

Five registry staff files were reviewed and an additional five completed DOC 2164 for

medical registry staff was submitted for review. All five registry files contained the completed and approved CDCR 2311 Background Security Clearance.

Subsection (e):

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

The PAQ indicates Wasco had 30 contracts for services where criminal background record checks were conducted on all staff who may have contact with incarcerated persons.

Subsection (f):

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

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

Subsection (g):

When completing an Examination/Employment Application for the State of California, the applicant certifies with a signature; "I certify under penalty of perjury that the information I have entered on this application is true and complete to the best of my knowledge. I further understand that any false, incomplete, or incorrect statements may result in my disqualification from the examination process or dismissal from employment with the State of California. I authorize the employers and educational institutions identified on this application to release any information they may have concerning my employment or education to the State of California." Additionally, the CDCR 1951 Supplemental Application for All CDCR Employees specifically states

above the applicant signature line; "Furthermore, I understand and agree that if material facts are later discovered which are inconsistent with or differ from the facts I furnished before beginning employment, I may be rejected on probation and/or disciplined, up to and including dismissal from State service." Completed CDCR 1951s all contained the applicants signature certifying the application contains truthful information and if facts are later discovered inconsistent with what is contained in the application, the employee may be disciplined. According to DOM Chapter 3, Section 33030.19 Employee Disciplinary Matrix E.8, "Falsification of application or omission of information for employment or promotion when it materially affects acceptance or rejection for employment or promotion, is grounds for dismissal". Additionally, the Staff Services Manager confirmed staff have a duty to disclose misconduct.

Subsection (h):

In addition to Live Scan criminal records checks, institutions contact previous institutions in which the applicant was employed. According to Staff Services Manager, previous institutions in which a candidate was employed is contacted specific to PREA related questions. An example of an institution to institution background check was submitted for review.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure 3. Documents 4. Interviews <ul style="list-style-type: none"> • Director of CDCR Adult Institutions (Agency Head) • Warden 5. Site Review

	<p>Findings:</p> <p>Subsection (a):</p> <p>According to the PAQ, WSP has acquired new facility or made any substantial modifications. Noted modifications were the closing of Facility B since the last audit.</p> <p>According to an interview with the Director of Adult Institutions, the institution PCM is involved in any type of design changes or construction projects. Additionally, the Facility Plan Ops is involved to ensure code and PREA compliance. When designing space, staff are considering PREA standards and ways to ensure sexual safety such as cross gender viewing, blind spots, and camera placement.</p> <p>Subsection (b):</p> <p>According to the PAQ, WSP has updated or newly installed video monitoring technology. WSP recently received 620 new cameras placed throughout the institution. Camera placement decisions were collaborative and were installed strategically to alleviate blind spots. During the site review, cameras were noted by auditors and confirmed their placement alleviated blind spots and increased safety and security of the institution.</p> <p>The Director of Adult Institutions confirmed that cameras are installed in all of the institutions. They serve as a deterrent and provide evidence in the event of an incident or allegation. Additionally, body worn cameras are utilized in 10 of the institutions, however, WSP is not currently utilizing body worn cameras.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • California Department of Corrections and Rehabilitation California Correctional

Health Care Services Health Care Department Operations Manual Chapter 4,
Article 1

3. Documents

- Memorandum dated October 17, 2018; Subject: Sexual Assault Kit Processing
- PREA: Initial Contact Guide; 2 pages
- PREA: Custody Supervisor Checklist; 2 pages
- PREA: Transportation Guide; 2 pages
- CDCR Watch Command Notification Checklist
- (PREA) Institution, DAPO, CST, and AIU Responsibilities All Staff-on-Offender Prison Rape Elimination act (PREA) Allegations, dated January 1, 2023
- National Protocol for Sexual Assault Medical Forensic Examinations; dated April 13, 2013; 144 pages
- CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators, Participant Workbook; Version 1.0, LDI Stand Alone BET ID 11057915
- Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Participant Workbook; Version 1.0
- Rape Crisis Center Poster; English and Spanish
- Agreement Memo to Open Door Network from CDCR dated September 13, 2024
- Memorandum of Understanding between Open Door Network and CDCR; 5 pages
- California Correctional Health Care Services memorandum dated February 22, 2019
- Standard Agreement between CDCR and Kern County Forensics Services, LLC; February 12, 2025 through December 29, 2029; 63 pages
- Agreement Summary Kern County Forensics Services, LLC and CDCR for Sexual Assault Forensic Services
- The Open Door Network Public Website

4. Interviews

- PREA Compliance Manager
- Investigative Staff
- Random Staff
- SAFE/SANE Staff

5. Site Review

- Investigatory file review

Findings:

Subsection (a):

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

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

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

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

Subsection (b):

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

CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Participant Workbook and corresponding Power Point was submitted for review. The training incorporates information from: The Peace Officers Standard and Training Guidelines on Adult/Adolescent Sexual Assault Investigations, PREA Resource Center, National Council on Crime and Delinquency, United States Department of Justice, and National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents Patient 2012. The Basic Investigators training incorporates topics presented in the National Protocol for Sexual Assault Medical Forensic Examinations,

Adults/Adolescents such as victim centered care, informed consent, and confidentiality.

Subsection (c):

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

WSP submitted a 63 page Standard Agreement between CDCR and Kern County Forensic Services, LLC for Sexual Assault Forensic Examinations. The Agreement is valid from February 12, 2025 to December 31, 2029. Kern county Forensic Services, LLC confirmed the formal relationship with WSP.

The PAQ indicates that zero forensic examinations occurred during the past year. Investigatory files supported the number reported in the PAQ.

Although CDCR recently entered into a formal agreement with Kern County Forensic Services, LLC, Kern County Forensic Services, LLC staff indicated they are the only provider in Kern County, and as such have been providing sexual assault examinations for incarcerated persons at WSP for years. They are located on the campus of Adventist Health, formerly San Joaquin Hospital in Bakersfield. If emergency medical care is required, the patient would be transported to the Adventist Health Emergency Room. Sexual assault examinations are available anytime and are at no cost to the incarcerated person.

Subsection (d):

According to DOM Section Chapter 5, Article 44, alleged victims of sexual assault have the right to have an advocate present during the medical examination, investigatory process and subsequent emotional support services. DOM Chapter 5, Article 44, Section 54040.19, requires institutions to provide victims mailing addresses and phone numbers for outside rape crisis organizations, victim advocacy groups and immigrant service agencies.

WSP has entered into a Memorandum of Understanding with The Open Door Network for emotional support services related to sexual abuse. Posters in English and Spanish were submitted for review through the PAQ. Posters are also displayed for incarcerated persons at WSP, informing them how to contact the Open Door Network either by the hotline number or confidential written correspondence. Additionally, the Rape Crisis phone number is available by the phones. According to DOM Section 54040.8.1 and the Watch Commander Notification Checklist, the Watch Commander, when a victim is sent to the outside hospital in response to a sexual assault, the Watch Commander contacts the rape crisis center to request a victim advocate be dispatched. According to the agreement with Kern County Forensic Services, LLC, the Sexual Abuse Response Team will contact the victim advocacy or rape crisis center to

request a counselor. This was also confirmed by staff at WSP. Kern County Forensics Services, LLC staff, confirmed they coordinate an advocate with Open Door Network when an incarcerated person receives services. However, she noted, sometimes the institution coordinates the advocate before Kern County Forensics Services LLC has the opportunity to do so.

Subsection (e):

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

According to DOM Section 54040.8.1 and the Watch Commander Notification Checklist, if a victim advocate is not available, designated, trained staff from the facility respond to the hospital to serve as the victim advocate and support person for the examination. Should a community-based advocate not be available, mental health staff from WSP would fill that role.

Subsection (f):

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

Subsection (g):

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

Subsection (h):

WSP does not utilize staff to conduct sexual assault examinations but utilizes qualified providers from Kern County Forensics Services, LLC. The agreement notes Kern County Forensics Services, LLC will provide licenses and certificates "necessary to provide Sexual Assault Forensic Examinations under penal Code Section 13823.95".

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.22

Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 1, Article 35
- CDCR Department Operations Manual Chapter 3, Article 14
- CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

- Institution, DAP, CST, and AIU Responsibilities All Staff-on-Offender Prison Rape Elimination Act (PREA) Allegations flowchart
- Memorandum dated October 6, 2017; Subject: Policies to ensure referrals of allegations for investigations
- CDCR PREA Annual Report - Calendar Year 2023
- CDCR Public Website
- CDCR Public Website screenshot
- PREA Log

4. Interviews

- Agency Head
- Investigative Staff

5. Site Review

Findings:

Subsection (a):

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

The PAQ indicates there were 20 reports of sexual abuse or sexual harassment in the past year, with none being referred for administrative investigation and none being referred for criminal investigation. Investigators explained that all allegations are investigated the same and are not separated out as administrative and criminal. If through the investigation it is determined criminal activity occurred, investigators will refer the case to the District Attorney's Office for prosecution. Additionally, 20 reports include both incidents having occurred at WSP and have occurred elsewhere but reported to WSP staff.

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

Subsection (b):

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

The Department Operations Manual is available in its entirety on the CDCR public website. The DOM includes PREA and investigation policies and procedures. The DOM is found on the website under Regulations and Policy > Department Operations Manual.

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

The CDCR PREA Annual Report - Calendar Year 2023 was submitted and reviewed. The Annual Report breaks down types of allegations and further provides numbers of substantiated, unsubstantiated, unfounded, and ongoing investigations.

ISU provided tracking documentation of all investigations assigned to ISU and OIA. According to the PREA Log from February 2024 to February 2025, there were 19 investigations of sexual abuse and sexual harassment at WSP. During this time, one investigation of incarcerated person on incarcerated person sexual abuse was

	<p>substantiated and referred to the District Attorney for criminal charges. WSP investigators and investigation files, confirmed that all incarcerated persons alleging an incident of sexual abuse, sexual harassment, or staff sexual misconduct are initially queried by LDI in ISU to gain basic information typically within 24 hours of the allegation being known to staff. incarcerated person on incarcerated person allegations are subsequently investigated by WSP ISU staff. Staff on incarcerated person allegations are forwarded to OIA for a thorough investigation. According to the PREA Log, seven of seven investigations remain open with OIA and 1 of 12 remain open with ISU.</p> <p>Subsection (c) & (d):</p> <p>These subsections do not apply, as CDCR has the authority to and conducts administrative and criminal investigations.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> • CDCR In-Service Training Prison Rape Elimination Act (PREA) Version 3.0 BET Code 11054378; Instructor Text • CDCR On-The-Job Training (OJT) Prison Rape Elimination Act (PREA) Version 2.0 B ET 11053499; • Participant Module CDCR In-Service Training Inmate/Staff Interaction Version 2.1 BET Code 110 53211; Instructor Text • Prison Rape Elimination Act (PREA) Online negative training report; 2024 4. Interviews

- Training Manager

5. Site Review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.4 addresses staff PREA training. Policy requires all staff, including employees, volunteers, and contractors receive training related to prevention, detection, response and investigation of sexual violence, staff sexual misconduct, and sexual harassment. Training is conducted during new employee orientation, annual training, and is included in the Correctional Training Academy. DOM specifies training to include: gender specific training based on the offender population at the assigned institution, how to conduct cross-gender pat-down searches, transgender pat-down searches and unclothed body cavity searches, conducting searches in a professional, respectful manner, and in the least intrusive manner possible consistent with security needs, how to communicate professionally with inmates including those who identify as Lesbian, Gay, Bi-sexual, Transgender, Intersex, and Gender Non-Conforming. In-Service Training Prison Rape Elimination Act (PREA) Version 3.0 BET Code 11054378 was developed for all staff and updated in October 2022. This training address: zero tolerance policy; how staff fulfill their responsibilities to prevent, detect, report, and respond to sexual abuse and sexual harassment; dynamics of sexual abuse and sexual harassment in confinement; common reactions; how to detect and respond to signs of threatened and actual sexual abuse; professional relationships; professional communication, noting lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. Although training addresses the zero tolerance standard and notes the priority of preventing sexual violence, staff sexual misconduct and sexual harassment, training does not specifically address inmate rights. In-Service Training Prison Rape Elimination Act (PREA) Version 2.0 BET Code 11054378 was also reviewed in part. The highlighted topics include the zero tolerance policy, how to respond to sexual abuse and sexual harassment, and retaliation. Training provides an overview of relevant laws informing CDCR policies and procedures but do not go into specific laws regarding mandatory reporting to outside authorities. Staff are simply trained to report to a supervisor. Staff with the responsibility to notify outside agencies, such as investigators and medical staff, are provided training and direction.

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

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

	<p>standard.</p> <p>Subsection (b):</p> <p>According to DOM Section 54040.4, training is gender specific based on the offender population at the assigned institution. Basic Correctional Officer Academy, which all custody staff complete, addresses dynamics working with a male population. Staff who are assigned to or transfer to a female institution, receive additional training in the dynamics of working with a female population.</p> <p>Subsection (c):</p> <p>According to the PAQ, staff who have contact with incarcerated persons complete annual PREA refresher training. This is done either through on the job training or Learning Management System (LMS).</p> <p>Subsection (d):</p> <p>In person training is documented by participants signing a CDCR 844 Proof of Practice. Upon completion of PREA training through the LMS system, staff electronically sign the PREA Knowledge Review confirming an understanding of the training content. Since training is completed electronically, the system tracks participants training progress and completion. This information can be queried and populated into a report. The Prison Rape Elimination Act (PREA) Online negative training report for 2024 annual PREA training was submitted and reviewed. 55 WSP staff, custody and free staff have yet to complete 2024 PREA training. Staff were able to complete the 2024 training until April 1, 2025. After April 1, staff were noncompliant with training requirements. To become compliant, staff were then required to complete 2025 training. Additionally, staff who fail to complete mandatory annual training are issued corrective action Letter of Instructions.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44
- CDCR Department Operations Manual Chapter 10, Article 9

3. Documents

- On-The-Job Training (OJT) Prison Rape Elimination Act (PREA) Version 2.0 BET 11053499; Participant Module
- Memorandum dated October 6, 2017; Subject: Volunteer and Contractor
- CDCR 2301 PREA Policy Information For Volunteers and Contractors Part A and Part B

4. Interviews

- Community Resource Manager
- Volunteers
- Contractors

5. Site Review

- Volunteer file review

Findings:

Subsection (a):

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

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

According to the PAQ, WSP has 67 volunteers and contractors who have contact with inmates and have received the PREA In-Service Training. A list of 12 active volunteers was submitted in the PAQ. During the post audit, an updated list was submitted containing 49 volunteers. Two contractors were interviewed on site. They described the process to be approved for hire at WSP, including PREA training requirements and content of the module. Seven volunteers were contact and two volunteers were interviewed. They described the process for being approved to volunteer at WSP including the application, background check, training, and a TB test. Training includes

completion of PREA training prior to volunteering and then annually, thereafter. PREA training includes the volunteer's responsibilities to inmate sexual safety, how to respond, and reporting suspicions or knowledge of sexual abuse or sexual harassment. All contractors and volunteers noted they were trained on CDCR's zero tolerance policy on sexual abuse and sexual harassment.

Subsection (b):

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

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

Subsection (c):

CR form 2301, PREA Policy Information for Volunteers and Contractors. A file is created for each volunteer, similar to that of an employee. Included in the file is all documentation of completed orientation, annual training, and the CDCR 2301.

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

Volunteers and Contractors confirmed they signed an acknowledgement and understanding of the PREA training material they received.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.33

Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

- Sexual Abuse/Assault Prevention and Intervention; English and Spanish
- PREA Information for Orientation Handbook; English and Spanish
- Sexual Violence Awareness Brochure; English and Spanish
- Senate Bill 132 Brochure; English and Spanish
- CDCR-128-B Completed PREA Education; Blank form
- CDCR-128-B Completed PREA Education; 60 completed
- Shine the Light on Sexual Abuse; English and Spanish

4. Interviews

- Correctional Counselors
- Intake Staff
- Incarcerated Persons

5. Site Review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.4 addresses offender education. Offender PREA Education is to include verbal and written information specific to prevention / intervention; reporting; and treatment and counseling. According to Section 54040.4, initial PREA offender orientation is provided in the reception centers either in writing or multi-media presentation on a weekly basis. PREA posters which contain reporting numbers are to be posted in designated locations throughout the institution.

Additionally, the PREA Brochure entitled "Sexual Violence Awareness" and the PREA booklet entitled "Sexual Abuse/Assault - Prevention and Intervention" is to be distributed during initial processing in reception centers. These brochures and handbooks discuss zero tolerance and the Department position regarding sexual

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

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

According to the PAQ, 16995 incarcerated persons were admitted to WSP during the past year, and all received PREA information during intake. 65 incarcerated individuals were identified to be interviewed and their subsequent PREA Education documents reviewed. Five individuals did not have a signed PREA education CDCR 128B confirming education was completed. However, three of those individuals reported receiving PREA education.

WSP is a reception center. While in Receiving and Release (R & R), incarcerated persons are provided PREA education by receiving the handbook and watching the video. During the tour, the orientation handbook containing PREA information was readily available and the PREA video was being shown. The video is available in both English and Spanish.

Subsection (b):

According to the PAQ, 11944 incarcerated persons were admitted to WSP during the past 12 months and received comprehensive education on their rights to be free from sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. According to R&R staff, all incarcerated persons receive PREA Education while in R&R in the form of the Orientation Handbook and PREA video. Additionally, once on the housing unit, an orientation video is shown on dayroom room televisions, which include PREA education. Further, Correctional Counselors ensure incarcerated individuals know how to report incidents of sexual abuse and sexual harassment. For incarcerated individuals transferring from another CDCR institution, sexual safety and PREA is discussed during committee.

Subsection (c):

According to the PAQ, all incarcerated persons at WSP have received PREA education.

41 of 65 incarcerated Individuals interviewed recalled receiving the written PREA education and/or video, many noting this occurred during R&R or the first day WSP. Several incarcerated persons could not recall PREA Education, despite having signed the Receipt of Inmate PREA Education. All but two incarcerated individuals who stated they did not receive PREA education did not have a signed acknowledgement. All others signed PREA Education documentation.

Subsection (d):

DOM Section 54040.4 states "Appropriate provisions shall be made to ensure effective communication for offenders not fluent in English, those with low literacy and those with disabilities". DOM also allows for institutions to utilize offender peer education to enhance incarcerated person's knowledge and understanding of PREA and sexually transmitted diseases. The Orientation Handbook is available in both Spanish and English. The Sexual Abuse/Assault Prevention and Intervention, Sexual Violence Awareness Brochure, and the Senate Bill 132 Brochure are available in Spanish and English. Additionally, the PREA video shown in R&R and the institution is available in Spanish or English, as well as subtitles and American Sign Language. However, one individual who is very limited in English did not receive written material in his native language of Spanish during R&R despite being available. Additionally, PREA education, in the form of written material and video, is not available in other languages requiring the use of translator services. One incarcerated individual was not provided a translator in intake and as such did not receive PREA education.

CDCR also utilizes Effective Communication as noted in 115.16. The CDCR 128-B Receipt of Inmate PREA Education form includes a section "Ensure Effective Communication. This section requires staff to be aware of incarcerated person's limitations and gives staff the option to check a box indicating the person "has a TABE score of 4.0 or higher, can read and write, and understands PREA material given" or "Effective Communication (EC) is required". If EC is required, the staff checks a disability code, what accommodation was made, if the incarcerated person asked questions, and if the incarcerated person summed information. According to the submitted CDCR 128-B Inmate PREA Education forms, Effective Communication was addressed for each person.

Subsection (e):

DOM Section 54040.4 further requires PREA offender education to be documented on form CDCR 128-B, Receipt of Inmate PREA Education, in which the incarcerated person signs the form indicating they received the training.

System. The CDCR 128-B includes the following training:

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

During the tour an R&R supervisor was interviewed. The supervisors explained the intake process. All incarcerated persons are shown the PREA video and receive a copy of the Orientation Handbook. The supervisor meets with the incarcerated person to complete the initial PREA Risk Screen. The incarcerated person then signs the CDCR 128-B Receipt of Inmate PREA Education.

	<p>WSP submitted 60 completed and signed CDCR 128-B acknowledging PREA Education. An additional five were not available.</p> <p>Subsection (f):</p> <p>Shine the Light on Sexual Abuse Posters in English and in Spanish were submitted for review. The Shine the Light on Sexual Abuse informs incarcerated persons that CDCR has a zero tolerance policy and provides several ways in which an incarcerated person may report sexual abuse, sexual harassment, or retaliation; such as the Office of Internal Affairs, tell any staff member, and have a family or friend contact the institution. Contact information for the Office of the Inspector General is also noted and provides an address and phone number. During the site review of WSP, PREA posters were visible on all housing units and throughout common areas of the institution, such as in education, chapel, program areas, kitchen, and visiting areas. Additionally, incarcerated persons cited the posters as a means in which they received PREA information.</p> <p>Recommendation: On a regular schedule (monthly/weekly) run a report to ensure all new admissions received and acknowledged receiving PREA education.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> • CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators Version 1.0; BET 11055853 and 11057915; • Participant Workbook and Training Power Point • PREA Locally Designated Investigator - OCS - IST 11057915; OIA and WSP

- Basic Investigators Course Enrollments - OCS - IST 11055853; OIA
- PREA Log; 2024 and 2025
- REA Locally Designated Investigator - OCS - IST 11057915; Training Roster

4. Interviews

- Investigative Staff

5. Site Review

- Investigatory file review

Findings:

Subsection (a):

WSP follows CDCR DOM Chapter 5, Article 44, Section 54040.4 Education and Prevention, which states, "All employees who are assigned to investigate sexual violence and/or staff sexual misconduct will receive specialized training per PC Section 13516 (c)". Additionally, Section 54040.3 defines Locally Designated Investigator (LDI) as "The Investigative Services Unit Investigator or designated Institutional staff who have been trained to conduct investigations into allegations of sexual violence and/or staff sexual misconduct".

Two WSP investigators were interviewed and confirmed having completed the training specific to conducting sexual abuse investigations. Training records were submitted.

Subsection (b):

CDCR Specialized PREA Training for Locally Designated Investigators Power Point and Participant Workbook were submitted in their entirety for review. Based on these documents, training included interviewing techniques, the use of Miranda and Garrity warnings, evidence collection, and the criteria and evidence required to substantiate a case. Both investigators reported the specialized training included topics as noted in this standard, addressing in detail interviewing and treatment of victims, evidence collections, first responder duties, and roles and responsibilities for investigators.

Subsection (c):

According to DOM Section 54040.4, it is the responsibility of the PCM to ensure employees investigating incidents of sexual violence or staff sexual misconduct are properly trained. Staff training is documented on the CDCR 844, Training Participation Sign in Sheet.

According to the PAQ, there are 16 specially trained PREA investigators at WSP.

Course Enrollments for Basic Investigators Course and PREA Locally Designated

	<p>Investigator Course Enrollments report was submitted. The PREA Locally Designated Investigator report lists 20 WSP staff who have completed PREA Locally Designated Investigator training. Additionally, the completion report for PREA Locally Designated Investigator - OCS - IST 11057915 for investigators assigned to OIA was also submitted, indicating 215 investigators assigned to OIA completed specialized training for PREA investigators. Finally, assigned investigators listed on the PREA Logs for 2024 and 2025 were confirmed to have completed the specialized PREA Locally Designated Investigator training.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • CDCR Department Operations Manual Chapter 3, Article 18 General Training 3. Documents <ul style="list-style-type: none"> • Memorandum dated August 9, 2017; Subject: Prison Rape Elimination Act - Specialized Training for Medical and Mental Health Staff • CDCR On-The-Job Training Prison Rape Elimination Act Policy Specialized Training for Medical and Mental Health Staff 3.0 Course Code: 11057450; Lesson Cover Sheet • Course Enrollments - Prison Rape Elimination Act (PREA) - Specialized Training Online - HCS - OJT - 11057450 4. Interviews <ul style="list-style-type: none"> • Medical Staff • Mental Health Staff 5. Site Review

- File Review

Findings:

Subsection (a):

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

According to the PAQ, 221 medical and mental health staff regularly work at WSP with 98% having completed training. In a memorandum dated August 9, 2017 to California Correctional Health Care Services Executive Staff, Regional Health Care Executives, and Chief Executive Officers from the Director of Health Care Policy and Administration, directs all Medical and Mental Health staff practitioners to receive specialized PREA training in addition to the training provided to all staff. The CDCR On-The-Job Training Prison Rape Elimination Act Specialized Training for Medical and Mental Health Staff Lesson Plan Cover Sheet was submitted for review. The training includes:

- Detecting signs of Sexual Abuse and Sexual Harassment
- Preserving Evidence
- Responding effectively and professionally
- Reporting

Five staff working in medical and mental health care were interviewed. Four staff confirmed completing PREA training and referenced training when they first started and annual block training. Training records indicate that medical and mental health care staff are assigned and complete specialized training. Medical and mental health care staff were aware of their responsibilities in terms of responding to and reporting incidents of sexual abuse and sexual harassment.

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

Subsection (c):

At the completion of the specialized Medical and Mental Health Staff On-The-Job Training, participants are required to complete a Training Acknowledgement Form. By signing the Training Acknowledgement Form, staff indicate they have received, read, understood and agreed to the policies and procedures as defined in the training. CDCR submitted training documentation identifying staff who have and have not yet

	<p>completed training. Documentation confirms 98% of medical and mental health staff have completed specialized training.</p> <p>Subsection (d):</p> <p>Medical and mental health staff who are hired through an agency, complete training required for all employees and specialized contractor training. This was confirmed during file review onsite and interviews.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • California Code of Regulation Title 15 Section 3269 Inmate Housing Assignments 3. Documents <ul style="list-style-type: none"> • California Penal Code Section 667.5(c) "violent felony" definition • Instructions for Completion of the PREA screening Tool • Memorandum dated August 28, 2017, Subject: Prison rape Elimination Act Risk Screening • Memorandum dated September 29, 2017, Subject: Prison Rape Elimination Act Risk Screening - Correctional Counselor Responsibilities • Memorandum dated July 23, 2020, Subject: Changes to the Prison Rape Elimination act Screening Form - Standard 115.41 Compliance • Memorandum dated April 3, 2023, Subject: Prison Rape Elimination Act Risk Re-Screening - Correctional Counselor Responsibilities • PREA Screening Blank • PREA Screening Job Aid and Instruction • PREA Screening form access; screenshot • PREA Screening completed; 67

- Reception Center – Prison Rape Elimination Act (PREA) Reassessment completed; 45
- Classification Committee Chrono; 12

4. Interviews

- PREA Coordinator
- PREA Compliance Manager
- Staff who conduct screening
- Incarcerated Persons

5. Site Review

Findings:

Subsection (a):

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

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

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

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

Subsection (b):

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

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

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

According to the PAQ, 14589 individuals were admitted to WSP during the past year and remained at WSP longer than 72 hours. According to the PAQ, all were screened for risk of victimization or abusiveness.

65% of the incarcerated persons interviewed or 39 incarcerated persons confirmed they were asked questions from the PREA Screening when they first arrived at WSP. Despite incarcerated persons reporting they either were not asked the screening questions or could not recall, documentation confirmed an additional 16 incarcerated persons were screened upon intake. Document review and interviews confirm over 92% of incarcerated persons are screened for risk of abuse and victimization upon intake. It should be noted that two individuals who were interviewed, reported being screened at the time of intake. However, documentation was not available. According to the documentation provided, 4 of the 5 who were not screened, also did not receive education upon intake suggesting the incarcerated person was not cooperative with the intake process, as others who were admitted on those dates were screened. WSP is substantially following procedures set by CDCR, in line with the PREA standards by conducting initial PREA Screens at the time of receiving.

Subsection (c):

WSP utilizes the PREA Screening tool. This screening tool was implemented in August 2017, as noted in a memorandum to Associate Directors, Wardens and PREA Compliance Managers. In September 2017, further direction was provided to ensure incarcerated persons who had previously been through intake were screened for risk of victimization and abusiveness. In the same memorandum to Associate Directors of the Division of Adult Institutions, Wardens and PREA Compliance Managers, direction was provided for subsequent reviews and documentation. In July 2020 the tool was modified to better assess for risk of victimization. This modification was announced on July 23, 2020 in a memorandum to Associate Directors, Wardens, Prison Rape

Elimination Act Compliance Managers and Chief Executive Officers. These memorandums, in conjunction with the PREA Screening Instructions, ensures the PREA Screening is administered consistently to all inmates.

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

Subsection (d):

The PREA Screening tool considers nine of the ten criteria as noted in this standard. CDCR does not consider whether an incarcerated person is detained solely for civil immigration purposes as a risk factor, as CDCR does not house individuals solely for immigration. Criteria seven of the standard asks whether the incarcerated person is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. Question seven on the PREA Screening asks "Do you consider yourself or have you ever been perceived by others to be Lesbian, Gay, Bi-Sexual, Transgender, Intersex, or Gender Non-Conforming?" The wording of the question does not explicitly ask for the screener's perception whether the inmate is gender non-conforming.

However, WSP staff administering the PREA Screening do not consistently answer according to their perception, but solely on what is reported by the incarcerated person. During the post audit period, additional training was provided to Lieutenants and Sergeants regarding the screening process specifically as it relates to the rater's perception of the incarcerated person as transgender. Training was done through email and documented on the CDCR 844.

Subsection (e):

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

Subsection (f):

A memorandum dated September 29, 2017 provides a process for "subsequent Reviews" in which the Correctional Counselor reviews the file and if there is new information that is related to PREA victimization or abusiveness towards other incarcerated persons, then it is reviewed during Unit Classification Committee. If the new information changes the "at risk" designation then a new PREA Screening form is completed. A memorandum dated April 3, 2023 reiterated the September 29, 2017

memorandum, outlining the reassessment process for non-Reception Centers.

According to the PAQ, 11944 incarcerated persons were admitted to WSP within the past 12 months whose length of stay in the facility was for 30 days or more and were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.

WSP houses incarcerated persons who are both in reception and transfers in from other institutions. As such, depending on the status, the person will either be reassessed utilizing the process for Reception Centers or will be reassessed based on the non-Reception Center process.

Staff completing the reassessments, confirmed that they are completed within 14 days of arriving on the yard, regardless of reception or non-reception status. Additionally, during committee incarcerated individuals are asked questions regarding sexual safety.

45 PREA Reassessments were submitted for review and 11 Classification Committee Chronos. Three of the PREA Reassessments were completed outside of the 30 day and all of the Classification Committee Chronos noted Reassessment within 30 days. All of the documentation indicated a face to face meeting was conducted with the incarcerated person and their perception of safety and concerns were noted. Two incarcerated persons did not have a completed reassessment; one being an individual who has been in segregated housing, while the second person was at day 34. During post-audit, one of the reassessments was completed, while the reassessment for the person in segregated housing remains due.

Subsection (g):

DOM Section 54040.7 Screening for Appropriate Placement requires "the inmate's risk level be reassessed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the incarcerated person's risk of sexual victimization or abusiveness". WSP investigators substantiated one incident of sexual abuse warranting an additional screening. Additional screening for substantiated incidents is the responsibility of the investigator. One investigation substantiated the allegations. The victim was transferred to another institution the day after the investigation was closed. Screening was completed at the new institution. Follow up screening for the suspect was not completed, as he is released from custody.

Subsection (h):

DOM Section 54040.6 forbids discipline when the incarcerated persons refuses to answer or not completely disclose information related to: mental, physical, or development disabilities; sexual orientation, sexual victimization, or perception of vulnerability. Staff interviewed confirmed that incarcerated persons would not be disciplined for refusing to answer or not completely disclosing information.

Subsection (i):

The PREA Compliance manager confirmed the PREA Risk Screen is housed in the electronic SOMS system. There are different levels of accessibility based on classification. The levels of accessibility are determined by CDCR. He indicated all custody staff who have access to SOMS would have some access to the information.

The PREA Coordinator described the access as “need to know basis”. For instance, custody staff and correctional counselors making housing assignments will have access to more information and have the ability to make assignments.

Recommendation: 115.41(b): It is recommended that the PREA Screening and Re-Screening practices as outlined in memorandums be formalized in the Department Operations Manual Chapter 5, Article 44.

Recommendation: 115.41(b): It is recommended that a process be developed to ensure those who are not screened upon intake are screened within 72 hours of admission. This may include a tracking and/or notification system and identifying and assigning specific staff to follow up with the PREA Screening.

Recommendation: 115.41(d) Change the wording of Section A question #7, separating the incarcerated person's self-report identifying as LGBTQ and the rater's perception if the incarcerated person appears gender nonconforming. The separation will strengthen the assessment and be clearer to the rater to ensure the assessment remains in line with standard 115.41.

Recommendation: 115.41(f) Mirror the PREA Reassessment process for non-reception incarcerated persons to that of reception incarcerated persons, particularly interviewing each incarcerated person in a private setting utilizing the PREA Reassessment form.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.42	Use of screening information
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	Auditor Overall Determination: Meets Standard
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Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44
- CDCR Department Operations Manual Chapter 6, Article 5 Classification Process
- DCR Department Operations Manual Chapter 6, Article 12 Treatment Categories
- California Code of Regulations, Title 15, Article 10 Classification

3. Documents

- California Penal Code Section 667.5(c) defines "violent felony"
- CDCR's compliance with 115.42; 5 pages
- Letter dated October 6, 2017, Use of Screening Information
- PREA Screening Instructions, 4 pages
- Memorandum dated September 29, 2017; Subject: Prison Rape Elimination Act Risk
- Screening - Correctional Counselor Responsibilities
- PREA Screening Job Aid and Instructions; 6 pages
- Memorandum dated April 3, 2023; Subject: Prison Rape Elimination Act Risk Re-Screening - Correctional Counselor Responsibilities
- PREA Screening; blank
- CDC 128-B Transgender Biannual Assessment - PREA
- Senate Bill 132 Brochure; English and Spanish
- Memorandum dated November 6, 2020; Overview of Senate Bill 132- Training
- Memorandum dated August 25, 2017; Subject: Transgender Biannual Reassessment for Safety in Placement and Programming

4. Interviews

- PREA Compliance Manager
- Random Staff
- Staff responsible for screening
- Incarcerated Persons

5. Site Review

Findings:

Subsection (a) & (b):

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

A memorandum dated April 3, 2023 to associate Directors in the Division of Adult Institutions, Wardens and PREA Compliance Managers addresses the rescreening process and timeframes. It is noted that the incarcerated person should be asked if they had additional relevant information that should be considered for future housing and/or program/ work assignments. This memo supports the memorandum dated September 29, 2017 to Associate Directors, Wardens, and PREA Compliance Managers regarding Prison Rape Elimination Act Risk Screening - Correctional Counselor Responsibilities, which states that the information gathered from the PREA Screening tool is to be used when assigning housing and work/program assignments. A memorandum dated October 6, 2017 further details the use of PREA Screening information. The memo indicates that the PREA Screening Form is conducted within 14 days of arrival at an institution for all incarcerated persons by the Initial Classification Committee. The memo quotes DOM Chapter 6, Article 5, Section 62010.8.3 Initial Classification Committee members, functions, and responsibilities. The memo also references Title 15, Article 10, Classification. Neither DOM 62010.8.3 or Title 15 references the PREA Screening. However, DOM does task this committee with initiating programs which may include educational, vocational training, work program, and privilege group designation.

DOM Chapter 5, Article 44, Section 54040.7 states that if during the initial intake screen or any other time during confinement with CDCR, an incarcerated person reports having experienced sexual victimization or previously perpetrated sexual abuse whether in an institutional setting or in the community, staff shall refer the inmate to mental health. Staff responsible for completing PREA screening reported that if an incarcerated person reports sexual victimization, a referral to mental health is immediately completed.

The PREA Compliance Manager confirmed that the PREA Screening occurs at R & R (Receiving and Release). The initial PREA screening is utilized when making housing decisions, ensuring a person at risk for victimization is not placed in cell with someone at risk for abuse. Staff also attempt to separate by building if possible. During committee, the results of the PREA screening are considered and it is in committee that incarcerated persons are assigned programs.

Subsection (c) & (g):

Based on DOM Chapter 6, Section 62080.14, incarcerated persons who have been diagnosed as transgender or intersex are referred to classification committee for review to determine appropriate institutional placement and housing assignment. Fourteen institutions are identified as having the necessary medical and mental

health services available to appropriately serve the transgender and intersex population. However, based on other case factors, inmates identifying as transgender or intersex may be placed at another institution. WSP is not identified as one of the institutions with appropriate medical and mental health services to support transgender and intersex individuals and as such, most individuals identifying as transgender or intersex are transferred out.

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

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

According to the PREA Compliance Manager, WSP does not serve as a transgender hub. incarcerated persons identifying as transgender or intersex are housed with the general population at WSP. Housing requests made by transgender or intersex incarcerated persons are considered. WSP also considers safety and security of the institution in all housing decisions.

Incarcerated persons who identify as transgender were reception and had not yet been seen by Classification Committee. However, they all denied being placed in a housing unit specific to the transgender population.

Subsection (d):

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

Subsection (e):

Both the PREA Compliance Manager and the Classification staff confirmed the incarcerated person's own views regarding their safety is considered when assigning housing and programming placements. Safety was consistently addressed with the

	<p>incarcerated person during Classification Committee reviews. Two of four incarcerated persons who identified as transgender recalled staff asking about their own perception of safety. These individuals were all in reception and had not yet seen Classification Committee for program assignments and housing review.</p> <p>Subsection (f):</p> <p>The PREA Compliance Manager reported that incarcerated persons identified as transgender and intersex are able to shower separately from others. Those who request to shower separately are allowed to shower at the close of dayroom when other incarcerated persons have returned to their cells. Incarcerated persons all confirmed being allowed to shower separate from others. One person noted that they were offered the opportunity to shower separately and did not have to ask.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • California Code of Regulations Title 15, Article 7 Section 3335 3. Documents 4. Interviews <ul style="list-style-type: none"> • Warden • Staff working segregation 5. Site Review <p>Findings:</p> <p>Subsection (a):</p>

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

According to the PAQ, during the past year, zero incarcerated persons have been placed into involuntary segregation pending an assessment.

The Warden confirmed that WSP has not used segregated housing in the past year as a means to protect individuals from sexual abuse. He indicated that it is an option, citing 30 days as the time frame, but there are other ways to ensure safety such as single cell, changing housing unit or moving to a different facility.

Staff working in the segregated housing unit also confirmed incarcerated individuals at risk for victimization have not been placed in segregation.

Subsection (b):

Title 15 Article 7 Section 3335 Segregation Housing addresses Administrative Segregations for an investigation related to being the victim of a PREA incident e.g. sexual abuse, staff sexual misconduct, sexual harassment. Policy instructs that if placement is related to a PREA incident, the incarcerated person is afforded all programs, privileges and education. If these are restricted, staff are required to document: the opportunities that have been limited; the length of time of the limitation; and the reasons for such limitations. Should an individual be placed in segregated housing for safety, they would be afforded the same programming as other individuals on the segregation housing unit.

Subsection (c):

According to Title 15 Article 7 Section 3335, incarcerated person in Non-Disciplinary Segregation (NDS) for a PREA related concern, the incarcerated person should only be assigned to NDS only until alternative means of separation from the alleged abuser can be arranged. This should ordinarily not exceed 30 days. If the continued placement is deemed necessary to keep the incarcerated person separate from likely abusers, every 30 days the incarcerated person will appear before the Institution Classification Committee (ICC) to discuss housing needs. DOM Section 54040.6 and 54040.14.1 outline in detail the review steps and documentation which are to occur when an incarcerated person at high risk or victim of sexual abuse are placed in segregation.

According to the Pre-Audit Questionnaire, during the past year, zero incarcerated persons at risk of sexual victimization were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. This was confirmed by the Warden and staff working in segregation.

Subsection (d):

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

Subsection (e):

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

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • California Code of Regulations Title 15 Section 3401.5 and 3401.6 3. Documents <ul style="list-style-type: none"> • Sexual Abuse/Assault Prevention and Intervention pamphlet; English and

Spanish

- Sexual Violence Awareness brochure; English and Spanish
- PREA Information For Orientation Handbook; English and Spanish
- Shine the Light on Sexual Abuse poster; English and Spanish
- CDCR-128-B Receipt of Inmate PREA Education
- PREA Confidential Correspondence with Rape Crisis Center; mailroom notice
- Prison Rape Elimination Act (PREA) On the-Job Training Module, Prison Rape Elimination act (PREA) version 2.0; BET ID 11053499
- CDCR Public Website web inquiry
- Incarcerated Person Orientation Manual for Reception Centers; version 2024 and revised February 2025

4. Interviews

- PREA Compliance Manager
- Office of the Inspector General (OIG)
- Random staff
- Mailroom staff
- Incarcerated Persons

5. Site Review

- Phone testing to OIG
- Tablet review

Findings:

Subsection (a) & (b):

Offender reporting is addressed in two sections of the DOM. DOM Chapter 5, Article 44, Section 54040.4 Offender Education describes how an incarcerated person receives information how to report incidents. DOM notes, that while in reception center, incarcerated persons receive written or multi-media presentations offered in both English and Spanish. incarcerated persons are given a brochure entitled "Sexual Violence Awareness" and a booklet entitled "Sexual Abuse/Assault - Prevention and Intervention". Additionally, PREA information is posted throughout the facility, as observed during the tour.

DOM Chapter 5, Article 44, Section 54040.7 Detection, Notification, and Reporting addresses how incarcerated persons may report. incarcerated persons may report violations to the PREA policy directly to any staff member verbally or in writing, utilizing the Appeals Process, through the sexual assault hotline or through third party. The policy states "an offender may report sexual violence, staff sexual misconduct, or sexual harassment that occurs under the jurisdiction of the CDCR to any staff."

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

The PREA Information for Orientation Handbook was submitted in the PAQ for review in both English and Spanish, and was available on site. The Orientation handbook is provided to each individual during R & R. Page 23 of the Handbook is dedicated to reporting an incident and provides a variety of ways a person may report an incident of sexual violence, staff sexual misconduct, or sexual harassment. While on site, WSP provided copies of the Incarcerated Person Orientation Manual for Reception Centers 2024 and a copy revised February 2025. Pages 40 to 44 of the 2025 edition are dedicated to PREA and includes the options for reporting an incident. The handbook also includes the Sexual Abuse/Assault Prevention and Intervention pamphlet. Individuals are encouraged to report to any staff, including volunteers and contractors. Individuals may report anonymously. Phone numbers and addresses are provided for the CDCR Office of Internal Affairs and Office of the Inspector General PREA Ombudsperson Anonymous Reporting Information. Further, incarcerated persons are reminded that the information is also posted throughout the institution. Finally, the Orientation Handbook provides contact information for The Open Door Network.

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

incarcerated persons writing to The Open Door Network note on the envelope "Evid. Code 1035.4 Confidential/Privileged Communication" which identifies the post to be processed accordingly. This mail will not be read by CDCR staff and is only opened in the presence of the addressee. This information is provided to the incarcerated

person in the Orientation Handbook. Mailroom staff reviewed the process for incoming and outgoing privileged communications. The process ensures the content of the correspondence is not read by staff while still ensuring security of the institution.

The CDCR-128B is utilized to acknowledge receipt of the PREA Video, brochure, orientation handbook, and an explanation of the Opposite Gender Announcement. This form confirms that the incarcerated person has been provided the documents which contain the information on how to report sexual abuse, staff sexual misconduct, sexual harassment or retaliation. Completed CDCR-128B forms consistently demonstrate that incarcerated persons receive information needed to report an incident of sexual abuse or sexual harassment.

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

The PREA Compliance Manager confirmed incarcerated persons may report sexual abuse or sexual harassment to anyone. Specifically, incarcerated persons may use the hotlines to the OIG PREA Ombudsperson and may use the grievance process. Staff consistently acknowledged that incarcerated persons may report incidents to any staff either in person or in writing, using the 602 grievance process, or calling the phone numbers listed by the phones. Similarly, incarcerated persons consistently answered that they would report to staff, call the number as noted on the wall or less commonly, would file a 602.

Incarcerated persons are provided state tablets. Tablets are free and contain PREA facility information and an option to report incidents of sexual abuse and sexual harassment.

Utilizing the link on the CDCR public website, this auditor contacted OIG to test this process of reporting an incident of sexual harassment or sexual abuse. OIG acknowledged receipt of the submission and confirmed this is the process to report a PREA incident. This was acknowledged by OIG within 24 hours of the submission.

While on site, auditors tested the institution phones used by incarcerated persons to call the Office of the Inspector General Prison Rape Elimination Act (PREA) Ombudsperson. The calls were made in the same manner as an incarcerated person would make the call, noting a CDCR pin was not required to make the call. Prior to leaving a message, recorded instructions are provided to the caller, including the caller may remain anonymous. Two calls were made by auditors, on different yards and both were forwarded to the institution Warden, PCM, and Headquarters PREA Office. One call was forwarded within two hours of the message being left, while the second call was forwarded three days later.

Subsection (c):

According to DOM Chapter 5, Article 44, Section 54040.7, incarcerated persons may report violations to the PREA policy directly to any staff member verbally or in writing,

utilizing the appeals process, through the hotline or through a third party. incarcerated persons are informed in the Incarcerated Person Orientation Manual for Reception Centers that they may remain anonymous when reporting. When staff learn an offender is being or has been the victim of sexual violence, staff sexual misconduct or sexual harassment, they have a duty to immediately and confidentially report to the appropriate supervisor.

In reviewing the PREA In-Service lesson plan, all staff are trained to immediately report to their supervisor any information that indicates an offender is being or has been the victim of sexual violence, staff sexual misconduct or sexual harassment. After reporting, staff are to immediately document the reported information. Custody staff acknowledged that incidents may be made verbally, in writing, anonymously and through third party. Staff also consistently noted they would take the report, ensure the safety of the incarcerated person and contact a supervisor. Most incarcerated persons knew they could report an incident of sexual abuse or sexual harassment in person or in writing. For those who were not confident how to report, they noted they could find the information either on the posters or information available on their tablets.

Subsection (d):

California Code of Regulations Title 15, Section 3401.5. Staff Sexual Misconduct and 3401.6 Staff Sexual Harassment encompasses staff, volunteer, agent, or individual working on behalf of the Department of Corrections and Rehabilitation. By policy, any employee who observes or receives information from any source concerning staff sexual misconduct or staff sexual harassment shall immediately report the information or incident directly to the hiring authority, unit supervisor, or highest-ranking official on duty. Additionally, DOM Chapter 5, Article 44, Section 54040.7 requires staff to report immediately and confidentially to the appropriate supervisor any information indicating an incarcerated person may be the victim of sexual violence, staff sexual misconduct or sexual harassment. Training documents confirmed that staff are trained to report immediately and confidentially. All of the interviewed staff confirmed that they are able to report privately and confidentially, noting this is done directly with a supervisor.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- California Code of Regulations Title 15, Article 8. Inmate Sexual Safety
- California Code of Regulations Title 15, Article 1. Administrative Remedies for Inmates and Parolees
- Department Operations Manual Chapter 5, Article 44

3. Documents

4. Interviews

- Staff responsible for processing grievances

5. Site Review

- Investigatory file review

Findings:

Subsection (a):

The administrative procedure to address allegations of sexual violence or staff sexual misconduct is addressed in California Code of Regulations (CCR) Title 15, Division 3, Chapter 1, Article 8 Inmate Sexual Safety. Section 3084 specifically addresses "Inmate-on-Inmate Sexual Violence, Staff-on-Inmate Sexual Misconduct, and Sexual Harassment of Inmates. This section provides further direction in processing a grievance which contains in whole or in part such allegations.

Subsection (b):

CCR Title 15, Division 3, Chapter 1, Article 8, Section 3084 states the incarcerated person is not required to use any informal grievance process, or otherwise attempt to resolve with staff, an alleged incident of inmate-on-inmate sexual violence or staff-on-inmate sexual misconduct. Subsection (c) Staff-on-Inmate Sexual Conduct and Subsection (d) Inmate-on-Inmate Sexual Violence, specifically identifies no time limits for these allegations.

Subsection (c):

The formal grievance process is outlined in CCR Title 15, Division 3, Chapter 1, Article 1 Administrative Remedies for Inmates and Parolees. Section 3481 subsection (c) allows a claimant to choose to informally resolve a claim, but does not require a claimant to first attempt to resolve the claim informally. Section 3483 Grievance Review subsection (f) states that any individual whose personal interaction or is part of the claim, is excluded from participating in the grievance processes. This section

continues by providing several examples of instances in which the individual in question would not participate, such as being interviewed regarding the claim, serving as the reviewing authority, or participating on the committee to discuss the claim.

Subsection (d):

WSP reported in the PAQ, within the past year, 9 grievances filed alleged sexual abuse. Of those grievances, 0 allegations reached a final decision within 90 days of being filed and 0 needed an extension.

CCR Title 15, Division 3, Chapter 1, Article 1, Section 3483 Subsection (g) in which all grievances receive a written response within 60 calendar days after receipt of the grievance. However, section (a) states that at least one official will assess each written grievance within one business day of receipt to determine if it contains information concerning sexual abuse, including acts of sexual misconduct as defined by the federal Prison Rape Elimination Act and the California Sexual Abuse in Detention Elimination Act. If a grievance contains allegations of sexual abuse, the official shall immediately take appropriate action as required by laws and regulations. The official ensures the claimant is notified of the department's course of action within five business days. CCR is silent regarding time limit extensions for processing a grievance. The appeal process is addressed in Sections 3484 and 3485 and requires a decision within 60 days. If the Department is unable to respond within 60 calendar days, the grievance level decision serves as the final decision and exhaustion of the administrative remedies. Any individual with personal involvement with the claim is excluded from participating in the appeal process.

Subsection (e):

Both DOM Chapter 5, Article 44, Section 54040.7.2 addresses third party reporting of staff misconduct, sexual violence or sexual harassment. According to CCR Title 15, Division 3, Chapter 1, Article 1, Section 3481; Subsection (g), claimants who request assistance due to disability, lack of literacy, or need for translation services, or if staff detect a need for assistance staff may provide accommodations and utilize effective communication techniques as required by the Americans with Disabilities Act. Section 3084 also allows an incarcerated person to submit a Grievance on behalf of another incarcerated person only if the grievance contains an allegation of inmate-on-inmate sexual violence, staff-on-inmate sexual misconduct or sexual harassment.

According to the PAQ, zero incarcerated persons declined to move forward with a request for administrative remedy filed by a third party. Additionally, posters viewed during the site review informed incarcerated persons of reporting options, including third party resources such as OIG, Internal Affairs, staff, family, or friends.

Subsection (f):

According to CCR Title 15, Division 3, Chapter 1, Article 8, Section 3084, an initial response is provided to the incarcerated person within 48 hours. Additionally, an initial risk assessment is completed and documented within 48 hours with a

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

According to the PAQ, 7 emergency grievances were received alleging substantial risk of sexual abuse. All 7 received an initial response within 48 hours. The PAQ indicates 0 emergency grievances reached a final decision within 5 days.

Subsection (g):

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

According to the PAQ, during the past year, zero allegations resulted in discipline for filing a false report. Investigatory file review supported this report.

According to a Grievance Coordinator, grievances (602s) are retrieved each business day. The number of grievances collected are documented in the housing unit's log book and again in the grievance office. All grievances are reviewed for emergent issues, PREA concerns being an emergent issue. If a grievance contains a PREA allegation, an immediate referral is made to mental health and the yard supervisor is contacted to ensure safety of the incarcerated person. The grievance is uploaded into the system for CST in Sacramento to review. If appropriate, the grievance is then forwarded to OIA for investigation. CST determines if WSP should close the grievance. Once the incident is referred for investigation, the grievance is closed and the incarcerated person is provided notice. Emergent grievances are typically closed in one day.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

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

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

- PREA Confidential Correspondence with Rape Crisis Centers Mailroom notice
- PREA Information for Orientation Handbook; English and Spanish
- Sexual Abuse/Assault Prevention and Intervention pamphlet; English and Spanish
- Sexual Violence Awareness brochure; English and Spanish
- Rape Crisis Center Poster; English and Spanish
- Inmate Orientation Manual
- MOU Agreement letter to The Open Door Network dated September 13, 2024
- Memorandum of Understanding (MOU) between CDCR and The Open Door Network; 5 pages
- Incarcerated Person Orientation Manual for Reception Centers; 2024 and 2025

4. Interviews

- Mailroom staff
- Incarcerated Persons

5. Site Review

- Tested phone

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.8.2 provides victims of alleged sexual violence or staff sexual misconduct the right to a victim advocate or victim support person for forensic medical examinations and the investigatory interview. WSP has partnered with The Open Door Network to provide advocacy and support services. Incarcerated persons at WSP are provided the address and phone number for Open Door Network, via the Sexual Violence Awareness and the Sexual Abuse/Assault Prevention and Intervention pamphlets, and the Incarcerated Person Orientation Manual for Reception Centers. Additionally, posters specific to The Open Door Network are available and posted throughout the institution. Additionally, the address

for Just Detention is also provided to the incarcerated persons. Incarcerated persons may call the hotline phone number utilizing the institution phones, or they may write to them at the address provided.

Written correspondence with The Open Door Network may be identified as confidential and privileged communication and processed as such. These communications are only opened in the presence of the addressee. This was confirmed by mailroom staff.

WSP does not detain people solely for civil immigration purposes. However, if that were to occur, DOM 54040.7 allows those offenders contact with the consular officials or officials at the Department of Homeland Security.

44 incarcerated persons were aware of outside support services for those dealing with sexual abuse. Of those individuals, many cited the posters on the wall and were aware that services were available in writing and by phone. Those who were aware of the services, were also aware that these communications are private and several verbalized reasons why communication would not remain confidential such as thoughts of self-harm or suicide.

Subsection (b):

The Incarcerated Person Orientation Manual for Reception Centers is provided to all incarcerated persons in Receiving & Release. The PREA section provides comprehensive PREA information, including a section on privacy. According to the manual, written correspondence between an incarcerated person and a rape crisis center advocate or OIG/OIA is confidential. The outside of the envelope must state "Evid. Code 1035.4 Confidential/Privileged Communication" to be processed in this manner. To remind mailroom staff how to process confidential written correspondence with sexual assault services, reminder information is posted in the mailroom. The standard reminder and attached list of PREA Rape Crisis Centers was submitted for review. Incoming mail from an identified rape crisis center is not read by WSP staff but only opened in the presence of the addressee. The orientation manuals also address in person or virtual visits with a rape crisis advocate. These meetings will be arranged to occur in a setting which is private and confidential as possible. Additionally, telephone calls placed on the housing unit phone system to the local rape crisis center or OIA/OIG is non-recorded, secure, and private. Incarcerated persons are not required to use their pin for the call to be placed. This was confirmed on site by placing calls to both the Open Door Network and OIG.

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

Subsection (c):

According to the PREA Compliance Manager and submitted documents, CDCR

	<p>recently entered into an MOU with The Open Door Network to provide emotional support services for related to sexual abuse. The Agreement is valid from September 3, 2024 through June 30, 2029 and defines the roles and responsibilities of the institution and of The Open Door Network. The MOU defines Victim Advocate Services to include emotional support, crisis intervention, information, and referrals including but not limited to during the forensic examination and investigative interview. The MOU further defines emotional support services provided by The Open Door Network to include toll-free, non-recorded, non-monitored calls using the institution phone system; confidential written correspondence; in person crisis counseling; and telephone calls to the agency through a chaplain, counselor, psychologist, or ISU staff. Using the institution housing unit phones, calls are made without entering a pin number and may be completed anonymously and without being recorded. The call was answered. It was explained that the caller would not receive immediate crisis counseling, but would be referred for services.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • California Code of Regulations Title 15, Article 3. Documents <ul style="list-style-type: none"> • CDCR public website • Inmate Orientation Manual • Incarcerated Person Orientation Manual for Reception Centers; 2024 and 2025 4. Interviews <ul style="list-style-type: none"> • Incarcerated Persons 5. Site Review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.7.2 and 54040.7.2 addresses third party reports on behalf of incarcerated persons. Third party is defined as incarcerated persons, family, friends, attorneys, or outside advocates. Reports may also be received from personnel from other agencies or institutions.

Title 15, Article 2, Section 3391 addresses citizen complaints and how CDCR staff should handle those reports.

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

How to report an incident of sexual abuse, staff sexual misconduct, or sexual harassment is available on the CDCR public Website by searching "PREA" or "PREA Reporting Information". The home page did not contain a link directly to the PREA reporting page, however it is accessible through "about CDCR" - Division of Adult Institutions (DAI). The left side of the page contains Prison Rape Elimination Act (PREA) and clicking this link will give the viewer an option for Reporting Information. The PREA Reporting Information provides several ways in which a person may make a report. They may use the facility locator to contact the facility directly. A person may contact the Office of Internal Affairs by region using the address or phone number listed. However, the website does not provide guidance which region an institution belongs. Based on previous audits completed by this auditor, this auditor has confirmed if an allegation is made to an Office of Internal Affairs regional office in which the institution is not assigned, the report will be forwarded to the correct office and the institution where the alleged abuse, harassment or misconduct occurred. The final option for reporting is calling or mailing the Office of the Inspector General (OIG) PREA Ombudsperson. The Office of the Inspector General also provides a link to directly report misconduct or retaliation electronically. On March 23, 2025, this auditor contacted OIG electronically, using the link on the public website. A response was received by phone the next day.

Most incarcerated persons interviewed were aware that someone outside of WSP could report sexual abuse or sexual harassment on their behalf, most indicating family could make the report.

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

Corrective Action: A final analysis of the evidence indicates the facility is in

substantial compliance with this standard. No corrective action is necessary.

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

- On-the-Job Training Module Prison Rape Elimination act (PREA) version 2.0 BET ID: 11053499; Participant Module
- In-Service Training Prison Rape Elimination act (PREA) version 2.0; Power Point Slides
- CDCR 2304 Protection Against Retaliation (PAR) - Inmate; blank form
- CDCR 2305 Protection Against Retaliation (PAR) - Staff; blank form

4. Interviews

- Warden
- PREA Coordinator
- Investigative Staff
- Medical Staff
- Mental Health Staff

5. Site Review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.7 requires all CDCR staff to report immediately and confidentially to a supervisor if they have information that indicates an incarcerated person is being or has been the victim of sexual violence, staff sexual misconduct or sexual harassment. Policy provides specific direction to staff regarding the manner in which to report, to whom, and follow up documentation. Article 44 is

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

DOM Chapter 5, Article 44, Section 54040.13 addresses retaliation monitoring. The PCM or designee monitors the conduct and treatment of incarcerated persons or employees who report sexual violence or staff sexual misconduct and the victim to ensure there are no changes that may suggest retaliation. If retaliation is indicated, the assigned supervisor notifies the PCM who is responsible for remedying the retaliation. Retaliation monitoring for staff is documented using the CDCR 2305 Protection against Retaliation (PAR) - Staff. Retaliation monitoring for incarcerated persons is documented using the CDCR 2304 Protection against Retaliation (PAR) - Inmate.

On-the-Job PREA Training Module and In-Service Training PREA Power Point were submitted for review. This is required training for all staff. Staff are trained that it is their responsibility to report "immediately and confidentially, to the appropriate supervisor any information that indicates an offender is being, or has been, the victim of sexual violence, staff sexual misconduct, or sexual harassment". Training also includes CDCR's prohibition of retaliatory measures against employees or incarcerated persons and further defines retaliatory behavior as coercion, threats of punishment, or any other activities intended to discourage or prevent staff or incarcerated persons from reporting incidents or cooperating with investigations of incidents.

WSP submitted the Operations Manual Supplement Chapter 5 (Coordinated Response Plan) which outlines the responsibility of all staff to report immediately and confidentially to a supervisor any information that indicates an incarcerated person is or has been the victim of sexual violence, non-consensual sex acts, staff sexual misconduct or sexual harassment.

All of the staff interviewed indicated they are required to report any knowledge, suspicion, or information regarding sexual abuse or sexual harassment against an incarcerated person. They all furthered that they would report to a supervisor.

Subsection (b):

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

Subsection (c):

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

Subsection (d):

WSP does not house individuals under 18 years of age, as previously noted. When a report is made on behalf of a vulnerable adult CDCR/WSP would conduct the investigation and refer the case to the District Attorney's Office and any outside agency as appropriate.

Subsection (e):

DOM Chapter 5, Article 44 addresses the routing of allegations to the Locally Designated Investigator in Section 54040.7.2 and 54040.7.3 when a third party reports sexual abuse and sexual harassment by staff and by incarcerated person, respectively. Section 54040.7.4 addresses the process of notification from other facilities and includes the assignment of the allegation for investigation. Section 54040.12 Investigation states "all allegations of sexual violence, staff sexual misconduct, and sexual harassment" are to be investigated. The Warden confirmed that all allegations are investigated. According to the investigators, all allegations of sexual abuse and sexual harassment are investigated. Third party and anonymous reports are investigated in the same manner as all other reports.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 3. Documents

4. Interviews

- Agency Head
- Warden
- Random Staff

5. Site Review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.7 requires staff to immediately report to the appropriate supervisor any information that indicates an incarcerated person is being or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment. This section continues that any staff member with significant concern that an incarcerated person may be subject to sexual victimization should immediately notify a custody supervisor. DOM reminds staff of their responsibility to protect people in their custody, assist them, and refer them to medical and mental health for evaluation.

WSP reported in the PAQ, that 15 times in the past 12 months, the facility determined that an incarcerated person was subject to a substantial risk of imminent sexual abuse. They further reported that staff immediately took action to protect the individual.

The Agency Head confirmed that staff would take immediate action upon determining an incarcerated person was at risk of sexual abuse. Steps are taken to remove the threat, such as placing the alleged suspect in restrictive housing or transferring the alleged victim to another area of the institution.

The Warden confirmed that WSP has options to address an incarcerated persons risk of sexual abuse. WSP has the option to move individuals to different style of housing unit such as a cell or dorm style. Additionally, they have the ability to place a person in a single cell. He furthered that there would be communication with other staff ensuring mental health staff were involved.

Random staff who have regular contact with incarcerated persons consistently reported they would immediately remove the incarcerated person from the situation, gather more information and notify a supervisor. Additionally, they noted the use of single cell or a change in housing assignment as a means to protect an inmate at risk.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

- PREA Log; 2024 and 2025
- Warden to Warden Notifications; 1

4. Interviews

- Agency Head
- Warden
- Investigative Staff

5. Site Review

- Investigatory File Review

Findings:

Subsection (a):

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

At WSP, the hiring authority rests with the Warden. The Warden confirmed that when WSP receives an allegation of sexual abuse or sexual harassment that occurred at another institution, the Warden makes an email notification to the Warden of that facility. When WSP Warden receives notification of an incident which is alleged to have occurred at WSP, he includes ISU to ensure the allegation is investigated completely.

The PAQ indicated 5 allegations of sexual abuse or sexual harassment of incarcerated

persons while housed at another facility were received by WSP staff. According to PREA Log, over the past year, investigations have been initiated for allegations of sexual abuse or sexual harassment having occurred at another institution and being reported by inmates housed at WSP. One email notification made by WSP acting Warden was submitted in the PAQ for review. Investigatory file review indicated this is a common practice.

Subsection (b):

DOM Section 54040.7.4 dictates that the initial notification must be provided as soon as possible, but no later than 72 hours after receiving the allegation. Based on investigation file review, eight Warden to Warden notifications were made or received.

All notifications were made on the same day the report was received at the institution. ISU staff were included in the notifications.

Subsection (c):

According to DOM Section 54040.7.4, the notification may be made by telephone or electronic mail and followed up with a written summary of the alleged victim's statement. Notifications are documented by email correspondence which includes a summary of the allegation. This practice was confirmed during the review of investigation files.

Subsection (d):

According to DOM Section 54040.7.4, the facility in which the alleged incident occurred is responsible for conducting the investigation and conducting the Institutional PREA Review Committee. Additionally, the facility where the abuse was reported is responsible for completing the SSV-IA form.

The Agency Head confirmed the Warden is the point of contact for such notifications. The Warden then notifies the PCM and assigns an investigator to start and complete the investigation.

According to the PREA Log and investigators, incidents reported at WSP but occurring elsewhere were the responsibility of WSP to investigate. In the same manner, incidents occurring at WSP, yet reported at another institution, are the responsibility of the other institution to assign investigation numbers and hold the investigation. Investigations typically include a coordinated investigation between both institutions.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

- Initial Contact Guide (PREA)
- Custody Supervisor Checklist (PREA)
- In-Service Training - Prison Rape Elimination Act (PREA) Version 3.0 Course Code: 11054378; Instructor Text and Power Point
- PREA Log; 2024 and 2025

4. Interviews

- Medical Staff
- Mental Health Staff
- Random Staff

5. Site Review

- Investigatory File Review

Findings:

Subsection (a):

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

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

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

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

The PAQ indicated 13 sexual assault incidents were reported at WSP within the past 12 months and none were within 72 hours of the assault. The PREA Log confirms 13 sexual assaults reported in 2024 and 2025.

Subsection (b):

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

Non-custody staff interviewed indicated they would either immediately notify custody staff or immediately tell their supervisor.

First responder duties are addressed during In-Service Training - PREA. According to the In-Service Training Lesson Plan and Power Point, all staff are trained to report immediately and confidentially to the appropriate supervisor. Immediately after reporting to the supervisor, the employee is expected to document the information that was reported. The incident is then reported to the hiring authority via the watch commander. All staff are trained to refer to the Initial Contact Guide and are trained to request the victim not take actions that would potentially destroy evidence such as shower, brush teeth, remove clothing without custody supervision, use the restroom or consume liquids.

The PAQ indicated two allegations of sexual assault were first reported to non-custody staff and both incidents were immediately reported to security staff. According to investigatory file review, investigations began the same day the allegation was reported to staff.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.65	Coordinated response
	<p data-bbox="256 188 959 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 300">Auditor Discussion</p> <hr/> <p data-bbox="256 340 544 376">Evidence Reviewed:</p> <ol data-bbox="256 412 1469 1128" style="list-style-type: none"> <li data-bbox="256 412 719 448">1. Pre-Audit Questionnaire (PAQ) <li data-bbox="256 483 1206 618">2. Policy and Procedure <ul style="list-style-type: none"> <li data-bbox="328 586 1206 622">• CDCR Department Operations Manual Chapter 5, Article 44 <li data-bbox="256 658 1469 882">3. Documents <ul style="list-style-type: none"> <li data-bbox="328 761 1469 842">• Wasco State Prison Reception Center Operations Manual Supplement Chapter 5; 30 pages <li data-bbox="328 846 751 882">• Coordinated Response Plan <li data-bbox="256 918 475 1052">4. Interviews <ul style="list-style-type: none"> <li data-bbox="328 1021 475 1057">• Warden <li data-bbox="256 1093 459 1128">5. Site Review <p data-bbox="256 1240 384 1276">Findings:</p> <p data-bbox="256 1312 475 1348">Subsection (a):</p> <p data-bbox="256 1384 1469 1836">DOM Chapter 5, Article 44 ensures all staff responds appropriately to incidents of alleged sexual violence or staff sexual misconduct against incarcerated persons. The coordinated response plan submitted by WSP, addresses education and prevention; detection, notification, and reporting; first responder responsibilities, custody supervisor responsibilities; crime scene preservation and evidence collection; victim advocate; transportation responsibilities; forensic medical examinations; medical responsibilities; mental health responsibilities; and investigation. Included with the coordinated response plan is the PREA Initial Contact Guide, Watch Commander Notification Checklist, PREA Sexual Assault Interview Guidelines, Notification/Request for Confidentiality Information, PREA Medical Checklist, Transportation Guide, SART Facility Information, Mental Health Referral Chrono, and the SSV-IA.</p> <p data-bbox="256 1872 1445 2033">The Warden confirmed WSP has a plan to respond to incidents of sexual abuse. The plan is talked about in training, specifically separating the victim, evidence preservation, and referring to mental health. Additionally, he confirmed the availability of the checklists.</p>

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.66

Preservation of ability to protect inmates from contact with abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

3. Documents

- Agreement Between State of California and California Peace Officers Association Bargaining Unit 6 Effective July 3, 2023 through July 2, 2025; 228 pages
- Agreement Between the State of California and California association of Psychiatric Technicians (CAPT) covering Bargaining Unit 18 Psychiatric Technicians Effective July 1, 2022 through July 1, 2025; 171 pages
- Agreement Between State of California and Union of American Physicians and Dentists Covering Bargaining Unit 16 Physicians, Dentists, and Podiatrists effective July 1, 2023 through July 1, 2025; 144 pages
- Agreement Between the State of California and CAL Fire Local 2881 covering Bargaining Unit 8 Firefighters Effective July 1, 2022 through June 30, 2024; 158 pages
- Agreement Between the State of California and International Union of Operating Engineers (IUOE) covering Bargaining Unit 12 Craft and Maintenance effective July 1, 2023 through June 30, 2026; 220 pages
- Agreement Between State of California and Service Employees International Union (SEIU) - Local 1000 covering Bargaining Units 1,3,4,11,14,15,17, 20, and 21 Master Agreement effective January 2, 2020 through June 30, 2023; 915 pages

4. Interviews

- Agency Head

5. Site Review

Findings:

Subsection (a):

According to the Agency Head, CDCR has entered into or renewed collective bargaining or other agreements. All agreements allow CDCR to move or restrict alleged staff sexual abusers from contact with any incarcerated person pending an investigation. The Agreements between the State of California and the California Peace Officers Association, State of California and California association of Psychiatric Technicians (CAPT) covering Bargaining Unit 18 Psychiatric Technicians, State of California and Union of American Physicians and Dentist, State of California and CAL Fire Local 2881, State of California and International Union of Operating Engineers (IUOE) covering Bargaining Unit 12 Craft and Maintenance, and California and Service Employees International Union (SEIU) - Local 1000 were submitted in their entirety. General language is included in the agreements acknowledging the rights of management or the State. The rights to terminate or otherwise relieve employees from duty for lack of work or other legitimate reasons; to suspend, discharge or discipline employees is only noted in the agreements between the State of California and the California Peace Officers Association and State of California and CAL Fire Local 2881. State of California and Union of American Physicians and Dentist, State of California and International Union of Operating Engineers (IUOE) covering Bargaining Unit 12 Craft and Maintenance, and the State of California and Union of American Physicians and Dentist are not as inclusive and provide management the rights to determine the procedures and standards of selection for employment and promotion, layoff, assignment, scheduling and training. The State of California and California association of Psychiatric Technicians (CAPT) covering Bargaining Unit 18 Psychiatric Technicians does not include language as noted above, nor does the contract language limit the agency's ability to remove alleged staff sexual abusers form contact with incarcerated persons pending an investigation. Thus, allowing CDCR to protect incarcerated persons from staff abusers.

Consistent with the agreements, the Agency Head confirmed that CDCR has entered into collective bargaining agreements in which CDCR has not lost the ability to redirect staff. He furthered there is the potential to move staff from one facility to another or remove them from being on grounds until the case is investigated and an outcome determined.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

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

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44
- California Code of Regulations Chapter 1, Article 2

3. Documents

- CDCR 2304 Protection Against Retaliation (PAR) - Inmate; blank
- CDCR 2305 - Protection Against Retaliation (PAR) - Staff; blank
- Investigation Files; completed CDCR 2304

4. Interviews

- Agency Head
- Warden
- Investigator

5. Site Review

- Investigatory file review

Findings:

Subsection (a):

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

DOM Chapter 5, Article 44, Section 54040.13 addresses retaliation monitoring of incarcerated persons and employees who report sexual violence or staff sexual misconduct. DOM assigns the institutional PCM the task of monitoring for retaliation and further allows the PCM to delegate monitoring to staff assigned to the Investigative Services Unit or Supervisory staff.

The Agency Head confirmed that retaliation monitoring is part of the investigation process. The PCM designates someone to monitor and document monitoring efforts.

WSP follows department policy as noted above. WSP has assigned retaliation monitoring to staff from the Investigative Services Unit. The assigned investigator also conducts and document retaliation monitoring.

Subsection (b):

Protection measures are addressed in Title 15. Victims who report incidents of staff sexual misconduct or cooperate with a staff sexual misconduct investigation may have a housing change or transfer, removal of the alleged staff from contact with the victims, and emotional support services for incarcerated persons who fear retaliation for reporting staff sexual misconduct, sexual harassment, or for cooperating with an investigation. Investigators identified housing changes as protection measures. WSP has the ability to move incarcerated persons within the institution and between facilities to ensure the victim is separated from the abuser or anyone engaging in retaliatory behavior. Additionally, if retaliation occurs, an investigation into the allegation would occur. If staff is alleged to have engaged in retaliation, WSP investigators would take a statement and forwarded it to OIA for investigation. The Agency Head confirmed an investigation would be initiated if there was retaliation.

The Warden confirmed ways in which incarcerated persons may report retaliation to WSP staff including the follow up contacts between the investigator and alleged victim/witness and the grievance process. If retaliation is suspected, WSP will follow up with an investigation and disciplinary actions as appropriate. If retaliation to incarcerated individuals or staff, the Warden offered that aggressor could be transferred or housing assignments changed.

Subsection (c):

According to DOM Chapter 5, Article 44, Section 54040.13 following an allegation of sexual violence or staff sexual misconduct, monitoring for retaliation occurs for at least 90 days and may continue beyond 90 days if the initial monitoring indicates a continuing need. If retaliation is suspected, the PCM is required to act promptly to remedy the retaliation. According to the CDCR 2304 Protection Against Retaliation (PAR) - Inmate, monitoring includes a review of disciplinary reports, program changes, housing changes and an interview of the incarcerated person. Monitoring occurs every 15 days for 90 days. Further, the California Code of Regulations addresses what to monitor to indicate retaliation.

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

Retaliation Monitoring occurs for 90 days as evidenced in the investigation file review

and staff interviews. According to Investigator interviews, retaliation monitoring occurs every 15 days for a minimum of 90 days and includes both in person check ins and documentation review such as housing assignment changes, and involvement in disciplinary or facility incidents.

WSP reported in the PAQ that during the past 12 months, there have been no incidents of retaliation. This report was confirmed by the investigatory file review.

Subsection (d):

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

Investigators who conduct retaliation monitoring indicated monitoring includes interviews with the incarcerated person to assess for retaliation. This practice was confirmed by reviewing the completed CDCR 2304 forms in the investigatory files. All monitoring included in person interviews/safety checks.

Subsection (e):

California Code of Regulations, Title 15, Division 3, Chapter 1, Subchapter 5, Article 2; Section 3 401.5 notes that protection measures are available for staff or incarcerated persons who fear retaliation for reporting staff sexual misconduct or sexual harassment or for cooperating with investigations.

According to the agency head, if individuals who cooperate with an investigation expresses fear of retaliation, protections similar to the protections afforded victims, are also afforded to those who cooperate in an investigation. This would include taking steps to immediately stop the behavior and separate the people involved. This includes moving incarcerated persons to another institution or placing offenders into administrative segregation. An investigation would be initiated and continued monitoring would occur. According to the Warden, when retaliation is suspected, the allegation is investigated and disciplinary action taken if determined retaliation occurred.

Subsection (f):

DOM Section 54040.13 terminates the Department's obligation to monitor if the investigation determines the allegation was unfounded. This was consistent with investigatory file review. Two unfounded investigations were reviewed. One retaliation monitoring was terminated at the conclusion of the investigation, and one concluded 7 days later, as the investigation was pending final approval from the appointing authority.

Incarcerated persons who reported sexual abuse and monitored for retaliation had been transferred from WSP and not interviewed.

Corrective Action: A final analysis of the evidence indicates the facility is in

substantial compliance with this standard. No corrective action is necessary.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)
2. Policy and Procedure
 - CDCR Department Operations Manual Chapter 5, Article 44
 - California Code of Regulations Chapter 1, Article 7
3. Documents
4. Interviews
 - Warden
5. Site Review
 - Investigatory file review

Findings:

Subsection (a):

California Code of Regulations, Title 15, Division 3, Chapter 1, Subchapter 4, Article 7; Section 3 335 addresses administrative segregation and its use for non-disciplinary purposes. If an incarcerated person is placed in segregated housing related to being a victim of a PREA related incident, the incarcerated person is afforded the same programs and privileges as if in general population. The incarcerated person may remain in Non-Disciplinary Segregation only until an alternative means of separation from the abuser may be arranged. Every 30 days, the custody supervisor reviews and determines if segregation is necessary. Reviews are documented in the General Chrono.

According DOM Chapter 5, Article 44, Section 54040.14.1, victims of a PREA related incident may be removed from general population and placed on Non-Disciplinary Segregation status for ongoing safety concerns. The custody supervisor is responsible for reviewing the incident, documenting his or her observation and attending the

initial ICC to provide input into the final decision on retention or release from Non-Disciplinary Segregation. The custody supervisor is required to conduct assessment every thirty days from the date the victim is placed on Non-Disciplinary Segregation status.

According to the PAQ, zero incarcerated persons who alleged to have suffered sexual abuse were held in Non-Disciplinary Segregation status.

Investigation file review did not indicate alleged victims were placed in administrative segregated status in response to an allegation of sexual abuse or sexual harassment. It should be noted that no incarcerated person interviewed discussed fear of reporting an incident of sexual abuse or sexual harassment, believing they would be placed in administrative segregation. Additionally, staff did not identify the use of administrative segregation for victims as a response to address inmate safety.

Warden indicated that administrative segregation may be used to address safety, however there are other options to utilize first. Housing and yard changes may occur and the person may be placed in a single cell. If individuals are placed in administrative segregations for safety, it is for no more than 30 days. In the past year, administrative segregation has not been used to protect incarcerated individuals who have alleged sexual abuse.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 3, Article 14 • CDCR Department Operations Manual Chapter 5, Article 44 • California Code of Regulations Title 15 3. Documents <ul style="list-style-type: none"> • CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators

- Participant Workbook Version 1.0 BIC BET ID 11055853 (LDI Standalone: 11057915)
- CDCR Basic Investigators Course Specialized PREA Training for Locally Designated Investigators; Power Point
- PREA Records Retention Schedule
- Course Enrollments PREA Locally Designated Investigator - OCS - IST 11057915; OIA and WSP
- Course Enrollments Basic Investigators - OCS - IST 11055853; OIA

4. Interviews

- PREA Coordinator
- Warden
- PREA Compliance Manager
- Investigative staff

5. Site Review

- Investigatory file review

Findings:

Subsection (a):

WSP conducts both administrative and criminal investigations. DOM Chapter 5, Article 44, Section 54040.12 requires all allegations of sexual violence, staff sexual misconduct, and sexual harassment be investigated. Policy requires allegations of staff on incarcerated person sexual misconduct to be immediately reported to the Watch Commander and Hiring Authority who will assign an investigator. Likewise, allegations of incarcerated person on incarcerated person sexual abuse or harassment is required to be immediately reported to the Watch Commander who notifies Investigative Services Unit who will commence an investigation. Section 54040.7.2 and 54040.7.3 outlines the handling of allegations of misconduct, sexual violence or sexual harassment received from a third party by staff or incarcerated person respectively and includes who is responsible for the investigation.

DOM Chapter 3, Article 14 addresses Internal Affairs Investigations. Policy requires every allegation of staff misconduct be promptly reported, objectively reviewed, and investigated when appropriate. Section 31140.14 supports the requirement that allegations of staff misconduct must be investigated promptly. Complaints against staff and incarcerated persons are investigated utilizing standard investigatory procedures.

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

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

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

Subsection (b):

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

Subsection (c):

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

Subsection (d):

DOM Chapter 3 Article 14, Section 31140.21 addresses Administrative Investigations and states the prosecuting agency shall be consulted prior to any compelled subject interview when criminal charges or court proceedings are pending. Investigators are trained that when criminal charges are possible, they should not compel an interview. They are directed to contact OIA and consult with the District Attorney. Investigators confirmed they work with the District Attorney's Office when they discover a crime was likely committed.

Subsection (e):

Specialized PREA Training for Locally Designated Investigators (LDI) Participant Workbook and corresponding Power Point confirms investigators are trained to assess the reliability of the victim, suspect, and witness on an individual basis rather than the individual's status as an incarcerated person or staff. According to DOM Chapter 5, Article 44, investigators are required to address the reasoning behind a credibility

assessment in their investigation documentation.

The WSP investigators indicated that all persons involved are credible until they are proven otherwise. They look at the information to determine if it is reliable, true, and can be corroborated. Investigators also consider prior information provided by individuals and if that information was also reliable and corroborated.

Polygraphs are not utilized for an investigation into sexual misconduct, sexual abuse, or sexual harassment. This was confirmed by the investigators.

Subsection (f):

According to DOM Chapter 3, Article 14, Section 31140.21, administrative investigations are conducted for allegations of staff misconduct which are in violation of policy, procedure, or law. According to DOM Chapter 5, Article 44, Section 54040.12, the investigator should determine whether staff actions or failures to act contributed to the sexual abuse incident. This requirement is noted under the heading of Staff on Offender and is silent for Offender on Offender allegations. However, investigators confirmed that during an investigation they consider staff actions or staff failure to act in all investigations.

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

Investigatory files reviewed confirmed that staff actions or failures to act are considered and identified in all investigations and credibility assessments are completed based on the evidence.

WSP investigators also confirmed a report is compiled at the conclusion of each investigation. Confidential Memorandums were reviewed while on site and are maintained in the investigatory files. These contain a summary of the investigation, a review of the evidence and how it led to the outcome of the investigation.

Subsection (g):

DOM Chapter 3, Article 14, Section 31140.20 requires a criminal investigation be conducted for all allegations of employee misconduct when there is reason to believe the employee committed a violation of criminal law and an outside law enforcement agency is not conducting the investigation. The investigators identify and document

the potential criminal violation and the facts and evidence represented in support of the complaint. As noted in Subsection (f), allegations of sexual violence, staff sexual misconduct and sexual harassment are investigated, and the findings documented in writing. Administrative and criminal investigations are investigated and documented in the same manner.

Subsection (h):

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

According to the PAQ, WSP has referred 2 substantiated allegations for criminal prosecution since the last PREA audit in 2020. In the past year, one investigation has been substantiated and referred for criminal prosecution.

According to the investigators, when an investigation is substantiated, the case is referred to the District Attorney for review and prosecution. This was observed in the investigation file review.

Subsection (i):

DOM Chapter 5, Article 44, Section 54040.17 refers to the CDCR Records Retention Schedule for all case records associated with PREA related reports including incident reports, investigation reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling. The PREA Records Retention Schedule (RRS) requires the investigatory file be retained "for a minimum of 10 years or for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, whichever is longer". The schedule continues with a list of documents that may be included as well as "Any documents not identified which pertain to the PREA incident, investigation, or allegation". A copy of all items created in connection with an allegation, incident, investigation or inquiry are maintained in the Investigatory File retained by the Investigative Services Unit. Records retention is also addressed in the Specialized PREA Training for Locally Designated Investigators training.

Subsection (j):

According to DOM Chapter 5, Article 44, Section 54040.12, investigations continue even if the alleged suspect or victim is no longer employed or under the care and control of CDCR. WSP PREA Investigators confirmed they continue to investigate when the staff is no longer employed at WSP or the incarcerated person is no longer housed

	<p>at WSP. Investigators will reach out to other institutions, county, or community supports to reach individuals involved in the investigation.</p> <p>Subsection (I):</p> <p>WSP conducts both administrative and criminal investigations.</p> <p>The PREA Coordinator confirmed CDCR is responsible for criminal investigations. When OIA is investigating the incident, local investigators will reach out regularly to check on the status of the investigation. The Warden and PCM indicated that uniform staff are peace officers and have the authority to conduct all investigations. The Warden furthered that ISU would serve as the point of contact. This was confirmed by a supervisor in ISU.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 3, Article 22 • CDCR Department Operations Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> • Specialized PREA Training for Locally Designated Investigators Participant Workbook Version 1.0 • BIC BET ID: 11055853 (LDI Standalone: 11057915) 4. Interviews <ul style="list-style-type: none"> • Investigative Staff 5. Site Review

	<p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article Section 54040.12 requires no standard higher than the preponderance of the evidence to be used when determining whether allegations of sexual abuse or sexual harassment are sustained. DOM Chapter 3, Article 22, Section 33030.13.1 imposes preponderance of evidence as the standard to sustain any allegation of staff misconduct.</p> <p>The WSP investigators confirmed they use preponderance of the evidence standard when substantiating an allegation of sexual abuse or sexual harassment. They cited examples of evidence considered to reach this standard. This is consistent with training they received during the Specialized PREA Training for Locally Designated Investigators. A review of investigation files also supported this standard.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> • CDCR 128-B General Chrono; blank • CDCR 128-B General Chrono; 1 completed • Specialized PREA Training for Locally Designated Investigators Participant Workbook Version 1.0 • BIC BET ID: 11055853 (LDI Standalone: 11057915) • PREA Log; 2024 and 2025 4. Interviews

- Warden
- Investigative Staff

5. Site Review

- Investigatory File Review

Findings:

Subsection (a) (e):

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

This process is also trained during Specialized PREA Training for Locally Designated investigators.

The Warden confirmed the incarcerated person receives written notification using the CDCR-128B.

According to the PAQ, 6 allegations of sexual abuse and staff sexual misconduct have been investigated during the past twelve months and 6 alleged victims have been informed of the investigation outcome. According to the PREA Log, in the past calendar year, 0 staff sexual misconduct investigations closed. In the same time frame, 6 allegations of incarcerated person on incarcerated person sexual abuse were investigated and closed. An additional 4 allegations remain under investigation. Investigatory file reviewed confirmed that closure notices were provided to all incarcerated persons who reported sexual abuse or harassment in which the investigation was closed.

Subsection (b):

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

Subsection (c):

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

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

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

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

WSP reported in the PAQ, zero substantiated or unsubstantiated investigations of sexual abuse committed by a staff member against an incarcerated person in the past 12 months. In the past year, zero staff investigations have been closed, with 2 WSP investigations remaining open. These investigations are being conducted by OIA.

Subsection (d):

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

One investigation at WSP was referred to the District Attorney's office for prosecution. The decision to not charge was received after the 128-B was issued to the victim. He was subsequently transferred to another institution prior to the District Attorney deciding not to charge the case.

Subsection (f):

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

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

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

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 3, Article 22
- CDCR Department Operations Manual Chapter 5, Article 44
- California Code of Regulations Chapter 1

3. Documents

- PREA Log; 2024 and 2025

4. Interviews

- Investigative Staff

5. Site Review

- Investigatory file review

Findings:

Subsection (a):

CDCR staff discipline as it relates to sexual misconduct is addressed in Title 15, Division 3, Chapter 1, Subchapter 5, Section 3401.5 and DOM Chapter 3, Article 22. Section 3401.5 of Title 15 defines Staff Sexual Misconduct "as any sexual behavior by a department employee, volunteer, agent or individual working on behalf of the Department of Corrections and Rehabilitation, directed toward an inmate or parolee". Retaliation against employees and protection measures is also addressed in this section. DOM Chapter 3, Article 22 addresses potential disciplinary action. Chapter 3 outlines an Employee Disciplinary Matrix. The Matrix includes potential disciplinary actions for sexual misconduct involving staff, to include "harassment; over familiarity with an inmate; and sexual misconduct with an inmate". The potential penalties include a range from reprimand to dismissal; with the base penalty being salary reduction or suspension without pay. The base penalty is applied unless there are mitigating or aggravating factors. The only penalty noted for sexual misconduct with an incarcerated person(s)/parolee(s) is dismissal.

Subsection (b) & (c):

The Employee Disciplinary Matrix serves as a foundation and guide when imposing discipline for staff misconduct. According to DOM Chapter 3, Article 22, Section 33030.17, when applying the Employee Disciplinary Matrix, "no favor is afforded due

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

According to the PAQ, in the past 12 months, 1 staff violated the Department's policy against sexual misconduct or sexual harassment. The PAQ indicates that 1 staff has either been terminated or resigned prior to termination. It is noted in the PAQ, that this is an ongoing investigation. Additionally, zero have been disciplined short of termination for engaging in sexual abuse or sexual harassment. The PREA Logs indicate that zero staff investigations have been closed in the past year. During the audit period, two investigations remain open for staff sexual abuse and six remain open for staff sexual harassment.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.12.3 addresses reporting to relevant licensing bodies and mirrors 28 C.F.R. Part 115 by requiring "all terminations for violations of agency sexual misconduct or harassment policies, or resignation by employees that would have been terminated if not for their resignation shall be reported to any relevant licensing body by the hiring authority or designee". DOM specifically identifies licensed health care staff in the requirement to report to relevant licensing bodies when it is determined the health care staff engaged in sexual misconduct.

DOM Chapter 3, Article 22, Section 31140.20 addresses employee misconduct and referrals for prosecution. This section is silent for staff who resign prior to termination. However, investigators confirmed that they would continue investigating if the employee resigned prior to the conclusion of the investigation.

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

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 3, Article 14
- CDCR Department Operations Manual Chapter 5, Article 22
- CDCR Department Operations Manual Chapter 10, Article 9

3. Documents

- PREA Log; 2024 and 2025

4. Interviews

- Warden

5. Site Review

- Investigatory file review

Findings:

Subsection (a):

DOM Chapter 3, Article 14, Section 31140.20 addresses criminal investigations for allegations of staff misconduct. Volunteers and Contractors fall under the definition of staff and are criminally investigated if there is reason to believe the volunteer or contractor engaged in criminal behavior.

DOM Chapter 5, Article 22, Section 54040.12.4 prohibits contractors and volunteers from further contact with incarcerated persons if they engage in staff sexual misconduct. Additionally, policy requires notification to relevant licensing bodies.

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

Subsection (b):

DOM Chapter 10, Article 9, Section 101090.9 allows the hiring authority to limit or discontinue activities of a volunteer or volunteer group which may impede the

	<p>security and/or operations of the institution. DOM further outlines behaviors which may cause a volunteer or program to be discontinued, such as over familiarity with incarcerated persons, over familiarity with family and friends of incarcerated persons, or volunteer misconduct.</p> <p>According to the Warden, the institution has the ability to do a gate stop and not allow the individual into the institution. There would be an internal disciplinary review. Depending on the outcome, the individual could be blocked from further access to WSP and other institutions. Given the operations of WSP, the individual would not be reassigned to an area without incarcerated person access pending the investigation. Incarcerated persons are present throughout all areas of the institution. To ensure safety and security, the individual would not be allowed in the institution to continue working or volunteering.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • California Code of Regulations Title 15 3. Documents <ul style="list-style-type: none"> • PREA Log; 2024 and 2025 4. Interviews <ul style="list-style-type: none"> • Warden • PREA Compliance Manager • Medical Staff • Mental Health Staff 5. Site Review

- Investigatory file review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.15 speaks to the formal disciplinary process for incarcerated persons alleged to have committed sexual violence. The investigative process and the disciplinary process includes referral for criminal prosecution and classification determination, if warranted. If the allegations warrant a criminal charge, the process includes completion of the CDCR Form 115, Rules Violation Report (RVR). DOM references California Code of Regulations Sections 3316 and 3320; Referral for Criminal Prosecution and Hearing Procedures and Time Limitations, respectively.

The incarcerated person is also entitled to all provisions in CCR Title 15, Section 3315 which identifies serious rule violations as an offense punishable as a misdemeanor or felony and further provides examples of serious rule violations. This section address responses to the behavior, disciplinary hearing, segregation, and referral for prosecution. This section further identifies potential dispositions of the disciplinary hearing.

CCR Title15, Section 3323, addresses disciplinary credit forfeiture for the finding of guilt of a serious rule violation. Sexual assault and sexual battery fall under Division A-1 offenses and allows for the maximum credit forfeiture of 181-360 days.

According to the PAQ, zero incarcerated person have been found guilty of incarcerated person on incarcerated person sexual assault.

However, the PREA Log for 2024 and investigatory file review indicates one substantiated incarcerated person on incarcerated person abusive sexual contact. The alleged abuser received a Rules Violation Report (RVR) for Sexual Battery and was disciplined for the behavior after going through the disciplinary process.

Subsection (b):

CCR Title 15, Section 3315 identifies potential dispositions based on if the behavior is a first or 2nd or subsequent offence. The Warden confirmed the disciplinary process and rules are outlined in Title 15. Internally, a person would receive an RVR, Rules Violation Report. Dispositions consider the nature and circumstances of the behavior and discipline history of the individual. He furthered that policy delineates penalty when there is a preponderance of the evidence. If appropriate, the case would be referred to the District Attorney's Office for prosecution.

Subsection (c):

CCR Title 15, Section 3317, addresses mental health assessments for consideration

when a mental illness or developmental disability, cognitive or adaptive functioning deficits may have contributed to the behavior. The assessment is considered by the hearing officer when determining whether an incarcerated person should be disciplined and the appropriate method of discipline.

The Warden confirmed mental health is considered when determining appropriate sanctions. The mental health clinician reviews the record and completes a 115 MH to indicate if the individual's mental health contributed to the misconduct.

Subsection (d):

CCR Title 15, Section 3317 allows the hearing officer to consider mental health staff's assessment in addition to other relevant information when determining if the incarcerated person should be disciplined or the appropriate discipline when mental illness or developmental disability/cognitive or adaptive functioning deficits contributed to the behavior. Title 15 is silent on requiring incarcerated persons to participate in interventions as a condition to access programming or other benefits.

DOM Section 54040.7 addresses mental health evaluations of incarcerated persons who engage in incarcerated person on incarcerated person sexual abuse. DOM is silent on requiring incarcerated persons to participate in programming prior to accessing other programs and services.

Incarcerated persons are not required to participate in programming to address sexual offending in order to participate in other programs. WSP does not offer program designed specifically to address offenders of sexual abuse.

Subsection (e):

CCR Title 15, Section 3007 prohibits incarcerated persons from engaging in illegal sexual acts. CCR Title 15, Section 3323 Disciplinary Credit Forfeiture Schedule includes "Rape, attempted rape, sodomy, attempted sodomy, oral copulation, and attempted oral copulation against the victim's will". File review did not show evidence of an incarcerated person being disciplined for sexual contact with staff.

Subsection (f):

DOM Chapter 5, Article 44, Section 54040.15.1 addresses false allegations. Only after the investigation is completed and it is determined the allegations were either not made in good faith or the incarcerated person knowingly made a false report, then the incarcerated person may be subject to disciplinary action.

Section 54040.15.1 furthers that an allegation determined to be unsubstantiated or unfounded based on a lack of evidence does not necessarily constitute false reporting. Although, four investigation were unfounded, the alleged victims were not disciplined for making a false allegation.

Subsection (g):

According to the PAQ, CDCR prohibits all sexual activity between incarcerated

	<p>persons. CCR Title 15, Section 3007 states "may not participate in illegal sexual acts. Inmates are specifically excluded in laws, which remove legal restraints from acts between consenting adult".</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 • CDCR California Correctional Health Care Services Health Care Department Operations Manual 3. Documents <ul style="list-style-type: none"> • CDCR MH-7448 Informed Consent for Mental Health Care; blank form • CDCR 7552 Prison Rape Elimination Act Authorization for Release of Information; blank form • CDCR 128-MH5 Mental Health Referral Chrono • PREA Screening; #68 4. Interviews <ul style="list-style-type: none"> • Staff completing initial PREA Screening • Medical Staff • Mental Health Staff 5. Site Review <p>Findings:</p> <p>Subsection (a) & (b):</p>

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

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

WSP reported in the PAQ, 0% of incarcerated persons reporting prior victimization or perpetration of sexual assault was offered a follow-up meeting with mental health.

Section C of the PREA Screening form is titled Mental Health Referral. This section contains instructions to the screener when a Mental Health referral should be offered. The screener indicates the incarcerated person's response by checking whether the individual declined or accepted the referral. If the referral is accepted, the screener completes a CDCR 128-MH5, Mental Health Referral Chrono and submits it to Mental Health. 60 completed PREA Screenings were reviewed. Based on the directions on the PREA Screening tool, 5 individuals were offered a mental health referral. Section C of those five PREA Screenings were consistently completed, with all declining a referral to mental health. If those individuals accepted the referral to mental health, the R&R screener would immediately notify medical and mental health staff in R&R.

Subsection (c):

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

Subsection (d):

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

	<p>Reporting" and contains language which mirrors 115.81(d).</p> <p>Staff reported various ways in which they are able to privately report incidents or suspicions of sexual abuse and sexual harassment to ensure incidents are investigated and services are provided to the incarcerated person. Staff did not use the term "need to know" however staff talked about reporting incidents to supervisors. They did not indicate they would log the incident in a log book or tell other staff of the incident. Systems are in place to ensure only those staff who have a need to know to render care have the information. For instance, Risk Screening information is housed in SOMS and only staff who have a need for the specific information are granted those rights in the system. Additionally, medical staff follow the same HIPPA standard as community providers in protecting individual's medical information. Incarcerated persons would have to allow for a release of information.</p> <p>Subsection (e):</p> <p>The CDCR 7552 Prison Rape Elimination Act Authorization for Release of Information was submitted for review. The release of information is utilized by California Correctional Health Care services staff when incarcerated patients report an incident of sexual violence or misconduct that occurred outside of a correctional setting for the purpose of reporting the incident to law enforcement, prosecutor's office, or another appropriate agency. The CDCR MH-7448 Informed Consent for Mental Health Care was submitted for review. The form includes a section which states that information shared in treatment is confidential and will be discussed only with the treatment team except under the noted situations, which includes if the incarcerated person engages in acts of sexual misconduct or has been sexually assaulted by other incarcerated persons or staff.</p> <p>Mental Health providers confirmed that all incarcerated persons at WSP are over 18 years old. They report prior incidents of sexual assault and have shared with their patients limits of confidentiality.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed:
	<ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44
- CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1

3. Documents

- California Correctional Health Care Service Memorandum dated February 22, 2019; Subject: Discontinuation of Copayments For Health Care Services and Payment for Dental Prosthetic Appliances

4. Interviews

- Medical Staff
- Mental Health Staff

5. Site Review

Findings:

Subsection (a) & (b):

DOM Chapter 5, Article 44, Section 54040.8.3 addresses medical responsibilities and includes who responds to medical emergencies and the process for ensuring treatment is provided. Section 54040.10 addresses mental health responsibilities specific to when an incarcerated person returns to the facility after receiving emergency medical care.

The CDCR California Correctional Health Care Services (CCHCS) Health Care Department Operations Manual 4.1.6 covers Prison Rape Elimination Act Policy and Procedure. The purpose of this section is to ensure medically necessary emergency and follow-up treatment is provided to patients who are alleged victims or alleged abusers of sexual abuse or sexual harassment. When it is reported that an individual is the alleged victim of sexual abuse, medical staff immediately respond to assess and identify injuries and determine if they are urgent or emergent, and provide immediate emergency care. According to interviews and documentation, when an incarcerated person reports an incident of sexual abuse, the incarcerated victim is seen by medical staff at WSP. They will be seen by medical and assessed to determine if a person requires outside medical attention. Medical staff complete basic medical assessment and address emergent needs. The incarcerated person is then transported to Kern County Forensics Services, LLC for sexual assault examination.

Upon return to WSP from the sexual assault examination, incarcerated persons are seen in TTA before returning to a housing unit and are seen by mental health within four hours. Mental Health services as noted are addressed in the Correctional Health Care Services Health Care Department Operations Manual. Follow up care was

	<p>confirmed by staff.</p> <p>Subsection (c):</p> <p>DOM Chapter 5, Article 44, Sections 54040.8.3 and 54040.9 address medical follow-up testing for sexually transmitted diseases, including Hepatitis B and/or C, HIV testing, and pregnancy if appropriate. California Penal Code Section 2638 requires incarcerated victims receive immediate HIV/ AIDS and sexually transmitted infections prophylactic measures. Additionally, information is provided regarding sexually transmitted infections, HIV and pregnancy options.</p> <p>CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 addresses medical's responsibilities following the incarcerated person's return from a sexual assault examination. It notes that in addition to physical injuries, if not completed at the medical facility, test and treat sexually transmitted diseases, provide pregnancy services, and refer the incarcerated person to mental health. The CCHCS Appendix 1 outlines treatment recommendations for evaluation and follow-up treatment for sexual abuse. Medical staff indicated testing and treatment are completed at the community hospital, which was confirmed by the SANE provider. However, WSP medical staff follow up with the incarcerated person upon their return from the hospital.</p> <p>Subsection (d):</p> <p>On February 22, 2019, a memorandum was issued by the Receiver and Secretary of the California Correctional Health Care Services discontinuing copayments for health care services and dental prosthetic appliances. CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 clearly states that there are no costs to the alleged victim for medically necessary emergency and follow-up treatment, regardless of whether or not the alleged victim names the alleged abuser or cooperates with the investigation.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</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>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44
- CDCR California Correctional Health Care Services Health care Department Operations Manual Chapter 4, Article 1

3. Documents

- California Correctional Health Care Service Memorandum dated February 22, 2019; Subject: Discontinuation of Copayments For Health Care Services and Payment for Dental Prosthetic Appliances

4. Interviews

- Medical Staff
- Mental Health Staff

5. Site Review

Findings:

Subsection (a) & (b):

Incarcerated persons who have experienced sexual abuse in a confined setting or in the community are referred for medical and mental health evaluation and treatment. The CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 speaks to reports of sexual victimization or perpetration and requires the patient be offered a follow-up meeting with mental health and medical staff. It further requires mental health to determine level of care. Staff will arrange for follow-up services and continuity of care referrals when patients are transferred or released from custody.

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

Medical and mental health staff talked about the services provided to victims and perpetrators of sexual abuse including emergency medical care, mental health evaluations, and follow up care.

Subsection (c):

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

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

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

Subsection (d) &(e):

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

DOM Section 54040.8.3 also addresses pregnancy, stating that pregnancy options will be discussed with the victim. DOM Chapter 5, Article 45, Section 54045.2 addresses care, treatment, and security of pregnant offenders for the purpose of ensuring the safety of female offenders and the unborn child during pregnancy.

Subsection (f):

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

CDCR California Correctional Health Care Services Health Care Department Operations Manual Chapter 4, Article 1 identifies the outside contracted county SART facility responsible for STI/STD HSV, HVB, and HIV testing. However, incidents reported after the time in which a forensic medical examination is appropriate and following the incarcerated person's return from a sexual assault examination, WSP medical is responsible for providing the above noted testing and treatment. Staff interviewed related that upon return from outside medical care, medical staff meet with the incarcerated person. If additional medical care is required or the incarcerated person has further questions, medical staff will tend to their needs.

Subsection (g):

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

Subsection (h):

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

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

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> • Institutional PREA Review Committee (IPRC) DOM Section 54040.17; blank form • Subsequent Institutional PREA Review Committee (IPRC) DOM Section

54040.17; blank form

- PREA Log; 2024 and 2025

4. Interviews

- Warden
- PREA Compliance Manager
- Investigative Staff

5. Site Review

- Investigatory file review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.17 addresses the Institution PREA Review Committee (IPRC) and was revised on September 9, 2022. Each Hiring Authority is required to conduct an incident review of every sexual violence and staff sexual misconduct allegation which are substantiated and unsubstantiated.

The PAQ indicated 0 incidents of sexual abuse allegations were investigated and closed in the past twelve months. According to the PREA Log, in the past 12 months, three sexual abuse investigations were closed as unsubstantiated and one closed as substantiated. Four Investigations were closed as unfounded. All investigations involving staff remain open.

Subsection (b):

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

The Warden and PREA Compliance Manager confirmed the IPRC is convened at least one time per month unless the number of investigations dictate otherwise. Sometimes IPRC is held more often.

According to the PAQ, in the past 12 months, 0 incidents were reviewed within 30 days of the conclusion of the investigation. WSP tracks the IPRC on the PREA Log. According to the standard 115.86, four investigations from February 2024 through February 2025 required an IPRC. All four IPRCs were completed well within the 30 days of the investigation being closed. Investigatory file review confirmed the

completion of the IPRCs within 30 days of the investigation being concluded.

Subsection (c):

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

Subsection (d):

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

Consistent to DOM and the PREA standards, the Warden, PREA Compliance Manager, and Investigator confirmed the factors considered during the IPRC. Further, completed IPRC forms reviewed in the investigatory files confirmed factors reviewed during the IPRC.

Subsection (e):

DOM Chapter 5, Article 44, Section 54040.17 indicated the IPRC shall determine a plan to correct findings of inadequacy and implement the Action Plan or reasons for not doing so. The IPRC forms allow for corrective action documentation, such as "was a work order submitted", "what action is being taken", and "Was a Corrective Action Plan generated as a result of this incident". The Warden specifically noted they consider if there was a lapse and consider what could be improved upon. Further, completed IPRC forms confirmed factors reviewed during the IPRC. The completed IPRC forms did not note any corrective action needed or implemented.

Reviewed investigatory files contained IPRC documentation and confirmed WSP's compliance with this standard.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire (PAQ)

2. Policy and Procedure

- CDCR Department Operations Manual Chapter 5, Article 44

3. Documents

- Survey of Sexual Victimization 2023; blank form
- CDCR PREA Annual Report - Calendar Year 2019, 2020, 2021, 2022, 2023
- PREA Log

4. Interviews

- PREA Compliance Manager
- CDCR Headquarter Staff

5. Site Review

- Investigatory file review

Findings:

Subsection (a) & (c):

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

Subsection (b):

DOM Chapter 5, Article 44, Section 54040.20 also requires CDCR to aggregate

incident-based data at least annually. This data is compiled in the CDCR PREA Annual Report. The CDCR Annual Report for 2023 was submitted for review. During previous audits, this auditor reviewed CDCR Annual Reports from 2019, 2020, 2021, and 2022, indicating consistent compliance with this subsection.

Subsection (d):

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

Subsection (e):

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

Subsection (f):

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

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed: <ul style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 3. Documents

- CDCR Public Website
- CDCR PREA Annual Reports - Calendar Year 2019, 2020, 2021, 2022, and 2023

4. Interviews

- Agency Head
- PREA Coordinator
- PREA Compliance Manager

5. Site Review

Findings:

Subsection (a):

DOM Chapter 5, Article 44, Section 54040.17 Department PREA Coordinator mirrors standard 115.88 in that the agency shall review data collected according to 115.87 to assess and improve the effectiveness of its sexual violence prevention, detection, and response policies, practice, and training. Data is gleaned from a number of sources such as the SSV-IA, PREA Logs, investigations, and IPRC. DOM Chapter 5, Article 44, Section 54040.20 requires reports to include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of progress in addressing sexual violence and staff sexual misconduct. Information received from the institutions is used to identify any local and systemic issues. Corrective action is taken as needed, such as requesting additional cameras. Interviews with the agency head and PREA Coordinator confirm compliance with the policy and subsection (a) of this standard.

Subsection (b):

DOM Chapter 5, Article 44, Section 54040.20 requires the annual report to include a comparison of the current year's data and corrective actions with those from previous years. In a review of the PREA Annual Reports 2019, 2020, 2021, 2022, and 2023 as posted on the CDCR website, reports contain the agency's progress in addressing sexual abuse with comparative data and corrective action.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.20 requires the annual report to be approved by the CDCR Secretary and made available on the public website. The agency head confirmed the annual report is routed to CDCR Secretary. PREA Annual Reports 2015 through 2023 are posted on the CDCR public website. All of the reports contain the signature of the CDCR Secretary.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.20 allows for "specific material" to be

	<p>redacted from reports if when published the information would present a threat to the safety and security of the facility. If information is redacted, the report must indicate the nature of the material redacted. According to the PREA Coordinator, information collected for the annual report does not contain any information that would need to be redacted. However, if any personal information was present, it would be redacted. The reviewed PREA Annual Reports did not contain redactions or personal identifying information.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure <ul style="list-style-type: none"> • CDCR Department Operations Manual Chapter 5, Article 44 3. Documents <ul style="list-style-type: none"> • CDCR Public Website • CDCR PREA Annual Reports - Calendar Year 2019, 2020, 2021, 2022, and 2023 4. Interviews 5. Site Review <p>Findings:</p> <p>Subsection (a):</p> <p>DOM Chapter 5, Article 44, Section 54040.21 requires CDCR to ensure collected PREA data is securely stored. According to the PREA Coordinator information specific to 115.87 is collected and stored on a secured server. Submitted information, such as the SSVI, do not contain personal identifying information.</p> <p>Subsection (b):</p>

DOM Chapter 5, Article 44, Section 54040.21 contains language mirroring standard 115.89 (b) and identifying the CDCR website as the medium in which reports are made available. A review of the CDCR website confirmed this information is readily available.

Subsection (c):

DOM Chapter 5, Article 44, Section 54040.21 also ensures all personal identifiers are removed. The PREA Coordinator confirmed that reports do not contain personal identifying information. A review of the PREA Annual Reports located on the public website confirmed the reports contain no personal identifying information.

Subsection (d):

DOM Chapter 5, Article 44, Section 54040.17 requires all PREA records related to the annual report such as incident reports, investigation documents, offender information, counseling evaluations be retained according to CDCR records retention schedule. Section 54040.21 requires PREA data to be maintained for 10 years after the data is collected. PREA Annual Reports are available on the CDCR public website beginning with the 2015 report. Investigation files are maintained according to time frames noted in the standard.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Policy and Procedure 3. Documents <ul style="list-style-type: none"> • CDCR Public Website 4. Interviews 5. Site Review

Findings:

Subsection (a):

In a review of the CDCR public website, it is confirmed that CDCR ensures each facility it operates is audited at least once during a three-year audit cycle. Additionally, PREA Audit Reports for contracted community reentry facilities are also available on the CDCR public website.

Subsection (b):

In a review of the CDCR public website, CDCR ensures one-third of facilities are audited each year of the audit cycle. This audit falls in audit cycle 4, year 3.

Subsection (h):

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

Subsection (i):

Additional documentation was requested during pre audit, while on site, and during the post audit. The requested documentation was received without delay.

Subsection (m):

WSP is comprised of six facilities, of which five facilities are currently open. Auditors met with incarcerated persons for formal interviews in private office space. Staff were temporarily relieved of their post and met with auditors in a private space in the administration building.

Subsection (n):

On February 14, 2025, audit notices were emailed to the PREA Compliance Manager for posting six weeks prior to the auditors being on site, April 7, 2025 . On February 25, 2025, the PCM emailed 17 photos of the audit notice printed on green paper and posted on various housing units and common areas of the institution. The photos were all date stamped February 24, 2025. During the tour, audit notices were viewed on each housing unit, common areas, and staff only areas. Incarcerated persons were allowed to send confidential correspondence to the auditor, however, no correspondence was received.

Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none">1. Pre-Audit Questionnaire (PAQ)2. Policy and Procedure3. Documents<ul style="list-style-type: none">• CDCR Public Website4. Interviews5. Site Review <p>Findings:</p> <p>Subsection (f):</p> <p>In review of the CDCR Public Website, PREA Audit reports are available for audits completed in 2016 through 2024. The institution's most recent audit is available on the public website under the heading "Final PREA Audit Reports". Previous years audits are moved to the "View Archived CDCR Final PREA Reports" and remain accessible on the public website.</p> <p>Corrective Action: A final analysis of the evidence indicates the facility is in substantial compliance with this standard. No corrective action is necessary.</p>

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

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

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

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

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

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

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

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

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

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

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

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

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	no
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

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

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

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

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

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	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.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	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,	yes

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

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

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

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

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

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

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

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

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

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	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).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

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

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

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

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

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

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

(f)		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes